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 A - PROPERTY INFORMATION					FOR INSUF	FOR INSURANCE COMPANY USE		
A1. Building Owner's Name Policy Number:						ber:		
Steve and Kimberl								
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.12416 FM 1650						IAIC Number:		
City		State ZIP Code						
	Gilmer Texas 75645							
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) GCAD Parcel ID 27416, 72.307 acres being the Residue of Volume 2983 Page 235, Gregg County Deed Records								
A4. Building Use (A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential							
A5. Latitude/Longi	tude: Lat. <u>3</u>	2.6483349	Long	94.7675358	Horizonta	I Datum: ☐ NAD 1	927 X NAD 1983	
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being ι	used to obtain floo	d insurance.		
A7. Building Diagra	am Number	1A						
A8. For a building	with a crawls	space or enclosure(s):						
a) Square foo	tage of craw	lspace or enclosure(s)			N/A sq ft			
b) Number of	permanent flo	ood openings in the cr	awlspac	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ade N/A .	
c) Total net ar	ea of flood o	penings in A8.b		N/A sq ir	ı			
d) Engineered	l flood openir	ngs? ☐ Yes ☒ N	No					
A9. For a building v	vith an attach	ned garage:						
a) Square footage of attached garage 957.00 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								
d) Engineered flood openings? Yes X No								
a, anguitation of the E. T. C. C. T. C.								
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION								
B1. NFIP Community Name & Community Number Gregg County Unincorporated Areas 48183C			B2. County Gregg	Name		B3. State Texas		
B4. Map/Panel Number	B5. 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)	
0020	F	09-03-2014	Revised Date 09-03-2014		А	No BFE Determin	3FE Determined	
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)? ☐ Yes ☒ No								
Designation Date: N/A ☐ CBRS ☐ OPA								
23019114113111	Bedighallon Pate. OBNO GOTA							

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, ar 12416 FM 1650	Policy Number:			
City Gilmer	State ZIP 0 Texas 7564	Code I5	Company NAIC Number	
SECTION C – BUILDING	ELEVATION INFORMAT	ION (SURVEY RE	EQUIRED)	
C1. Building elevations are based on: Constru	ruction Drawings*	ding Under Constru	ction* X Finished Construction	
*A new Elevation Certificate will be required who				
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: Local BM set using GNSS RTKNET Vertical Datum: NAVD88 GEOID 018A				
Indicate elevation datum used for the elevations			10/1	
☐ NGVD 1929 ☒ NAVD 1988 ☐ Oti	, , ,	••		
Datum used for building elevations must be the		FE.	Check the measurement used.	
a) Top of bottom floor (including basement, cra	wlspace or enclosure floor)		308.6 \times feet \square meters	
b) Top of the next higher floor	mopass, or onessure most,		321.6 🗵 feet 🗌 meters	
c) Bottom of the lowest horizontal structural me	ember (V Zones only)			
d) Attached garage (top of slab)	milet (v Zenes emy)		308.5 X feet meters	
e) Lowest elevation of machinery or equipment (Describe type of equipment and location in the second content of the second	servicing the building Comments)		308.4 🗵 feet 🗌 meters	
f) Lowest adjacent (finished) grade next to buil	lding (LAG)		308.0 X feet meters	
g) Highest adjacent (finished) grade next to bui	ilding (HAG)		308.3 X feet meters	
 h) Lowest adjacent grade at lowest elevation of structural support 	f deck or stairs, including		308.0 X feet meters	
SECTION D – SURVEY	OR, 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 licensed land surveyor?	⊠Yes □No	Check here if attachments.	
Certifier's Name	License Number 6147		AAA	
Casey Doyl Cockrell Title			OF TELS	
Director of Survey			S. REGISTERES TO	
Company Name Southern Survey and Design			CASEY DOYL COCKRELL D	
Address PO Box 246			6147 FESSION OF	
City White Oak	State Texas	ZIP Code 75693	SURVE	
Signature	Date 07-29-2023	Telephone (903) 261-1277	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) Air Conditioner Compressor sitting on a plastic pedestal on grade located on the east side of the residence.				

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and 12416 FM 1650	Policy Number:				
2	State Fexas	ZIP Code 75645	Company NAIC Number		
SECTION E – BUILDING ELI	EVATION INFORMA	TION (SURVEY NO	T 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 appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).					
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		0.3 ⊠ feet ☐ mete	ers 🗵 above or 🗌 below the HAG.		
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		0.6 ⊠ feet ☐ mete	ers 🗵 above or 🗌 below the LAG.		
E2. For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in the diagrams) of the building is	penings provided in S	ection A Items 8 and/o ☐ feet ☐ mete			
E3. Attached garage (top of slab) is		0.2 🗵 feet 🗌 mete	ers 🗵 above or 🗌 below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		0.1 ⊠ feet ☐ mete	ers ⊠ 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 Unknown. The local official must certify this information in Section G.					
SECTION F - PROPERTY OWN	NER (OR OWNER'S I	REPRESENTATIVE) C	ERTIFICATION		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	ve who completes Sec ne statements in Sect	ctions A, B, and E for Z ons A, B, and E are co	Zone A (without a FEMA-issued or or or or correct to the best of my knowledge.		
Property Owner or Owner's Authorized Representative's Name					
Address	N/A City	ξ	State ZIP Code		
Signature	Date	Т	elephone		
Comments					
	. // ^				
	MA				
	177				
			Check here if attachments.		

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE					
	NI =	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12416 FM 1650				Policy Number:	
City State ZIP Code				Company NAIC Number	
Gilmer	Texas	75645			
SECTIO	N G – COMMUNIT	Y INFORMATION (OPTIO	NAL)		
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 a	a FEMA	-issued or community-issued BFE)	
G3. The following information (Items G4–	G10) is provided fo	r community floodplain ma	nageme	nt purposes.	
G4. Permit Number	G5. Date Permit Issued G6.			. Date Certificate of Compliance/Occupancy Issued	
	N	/A			
G7. This permit has been issued for:	New Construction	Substantial Improvem	ent		
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 t	he building site: _	[feet	meters Datum	
G10. Community's design flood elevation:			feet	meters Datum	
Local Official's Name		Title			
Community Name		Telephone			
Signature		Date			
Comments (including type of equipment and location, per C2(e), if applicable)					
\mathcal{N}/\mathcal{A}					
				Check here if attachments.	

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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

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. Policy Number: 12416 FM 1650 City State ZIP Code Company NAIC Number Gilmer Texas 75645

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 West Side of residence looking North Clear Photo One



Photo Two

Photo Two Caption South Side of residence looking East

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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

IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, 12416 FM 1650	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Gilmer	Texas	75645	

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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption East Side of residence looking North

Clear Photo Three



Photo Four

Photo Four Caption North Side of residence looking East

Clear Photo Four Form Page 6 of 6