

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION					FOR INSURANCE COMPANY USE	
A1. Building Owner's Name JUAN J ALFRIDO					Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 102 ENCHANTED OAKS CT					Company NAIC Number:	
City SPRING		State Texas		ZIP Code 77388		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LT 141 BLK 5 ENCHANTED OAKS SEC 1						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5. Latitude/Longitude: Lat. 30°02'29.80"N Long. 95°25'53.30"W Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983						
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.						
A7. Building Diagram Number 1B						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s) N/A sq ft						
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A						
c) Total net area of flood openings in A8.b N/A sq in						
d) Engineered flood openings? ☐ Yes ☒ No						
A9. For a building with an attached garage:						
a) Square footage of attached garage 462 sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A						
c) Total net area of flood openings in A9.b N/A sq in						
d) Engineered flood openings? ☐ Yes ☒ No						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number HARRIS COUNTY UNICO AREAS 480287			B2. County Name HARRIS		B3. State Texas	
B4. Map/Panel Number 48201C0270	B5. Suffix M	B6. FIRM Index Date 10/16/2013	B7. FIRM Panel Effective/ Revised Date 10/16/2013	B8. Flood Zone(s) AE & X-SHADED	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 94.5	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☒ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 ☒ Other/Source: NAVD88 ,ADJ2001						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date: _____ ☐ CBRS ☐ OPA						

ELEVATION CERTIFICATEOMB No. 1660-0008
Expiration Date: November 30, 2022

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City SPRING	State Texas	ZIP Code 77388	Company NAIC Number	

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: GPS-Top Net (Local Real Time Network) Vertical Datum: NAVD 1988, ADJ 2001

Indicate elevation datum used for the elevations in items a) through h) below.

☐ NGVD 1929 ☐ NAVD 1988 ☒ Other/Source: NAVD 1988, ADJ 2001

Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

- | | | |
|---|--------------|--|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) | <u>93.33</u> | ☒ feet ☐ meters |
| b) Top of the next higher floor | <u>N / A</u> | ☒ feet ☐ meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | <u>N / A</u> | ☒ feet ☐ meters |
| d) Attached garage (top of slab) | <u>92.96</u> | ☒ feet ☐ meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) | <u>94.86</u> | ☒ feet ☐ meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>92.37</u> | ☒ feet ☐ meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>93.43</u> | ☒ feet ☐ meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | <u>N / A</u> | ☒ feet ☐ meters |

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No ☐ Check here if attachments.

Certifier's Name GEORGE JOSEPH MALIAKKAL		License Number RPLS 5180	
Title Registered Professional Land Surveyor			
Company Name Elevation Express Land Surveys		Firm Registration # 10191800	
Address 1450 W. Grand Parkway S., G-158		ElevationExpress@comcast.net	
City Katy	State Texas	ZIP Code 77494	
Signature 		Date 7/30/2020	Telephone 281-674-5685
		Ext.	

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)

C2e: A/C on blocks**Center of Road Elevation: 91.43 feet**

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City SPRING	State Texas	ZIP Code 77388	Company NAIC Number	

**SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED)
FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ ☒ feet ☐ meters ☐ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ ☒ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ ☒ feet ☐ meters ☐ above or ☐ below the HAG.
- E3. Attached garage (top of slab) is _____ ☒ feet ☐ meters ☐ above or ☐ below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ ☒ feet ☐ meters ☐ above or ☐ below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name

GEORGE JOSEPH MALIAKKAL, PRLS 5180

Address 1450 W. Grand Parkway S., G-158	City Katy	State Texas	ZIP Code 77494
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Signature	Date 7/30/2020	Telephone 281-674-5685
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Comments

☐ Check here if attachments.

ELEVATION CERTIFICATE

OMB No. 1660-0008
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IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
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City SPRING	State Texas	ZIP Code 77388	Company NAIC Number

SECTION G – COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ ☐ feet ☐ meters Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ ☐ feet ☐ meters Datum _____

G10. Community's design flood elevation: _____ ☐ feet ☐ meters Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date 7/30/2020

Comments (including type of equipment and location, per C2(e), if applicable)

☐ Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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102 ENCHANTED OAKS CT

City

SPRING

State

Texas

ZIP Code

77388

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption

7/30/2020

Clear Photo One



Photo Two

Photo Two Caption

7/30/2020

Clear Photo Two

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

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IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
102 ENCHANTED OAKS CT

City
SPRING

State
Texas

ZIP Code
77388

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption

7/30/2020

Clear Photo Three



Photo Four

Photo Four Caption

7/30/2020

Clear Photo Four