U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expires February 28, 2009

Important: Read the instructions on pages 1-8.

		0	•			'	<u> </u>			
			SECT	ION A - PR	OPERTY IN	FORM/	ATION	1	For Insurance Company Use:	
							Policy Number			
	2. Building Street Address 803, 6807, 6811, 6815, 68			ldg. No.) or P	.O. Route and	Box No	).		Company NAIC Number	
	City Spring State	Tx ZIP Code	77379							
	8. Property Description (L 5 BLK 2 PARK AT CYPF		mbers, Tax Parcel N	umber, Legal	Description, e	tc.)				
A4	Building Use (e.g., Res	sidential, Non-Re	sidential, Addition, A	ccessory, etc.	) Residentia	<u>l</u>				
	. Latitude/Longitude: Lat.									
	A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.									
	A7. Building Diagram Number 1									
Αč	A8. For a building with a crawl space or enclosure(s), provide  a) Square footage of crawl space or enclosure(s)  N/A sq ft  A9. For a building with an attached garage, provide:  a) Square footage of attached garage  440 sq ft									
	b) No. of permanent f			<u>14/74</u> 34 II					penings in the attached garage	
	enclosure(s) walls	within 1.0 foot ab	ove adjacent grade	N/A		wal	ls within 1.0 foo	ot above	e adjacent grade 0	
	c) Total net area of flo	ood openings in A	√8.b	<u>N/A</u> sq	in	c) Tot	al net area of fl	ood ope	enings in A9.b <u>0</u> sq in	
			TION B - FLOOD I			P (FIRN	/I) INFORMA			
	. NFIP Community Name arris County Unincorporate			B2. County N Harris	ame				. State xas	
В	34. Map/Panel Number	B5. Suffix	B6. FIRM Index	B7	. FIRM Panel		B8. Flood	t	B9. Base Flood Elevation(s) (Zone	
	48201C0245	L	Date 6/18/2007		ve/Revised D 6/18/2007	ate	Zone(s) AE		AO, use base flood depth) 110.4	
B10	. Indicate the source of t	he Base Flood E	levation (BFE) data	or base flood	depth entered	in Item	B9.	<u> </u>		
	☐ FIS Profile	⊠ FIRM	☐ Community Dete	rmined	Other (D	escribe)				
B11	. Indicate elevation datu	m used for BFE i	n Item B9:	GVD 1929	☐ NAVD 19	988	Other (Des	cribe) _		
	. Is the building located i			m (CBRS) are	a or Otherwis	e Prote	cted Area (OPA	A)?	 □Yes ⊠No	
	Designation Date N/A	:		☐ CBRS		4				
		0=0=10				1011/0			<u></u>	
		SECTIO	N C - BUILDING E	LEVATION	INFORMAI	ION (S	URVEY REQ	UIREL	<u>')                                    </u>	
C1.	Building elevations are b		☐ Construction Dra				Construction*	[	☐ Finished Construction	
	*A new Elevation Certific				•			5/4/1		
C2.	below according to the b			30, V (with BF	E), AR, AR/A,	AR/AE	, AR/A1-A30, A	IR/AH, F	AR/AO. Complete Items C2.a-g	
	Benchmark Utilized 110		•							
	Conversion/Comments	2001 Adjustmen	<u> </u>							
		-	_			(	Check the meas	suremer	nt used.	
a)	Top of bottom floor (inclu	uding basement.	crawl space, or encl	osure floor)	<u>110.6</u>	[	⊠ feet □	meters	(Puerto Rico only)	
,	b) Top of the next high	•		<u>-</u>	120.8	_			(Puerto Rico only)	
	, ,	st horizontal struc	ctural member (V Zoi	nes only)	N/A		⊠ feet □	meters	(Puerto Rico only)	
	d) Attached garage (to	op of slab)			<u>110.1</u>		⊠ feet □	meters	(Puerto Rico only)	
			uipment servicing th	e building	<u>109</u> .9		⊠ feet □	meters	(Puerto Rico only)	
	(Describe type of e		•		400.0		<b>7</b>		(Duarta Bian aut.)	
	<ul><li>f) Lowest adjacent (fing)</li><li>d) Highest adjacent (fing)</li></ul>				<u>109.8</u> 110.0	_			(Puerto Rico only) (Puerto Rico only)	
	g) Tiighest aajaeent (ii	moried) grade (F	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u>110.0</u>	Ľ	Z 1001	motoro	(Tuesto Priod Offiny)	
		SECTIO	N D - SURVEYO	R, ENGINEE	R, OR ARC	HITEC	T CERTIFICA	NOITA		
	is certification is to be sig									
	ormation. I certify that the Inderstand that any false								2223331	
		-		•					ATEOFTE	
Ц	Check here if comments	s are provided or	граск от тогт.						£ 5 4 5 3	
Се	ertifier's Name Barry D. A	dkins			License Nu	ımber 60	6391		- (*)	
Tit	le Principal Engineer		Company Nar	ne Daram Er	ngineers, Inc.				BARRY D. ADKINS	
Ad	ldress 5455 Dashwood #	700	City Bellaire		State Tx	ZIP C	ode 77401		66391	
Sig	gnature Blue	pl:	Date 11/26/2008	Telepho	one (713)528	-1552			SSIONAL ENGIN	

	py the corresponding information from		For Insurance Company Use:			
Building Street Address (including Apt., I 6803 Cypresswood Manor St	Unit, Suite, and/or Bldg. No.) or P.O. Route an	d Box No.	Policy Number			
City Spring State Tx ZIP Code 7737	9		Company NAIC Number			
SECTION D	O - SURVEYOR, ENGINEER, OR ARCH	TECT CERTIFICATION (CO	NTINUED)			
Copy both sides of this Elevation Certific	ate for (1) community official, (2) insurance ag	ent/company, and (3) building ov	wner.			
Comments C2e is an outside air-condition be used or relied upon for any other purp	ioning unit. The information on this certificate i pose, nor utilized for any other structure.	s intended for flood insurance on	the structure(s) surveyed and shall not			
Signature Bolds	Date	11/26/2008	☐ Check here if attachments			
SECTION E - BUILDING ELEVA	ATION INFORMATION (SURVEY NOT F	REQUIRED) FOR ZONE AO				
<ul> <li>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.</li> <li>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). <ul> <li>a) Top of bottom floor (including basement, crawl space, or enclosure) is</li></ul></li></ul>						
OF OTION I	- DODEDTY OWNER (OR OWNER)	DEDDECENTATIVE OFFI	IFIO A TION			
	F - PROPERTY OWNER (OR OWNER'S	•				
	ed representative who completes Sections A, E ents in Sections A, B, and E are correct to the Representative's Name		:MA-Issued or community-Issued BFE)			
N/A Address	City	State	ZIP Code			
	City	State	ZIF Code			
Signature	Date	Teleph	one			
Comments NONE						
	SECTION G - COMMUNITY INFO	RMATION (OPTIONAL)	☐ Check here if attachment			
	w or ordinance to administer the community's t	loodplain management ordinand				
G1.   The information in Section C w	plete the applicable item(s) and sign below. C was taken from other documentation that has b	een signed and sealed by a licer	nsed surveyor, engineer, or architect who			
•	elevation information. (Indicate the source and		, , , , , , , , , , , , , , , , , , ,			
	d Section E for a building located in Zone A (was G4G9.) is provided for community floodpla		nity-issued BFE) or Zone AO.			
G4. Permit Number	G5. Date Permit Issued		mpliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction ☐ Substantial	Improvement				
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 (PR) Datum						
G9. BFE or (in Zone AO) depth of flooding		☐ feet ☐ meters (PR) Datu				
Local Official's Name	-	Title				
Community Name Telephone						
Signature Date						
Comments						
			☐ Check here if attachments			

## Building Photographs See Instructions for Item A6.

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 6803 Cypresswood Manor St	Policy Number
City Spring State Tx ZIP Code 77379	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.





## Building Photographs Continuation Page

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
6803 Cypresswood Manor St	
City Spring State Tx ZIP Code 77379	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."



