

1013 Orchid Street

Panel 182C

This EC was generated to ensure the Minimum Finished Floor was equal to or above that stated on the Plat. The property is not in a SFHA.

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAMO.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME KM CUSTOM HOMES, INC.		Policy Number
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1013 ORCHID		Company NAIC Number
CITY COLLEGE STATION	STATE TX	ZIP CODE
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 8, BLOCK 9, SUNMEADOWS PHASE 2		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (##-##-##.## or ###.####)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER		B2. COUNTY NAME BRAZOS COUNTY		B3. STATE TX	
B4. MAP AND PANEL NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 295.50

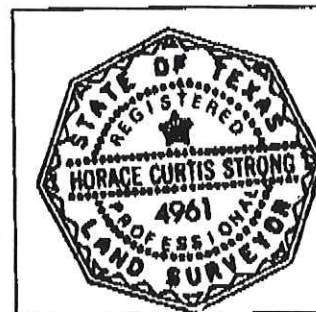
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
☐ FIS Profile ☐ FIRM ☐ Community Determined ☒ Other (Describe): CITY REQUIREMENTS

B11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe):

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

- C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction
- *A new Elevation Certificate will be required when construction of the building is complete.
- C2. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- C3. 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 C3-a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
- Datum _____ Conversion/Comments _____
- Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No
- ▶ a) Top of bottom floor (including basement or enclosure) 300.0 ft.(m)
 - ▶ b) Top of next higher floor _____ ft.(m)
 - ▶ c) Bottom of lowest horizontal structural member (V zones only) _____ ft.(m)
 - ▶ d) Attached garage (top of slab) _____ ft.(m)
 - ▶ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) _____ ft.(m)
 - ▶ f) Lowest adjacent (finished) grade (LAG) _____ ft.(m)
 - ▶ g) Highest adjacent (finished) grade (HAG) _____ ft.(m)
 - ▶ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade _____
 - ▶ i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm)

License Number, Embossed Seal,
Signature, and Date

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 in Sections A, B, and C 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.

CERTIFIER'S NAME H. CURTIS STRONG

LICENSE NUMBER 4961

TITLE RPLS

COMPANY NAME STRONG SURVEYING

ADDRESS
1722 BROADMOOR, SUITE 105CITY
BRYANSTATE
TXZIP CODE
77802

SIGNATURE

DATE
3/11/04TELEPHONE
979/776-9836