A2. Building Street A Box No.	Box No. Company NAIC Number:						AIC Number:
7095 Sweetgum Ro	ad					_	
City	State ZIP Code						
Beaumont				Texas		77713	
		nd Block Numbers, Ta					
N 105' L 41, Bevil A	cres (V 7, P	108, MRJCT), Deed:	CF 2018	8024525, OPI	RJCT, PID: 8433, /	ADJCT	
A4. Building Use (e.	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longitu	ide: Lat. 3	0°08'16.4"	Long9	94°16'10.7"	Horizontal	Datum: NAD 1	927 🗵 NAD 1983
A6. Attach at least 2	2 photograp	hs of the building if the	Certifica	ate is being u	sed to obtain flood	l insurance.	
A7. Building Diagram	m Number	1B					
A8. For a building w	rith a crawls	pace or enclosure(s):					
 a) Square foots 	age of crawl	space or enclosure(s)			N/A sq ft		
b) Number of pe	ermanent flo	ood openings in the cra	awlspace	or enclosure	e(s) within 1.0 foot	above adjacent gra	de N/A
c) Total net are	a of flood or	penings in A8.b		N/A sq in			
d) Engineered	flood openin	gs? 🗌 Yes 🗵 N	0				
A9. For a building wi	th an attach	ed garage:					
a) Square foota	ge of attach	ed garage		N/A sq ft			
b) Number of pe	ermanent flo	ood openings in the att	ached ga	arage within	1.0 foot above adja	acent grade N/A	
c) Total net are	a of flood or	enings in A9.b		N/A sq	in		
d) Engineered flood openings? Yes No							
a) Engineered nood openinger.							
	SE	CTION B - FLOOD I	NSURA	NCE RATE	MAP (FIRM) INF	ORMATION	
B1. NFIP Communit	y Name & C	Community Number		B2. County	Name B3. State		
CITY OF BEVIL OA	KS, TEXAS	480878		JEFFERSC	Texas		
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)	
480878 0005	С	N/A (SEE NOTE 2)	09-04-	1987	AE	28.7	
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: X NGVD 1929 NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? \square Yes \boxtimes No							
Designation Date: N/A CBRS OPA							

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/o 7095 SWEETGUM ROAD	Policy Number:				
City	ate ZIP	Code	Company NAIC Number		
BEAUMONT T	EXAS 777	713			
SECTION C – BUILDING EL	EVATION INFORMAT	ION (SURVEY RE	EQUIRED)		
C1. Building elevations are based on: Construction	on Drawings*	ding Under Constru	ıction*		
*A new Elevation Certificate will be required when o	construction of the building	ng is complete.	50.729		
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: RM #1 ON FIRM	Vertical Datum:				
Indicate elevation datum used for the elevations in i	Source:				
Datum used for building elevations must be the san	ne as that used for the B	FE.	Check the measurement used.		
a) Top of bottom floor (including basement, crawls	pace or enclosure floor)		29.0 × feet meters		
b) Top of the next higher floor	, , , , , , , , , , , , , , , , , , , ,		N/A feet meters		
c) Bottom of the lowest horizontal structural member	er (V Zones only)		N/A feet meters		
d) Attached garage (top of slab)	er (v Zones only)	-	N/A feet meters		
e) Lowest elevation of machinery or equipment ser	vicing the building	·			
(Describe type of equipment and location in Conf.) f) Lowest adjacent (finished) grade next to building			<u>29.0</u>		
		1	29.0 × feet meters		
g) Highest adjacent (finished) grade next to building	,	S.	29.0 Mileet Mileters		
 h) Lowest adjacent grade at lowest elevation of de- structural support 	ck or stairs, including		N/A feet meters		
SECTION D - SURVEYOR	, ENGINEER, OR ARC	HITECT CERTIFI	CATION		
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 li	censed land surveyor?	⊠Yes □No	Check here if attachments.		
Certifier's Name	License Number				
SCOTT N. BRACKIN	6650		A		
Title R.P.L.S.			TE OF TERESTER		
Company Name ACCESS SURVEYORS			SCOTT N BRACKIN		
Address 11025 OLD VOTH ROAD			6650 FESSION O		
City	State	ZIP Code	- SURVIN		
BEAUMONT	Texas	77713	<u> </u>		
Signature Digitally signed by Scott Brackin Diate: 2019.04.02 14:23:14:05'00'	Date 04-02-2019	Telephone (409) 838-6322	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)					
1) ITEM C2e IS TOP OF A/C PAD					
2) IN REFERENCE TO SECTION B6., ONLY ONE PANEL PRINTED FOR BEVIL OAKS, SO NO INDEX WAS MADE. THE INDEX ID: 480385IND0A (DATED 08/06/2002) COVERS THE AREA, BUT EXCLUDES BEVIL OAKS.					

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and	/or Bldg. No.) or P.O. Rou	ite and Box No.	Policy Number:		
City	State ZIP	Code	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 a a) Top of bottom floor (including basement,					
crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is		☐ feet ☐ meter			
 E2. For Building Diagrams 6–9 with permanent flood o	penings provided in Section				
the next higher floor (elevation C2.b in the diagrams) of the building is	·	feet meter	s above or below the HAG.		
E3. Attached garage (top of slab) is E4. Top of platform of machinery and/or equipment		feet meter	s above or below the HAG.		
servicing the building is	a is the top of the bettern	feet meter			
E5. Zone AO only: If no flood depth number is availabl floodplain management ordinance? Yes			certify this information in Section G.		
SECTION F - PROPERTY OWN	NER (OR OWNER'S REP	RESENTATIVE) CI	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.					
Property Owner or Owner's Authorized Representative'	s Name				
Address	City	St	ate ZIP Code		
Signature	Date	Тє	lephone		
Comments			v		
			Check here if attachments.		

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding	F	OR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or	x No. P	Policy Number:		
City Stat	e ZIP Code	C	Company NAIC Number	
SECTION G - COI	MMUNITY INFORMATION (OPT	IONAL)		
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 to or Zone AO.	ouilding located in Zone A (withou	ut a FEMA-i	ssued or community-issued BFE)	
G3. The following information (Items G4–G10) is pro	vided for community floodplain m	nanagemen	t purposes.	
G4. Permit Number G5. Date	Permit Issued		te Certificate of mpliance/Occupancy Issued	
G7. This permit has been issued for: New Con	struction Substantial Improve	ment		
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 _		
Local Official's Name	Title			
Community Name	Telephone			
Signature	Date			
Comments (including type of equipment and location, per	C2(e), if applicable)			
9				
			*	
			Check here if attachments.	

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 7095 SWEETGUM ROAD	Policy Number:		
City BEAUMONT	State TEXAS	ZIP Code 77713	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.

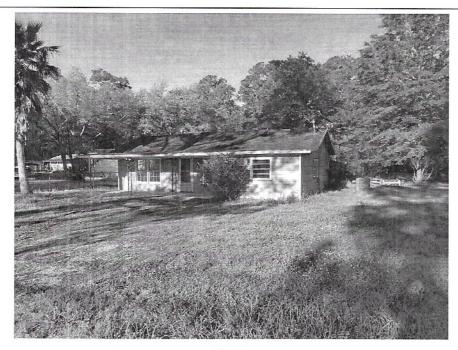


Photo One

Photo One Caption FRONT VIEW (4/2/2019)

Clear Photo One

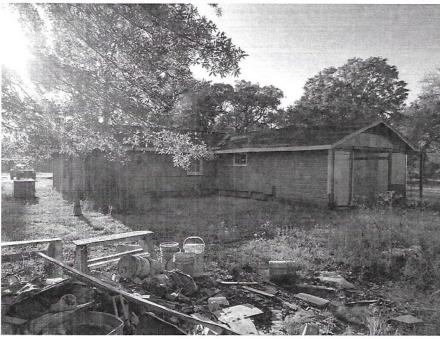


Photo Two

Photo Two Caption REAR VIEW (4/2/2019)

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

MPORTANT: In these spaces, copy the c	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit	Policy Number:		
City	State	ZIP Code	Company NAIC Number
If submitting more photographs than will with: date taken; "Front View" and "Rephotographs must show the foundation with	ar View"; and, if requir	ed. "Right Side View" and	"Left Side View." When applicable.
	Photo	Three	
	Photo	Three	
Photo Three Caption			Clear Photo Three
			8
	Photo	Four	
Photo Four Caption	Photo	Four	Clear Photo Four