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

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

ELEVATION CERTIFICATEImportant: 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 INSUF | RANCE COMPANY USE |
|---|---|------------|-----------------------------------|----------------------|----------------------------------|------------------------------------|
| A1. Building Owner's Name BRADLEY THOMPSON Poli | | | | | Policy Num | ber: |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 942 PAULETTE LANE | | | | IAIC Number: | | |
| | | | | | | |
| SAN LEON | | | State T e | exas | ZIP Code 7 | 7539 |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) ABST 10 PAGE 6 & 7 LOT 12 & PT OF LOT 1 BLK D RICHARDS SUB 2ND EXT | | | | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL-CONCRETE SLAB | | | | | | |
| A5. Latitude/Longitude: Lat. | | | | <u> </u> | | 927 NAD 1983 |
| A6. Attach at least 2 photogra | uphs of the building if th | e Certific | ate is being u | sed to obtain floor | d insurance. | |
| A7. Building Diagram Numbe | · <u>1A</u> | | | | | |
| A8. For a building with a craw | Ispace or enclosure(s): | | | | | |
| a) Square footage of cra | wlspace or enclosure(s) | N/A | | sq ft | | |
| b) Number of permanent | flood openings in the cr | rawlspace | e or enclosure | e(s) within 1.0 foot | above adjacent gra | ade N/A |
| c) Total net area of flood | openings in A8.b <u>N/A</u> | 1 | sq in | | | |
| d) Engineered flood oper | nings? 🗌 Yes 🔳 I | No | | | | |
| A9. For a building with an atta | ched garage: | | | | | |
| a) Square footage of atta | ched garage N/A | | sq ft | | | |
| b) Number of permanent | flood openings in the a | ttached g | arage within | 1.0 foot above adj | acent grade N/A | |
| c) Total net area of flood | openings in A9.b N/A | ١ | sq | in | | |
| d) Engineered flood openings? | | | | | | |
| | SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | | | | |
| B1. NFIP Community Name 8 | Community Number | | B2. County | Name | | B3. State |
| GALVESTON COUNTY | UNINC 485470 | | GALVES | TON | | Texas |
| B4. Map/Panel B5. Suffix Number | B6. FIRM Index Date | Effe | RM Panel ective/ vised Date | B8. Flood Zone(s) | B9. Base Flood E (Zone AO, us | levation(s) e Base Flood Depth) |
| 48167C0255 G | 08/15/2019 | 08/15 | /2019 | AE | 13 | |
| 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)? | | | | | | |
| Designation Date: CBRS OPA | | | | | | |
| <u> </u> | | • | _ | | | |

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| IMPORTANT: In these spaces, copy the corresponding in | FOR INSURANCE COMPANY USE | | | | | |
|--|--|--|--|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or B 942 PAULETTE LANE | Policy Number: | | | | | |
| City State SAN LEON | ZIP (Texas | 77539 | Company NAIC Number | | | |
| SECTION C – BUILDING ELEV | /ATION INFORMAT | ION (SURVEY RE | EQUIRED) | | | |
| C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when con | _ | ling Under Constru | ction* 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) Vertical Datum: NAVD 1988, ADJ 2001 | | | | | | |
| ☐ NGVD 1929 ☐ NAVD 1988 🔳 Other/So | Indicate elevation datum used for the elevations in items a) through h) below. | | | | | |
| a) Top of bottom floor (including basement, crawlspace) | ce, or enclosure floor) | 13.23 N/A | Check the measurement used. feet meters | | | |
| b) Top of the next higher floor | | N/A | feet meters | | | |
| c) Bottom of the lowest horizontal structural member | (V Zones only) | N/A | feet meters | | | |
| d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment service. | ing the building | N/A | feet | | | |
| (Describe type of equipment and location in Comm | , | 10.75 | feet meters | | | |
| f) Lowest adjacent (finished) grade next to building (I | • | 12.50 | feet meters | | | |
| g) Highest adjacent (finished) grade next to building (h) Lowest adjacent grade at lowest elevation of deck | • | N/A | feet meters | | | |
| structural support | NOINEED OD ADO | | | | | |
| SECTION D – SURVEYOR, E This certification is to be signed and sealed by a land surve | | | | | | |
| I certify that the information on this Certificate represents n statement may be punishable by fine or imprisonment und | ny best efforts to interper 18 U.S. Code, Sect | oret the data availa ion 1001. — | ble. I understand that any false | | | |
| Were latitude and longitude in Section A provided by a lice | | ■ Yes □ No | Check here if attachments. | | | |
| GEORGE JOSEPH MALIAKKAL | License Number RPLS 5180 | | TE OF TE | | | |
| Title Registered Professional Land Surveyor | | | S. REGISTERESTAN | | | |
| Company Name | | | | | | |
| | Firm Registration | n # 10191800 | GEORGE JOSEPH MALIAKKAL | | | |
| Address 1450 W. Grand Parkway S., G-158 Ele | vationExpress@ | comcast.net | 5180 5180 | | | |
| City | State | ZIP Code | NO SÜRVE | | | |
| Katy | Texas | 77494 | | | | |
| Signature george y maliskas. | Date 06/05/2023 | Telephone 281- | Ext. -674-5685 | | | |
| 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) CENTERLINE OF ROAD = 8.37' | | | | | | |
| | | | | | | |

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| MPORTANT: In these spaces, copy the corresponding informat | FOR INSURANCE COMPANY USE | | | | |
|--|--|--|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No. 942 PAULETTE LANE |) or P.O. Route and Box No. | Policy Number: | | | |
| SAN LEON State Texas | ZIP Code 77539 | Company NAIC Number | | | |
| SECTION E – BUILDING ELEVATION IN FOR ZONE AO AND Z | IFORMATION (SURVEY NOT CONE A (WITHOUT BFE) | REQUIRED) | | | |
| 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 ap the highest adjacent grade (HAG) and the lowest adjacent grad a) Top of bottom floor (including basement, | | er the elevation is above or below | | | |
| crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is | | | | | |
| E2. For Building Diagrams 6–9 with permanent flood openings prov the next higher floor (elevation C2.b in the diagrams) of the building is | | | | | |
| E3. Attached garage (top of slab) is | | | | | |
| E4. Top of platform of machinery and/or equipment servicing the building is | l feet mete | | | | |
| E5. Zone AO only: If no flood depth number is available, is the top of floodplain management ordinance? Yes No Ur | | ccordance with the community's certify this information in Section G. | | | |
| SECTION F – PROPERTY OWNER (OR OW | /NER'S REPRESENTATIVE) C | ERTIFICATION | | | |
| 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. | | | | | |
| The property owner or owner's authorized representative who comp community-issued BFE) or Zone AO must sign here. The statements | letes Sections A, B, and E for Z s in Sections A, B, and E are co | one A (without a FEMA-issued or rrect to the best of my knowledge. | | | |
| The property owner or owner's authorized representative who comp community-issued BFE) or Zone AO must sign here. The statements Property Owner or Owner's Authorized Representative's Name GEORGE JOSEPH MALIAKKAL, PRLS 5180 | letes Sections A, B, and E for Z s in Sections A, B, and E are co | one A (without a FEMA-issued or rrect to the best of my knowledge. | | | |
| community-issued BFE) or Zone AO must sign here. The statements Property Owner or Owner's Authorized Representative's Name | s in Sections A, B, and E are co | tate ZIP Code Texas TeMA-issued or rrect to the best of my knowledge. | | | |
| community-issued BFE) or Zone AO must sign here. The statements Property Owner or Owner's Authorized Representative's Name GEORGE JOSEPH MALIAKKAL, PRLS 5180 Address | city S Katy | tate ZIP Code | | | |
| community-issued BFE) or Zone AO must sign here. The statements Property Owner or Owner's Authorized Representative's Name GEORGE JOSEPH MALIAKKAL, PRLS 5180 Address 1450 W. Grand Parkway S., G-158 | City S Katy | tate ZIP Code Texas 77494 | | | |
| Property Owner or Owner's Authorized Representative's Name GEORGE JOSEPH MALIAKKAL, PRLS 5180 Address 1450 W. Grand Parkway S., G-158 Signature | City S Katy | tate ZIP Code Texas 77494 | | | |
| Property Owner or Owner's Authorized Representative's Name GEORGE JOSEPH MALIAKKAL, PRLS 5180 Address 1450 W. Grand Parkway S., G-158 Signature | City S Katy | tate ZIP Code Texas 77494 | | | |
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| Property Owner or Owner's Authorized Representative's Name GEORGE JOSEPH MALIAKKAL, PRLS 5180 Address 1450 W. Grand Parkway S., G-158 Signature | City S Katy | tate ZIP Code Texas 77494 | | | |

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| IMPORTANT: In these spaces, copy the corresponding information from Section A. | | | | FOR INSURANCE COMPANY USE | |
|--|-----------------------|----------------------------|------------|---|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 942 PAULETTE LANE | | | | Policy Number: | |
| SAN LEON | State Tex a | zIP Code 77 | 539 | Company NAIC Number | |
| SECTION | ON G – COMMUNI | TY INFORMATION (OP | TIONAL) | | |
| 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 or Zone AO. | on E for a building | located in Zone A (without | out a FEMA | A-issued or community-issued BFE) | |
| G3. The following information (Items G4- | -G10) is provided fo | or community floodplain | manageme | ent purposes. | |
| G4. Permit Number | G5. Date Permit | Issued | | Pate Certificate of Compliance/Occupancy Issued | |
| G7. This permit has been issued for: | New Construction | n Substantial Improv | ement | | |
| G8. Elevation of as-built lowest floor (including of the building: | g basement) - | | 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 | | | |
| | 06/05/2023 | | | | |
| Comments (including type of equipment and loa | cation, per C2(e), if | applicable) | | | |
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| | | | | Check here if attachments. | |

BUILDING PHOTOGRAPHS

OMB No. 1660-0008

See Instructions for Item A6. Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the cor | FOR INSURANCE COMPANY USE | | |
|--|-------------------------------|------------------------|---------------------|
| Building Street Address (including Apt., Unit, S | Suite, and/or Bldg. No.) or F | P.O. Route and Box No. | Policy Number: |
| 942 PAULETTE LANE | | | |
| City | State | ZIP Code | Company NAIC Number |
| SAN LEON | Texas | 77539 | |

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.



06/05/2023 Photo One Caption Clear Photo One



ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

OMB No. 1660-0008 Expiration Date: November 30, 2022 Continuation Page

| IMPORTANT: In these spaces, copy the | FOR INSURANCE (| COMPANY USE | | |
|--|-------------------------------------|--------------------------|---------------------|-------------------|
| Building Street Address (including Apt., U942 PAULETTE LANE | Init, Suite, and/or Bldg. No.) or P | O. Route and Box No. | Policy Number: | |
| SAN LEON | State Texas | ZIP Code 77539 | Company NAIC Nun | nber |
| If submitting more photographs than w with: date taken; "Front View" and "If photographs must show the foundation with the statement of the st | Rear View"; and, if required, " | Right Side View" and "L | eft Side View." Whe | en applicable, |
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Form Page 6 of 6

ELEVATION CERTIFICATE