

### ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

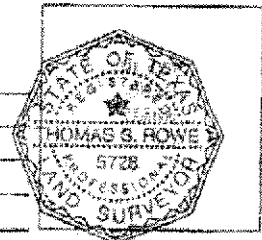
Important: Read the instructions on pages 1-8.

| SECTION A - PROPERTY INFORMATION   |  | For Insurance Company Use:  |
|--|--|---|
| A1. Building Owner's Name  |  | Policy Number:  |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>13645 Thousand Oaks Drive   |  | Company NAIC Number:  |
| City: Beaumont State: TX ZIP Code: 77713   |  |   |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)<br>Tract No. 101, River Oaks Ranchettes   |  |   |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>Accessory Building</u>  |  |   |
| A5. Latitude/Longitude: Lat. <u>N 28°20'35.6"</u> Long. <u>W 094°1'03.8"E</u>  |  | Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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: <u>1</u>  |  |   |
| A8. For a building with a crawl space or enclosure(s), provide:<br>a) Square footage of crawl space or enclosure(s) _____ sq ft<br>b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____ sq in<br>c) Total net area of flood openings in A8.b _____ sq in |  | A9. For a building with an attached garage, provide:<br>a) Square footage of attached garage _____ sq ft<br>b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____ sq in<br>c) Total net area of flood openings in A9.b _____ sq in |

| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  |                 |                                |  |                         |   |
|--|-----------------|--------------------------------|--|-------------------------|---|
| B1. FIP Community Name & Community Number<br>Boyl Oaks & 480878  |                 | B2. County Name<br>Jefferson   |  | B3. State<br>Texas      |   |
| B4. Map/Pane Number<br>480878005   | B5. Suffix<br>C | B6. FIRM Index Date<br>5/13/77 | B7. FIRM Pane Effective/Revised Date<br>9/4/87 | B8. Flood Zone(s)<br>AE | B9. Base Flood Elevation(s) (Zone AD, use base flood depth)<br>26.4 |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:<br><input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____ |                 |                                |  |                         |   |
| B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____  |                 |                                |  |                         |   |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA             |                 |                                |  |                         |   |

| SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)   |   |
|--|---|
| C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction<br>*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/AD. Complete items C2.a-g below according to the building diagram specified in Item A7.<br>Benchmark Utilized _____ Vertical Datum _____<br>Conversion/Comments: <u>Referenced to City of Boyl Oaks BM No. 22</u> |   |
| Check the measurement used.  |   |
| a) Top of bottom floor (including basement, crawl space, or enclosure floor)   | <u>27.4</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| b) Top of the next higher floor  | <u>NS</u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)              |
| c) Bottom of the lowest horizontal structural member (V Zones only)  | <u>NS</u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)              |
| d) Attached garage (top of slab)   | <u>NS</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)   |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)  | <u>28.0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| f) Lowest adjacent (finished) grade (LAG)  | <u>24.7</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| g) Highest adjacent (finished) grade (HAG)   | <u>22.0</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |

| 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 the or imprisonment under 18 U.S. Code, Section 1201. |   |
| <input checked="" type="checkbox"/> Check here if comments are provided on back of form.   |   |
| Certifier's Name: <u>Thomas S. Rowe</u>  | License Number: <u>APLS No. 5728</u>                          |
| Title: <u>Vice President</u>   | Company Name: <u>Mark W. Whiteley &amp; Associates, Inc.</u>  |
| Address: <u>3250 G. Rex Freeway</u>  | City: <u>Beaumont</u> State: <u>TX</u> ZIP Code: <u>77703</u> |
| Signature: <u>[Signature]</u>  | Date: <u>4/16/05</u> Telephone: <u>409-392-6421</u>           |



|  |                            |
|--|----------------------------|
| <b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>  | For Insurance Company Use: |
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>13845 Thousand Oaks Drive | Policy Number              |
| City/Parsonage State Tx ZIP Code 77713   | Company NAIC Number        |

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

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

Comments: Elevation shown for G2.3.a is the top of the air conditioner concrete pad.

Signature: 

Date: 4/15/2008

Check here if attachment

**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, use 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, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams G-3 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 6 of Instructions), the next higher floor (elevation G2.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's or Owner's Authorized Representative's Name: \_\_\_\_\_

|                  |             |                  |                 |
|------------------|-------------|------------------|-----------------|
| Address: _____   | City: _____ | State: _____     | ZIP Code: _____ |
| Signature: _____ | Date: _____ | Telephone: _____ |                 |
| Comments: _____  |             |                  |                 |

Check here if attachment

**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 G9, and G9.

- 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-G8) is provided for community floodplain management purposes:

|                          |                               |  |
|--------------------------|-------------------------------|--|
| G4. Permit Number: _____ | G5. Date Permit issued: _____ | G6. Date Certificate Of Compliance/Occupancy issued: _____ |
|--------------------------|-------------------------------|--|

- 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 at the building site: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

|                              |                  |
|------------------------------|------------------|
| Local Official's Name: _____ | Title: _____     |
| Community Name: _____        | Telephone: _____ |
| Signature: _____             | Date: _____      |
| Comments: _____              |                  |

Check here if attachment