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

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

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	N A – PROPERTY	INFORI	MATION		FOR INSUR	RANCE COMPANY USE		
A1. Building Owner's Name BUYER 2208573							per:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7317 2ND STREET						Company N	AIC Number:		
City HITCHCOCK				State Texas		ZIP Code 77563			
A3. Property Description LOT 12 AND PART OF	-		x Parcel	Number, Leg	gal Description, etc	:.)			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL									
A5. Latitude/Longitude: Lat. 29°17'22.64" N Long. 94°48'33.31" W Horizontal Datum: NAD 1927 X 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									
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 o	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 N/A 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 sq in									
d) Engineered floo	a openings?	☐ Yes 区 N	10						
	SECTI	ON B – FLOOD I	NSURA	NCE RATE	MAP (FIRM) INF	ORMATION			
B1. NFIP Community Name & Community Number CITY OF HITCHCOCK 485479				B2. County Name GALVESTON			B3. State Texas		
B4. Map/Panel B5 Number	5. Suffix B6	. FIRM Index Date	Effe	RM Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)		
48167C0385 G	08-	-15-2019	Revised Date 08-15-2019		AE	14	14		
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:									
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? \(\subseteq \) Yes \times No									
Designation Date: CBRS OPA									

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IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, Suite, and/or 7317 2ND STREET	Policy Number:							
City Stat	e ZIP (Code	Company NAIC Number					
HITCHCOCK Tex		3						
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)								
C1. Building elevations are based on: Constructio	n Drawings* Build	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: NGS MON. D09997 Vertical Datum: NAVD 1988								
Indicate elevation datum used for the elevations in items a) through h) below.								
☐ NGVD 1929 区 NAVD 1988 ☐ Other/Source:								
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, crawlsp	aco or analogura floor)		N/A × feet meters					
	ace, or enclosure noor)		N/A ⋉ feet					
b) Top of the next higher floor								
c) Bottom of the lowest horizontal structural membe	r (V Zones only)		N/A feet meters					
d) Attached garage (top of slab)			N/A					
 e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com 	ricing the building ments)		N/A × feet meters					
f) Lowest adjacent (finished) grade next to building	(LAG)		8.93 × feet meters					
g) Highest adjacent (finished) grade next to building	(HAG)		10.45 \times feet \square meters					
h) Lowest adjacent grade at lowest elevation of dec structural support	k or stairs, including		N/A × 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 lic			Check here if attachments.					
Certifier's Name	License Number							
TOBY PAUL COUCHMAN 5565								
Title			P. GISTER STER					
R.P.L.S.								
Company Name PRO-SURV TBPLS FIRM NO. 10119300			TOBY PAUL COUCHMAN					
Address			W FECE V					
P.O. BOX 1366			- 5565 vice					
	State	ZIP Code	- 5565, r. 2					
P.O. BOX 1366 City FRIENDSWOOD	Texas	77549	5565 x 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
P.O. BOX 1366 City			- 5565 v. 2 - 5565 v. 2 - 500 v.					
P.O. BOX 1366 City FRIENDSWOOD Signature // / / /	Date 09-01-2022	77549 Telephone (281) 996-1113						
P.O. BOX 1366 City FRIENDSWOOD Signature Af N. lovchman	Texas Date 09-01-2022 nts for (1) community off	77549 Telephone (281) 996-1113						
P.O. BOX 1366 City FRIENDSWOOD Signature Of Received Copy all pages of this Elevation Certificate and all attachments	Texas Date 09-01-2022 Ints for (1) community off C2(e), if applicable)	77549 Telephone (281) 996-1113 icial, (2) insurance a	agent/company, and (3) building owner.					
P.O. BOX 1366 City FRIENDSWOOD Signature Only It working Copy all pages of this Elevation Certificate and all attachme Comments (including type of equipment and location, per	Texas Date 09-01-2022 Ints for (1) community off C2(e), if applicable)	77549 Telephone (281) 996-1113 icial, (2) insurance a	agent/company, and (3) building owner.					
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