NATIONAL FLOOD INSURANCE PROGRAM

Expires July 31, 2002

ELEVATION CERTIFICATE

	A - PROPERTY OWNER INFORMATI		I factor and the second			
	For Insurance Company Use:					
BUILDING OWNER'S NAME Main Street Homes	Policy Number					
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and 3834 Westfield Drive	(NO.	Company NAIC Number				
CITY College Station	STATE TX		E			
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 7, Block 4, Westfield Addition, Phase I						
BUILDING USE (e.g., Residential, Non-residential, Addition, Acc	essory, etc. Use a Comments area, if neo	essary.)				
Residential						
LATITUDE/LONGITUDE (OPTIONAL) (## - ## - ##.##" or ##.####") NAD 1		URCE: ☑ GPS (Type): ☐ USGS Quad	d Map			
SECTION B - FLOO	D INSURANCE RATE MAP (FIRM) INF	ORMATION				
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER College Station 480083 0182 C	B2. COUNTY NAME		STATE			
College Station 400005 0 102 C	Brazos	1/				
B4. MAP AND PANEL B5. SUFFIX NUMBER B6. FIRM INDEX DA 48041 C 0182 C 7/2/1992	B7. FIRM PANEL TE EFFECTIVE/REVISED DATE 2/9/2000	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.						
☐ FIS Profile ☐ FIRM ☐ Community D						
B11. Indicate the elevation datum used for the BFE in B9: NGVD 192						
B12. Is the building located in a Coastal Barrier Resources System (CBR:			esignation Date			
*A new Elevation Certificate will be required when construction of the						
그리고	to the building for which this certificate is being	completed - see pages 6 a	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), V1-V30	HAREEN AR ARIA ARIAE ARIA4 A20 ARIA	H ARMO				
			tum used for the BEE in			
Complete Items C3a-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 ngvd-1929 Conversion/Comments C.S. 131, 132, & 218	ASION.					
Elevation reference mark used 279.43 Does the elevation reference in	nark used appear on the FIRM? Yes	l No	CAN			
o a) Top of bottom floor (including basement or enclosure)	296. <u>00 ft.(m)</u>	31	OF F			
o b) Top of next higher floor	ft.(m)	Š	10 TE			
o c) Bottom of lowest horizontal structural member (V zones only)	ft.(m)	ate ate	Mario de la constante			
o d) Attached garage (top of slab)	<u>ft.(m)</u>	å å 🔊	HANTE CARLOMAGNO D			
o e) Lowest elevation of machinery and/or equipment		m #	000000000000000000000000000000000000000			
servicing the building (Describe in a Comments area)	ft.(m)	E ZIP CODE 77845 ion, etc.) ents area, if necessary.) SOURCE:				
o f) Lowest adjacent (finished) grade (LAG)						
o g) Highest adjacent (finished) grade (HAG)	293. 16 ft.(m)	88	SUR			
o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade						
and the state of t	sq. in. (sq. cm)					
SECTION D - SURVE	OR, ENGINEER, OR ARCHITECT CEI	RTIFICATION				
This certification is to be signed and sealed by a land surveyor, e			ation.			
I certify that the information in Sections A, B, and C on this certifi	cate represents my best efforts to interpre	et 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 Dante Carlomagno		CENSE NUMBER 1562				
TITLEPresident	COMPANY NAME Carlo	magno Surveying, Inc.				
ADDRESS	СПҮ					
2714 Finfeather	Bryan					
SIGNATURE SIGNATURE	DATE 5/17/02					
	1 / 211102	(010)11020				

IMPURIANT: In these spaces, copy the corresponding information from Section A. BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO.				For Insurance Company Use: Policy Number	
3834 Westfield Drive	, magnitus ON F.O. NOUTE				
CITY College Station		STATE TX	ZIP CODE 77845	Company NAIC Number	
SEC	TION D - SURVEYOR, ENGINEER,	OR ARCHITECT CE	RTIFICATION (CONTINUE	D)	
opy both sides of this Elevation Certificate	e for (1) community official, (2) insurance a	gent/company, and (3) b	uilding owner.		
COMMENTS Per Westfield Addition, Phase I, Volume 30					
INISH FLOOR ELEVATION = 292.00 A	.CTUAL 296.00				
	The state of the s				
				Check here if attachme	
SECTION E - BUILDING	ELEVATION INFORMATION (SUR)	YEY NOT REQUIRED) FOR ZONE AO AND ZO!	VE A (WITHOUT BFE)	
r Zone AO and Zone A (without BFE), con ction C must be completed.	nplete Items E1 through E4. If the Elevation	n Certificate is intended	for use as supporting information	for a LOMA or LOMR-F,	
•	ouilding diagram most similar to the building	a for which this codificate	is being completed.	Cond 7 Has discuss assumbly	
represents the building, provide a sketch	or photograph.)	gior wincar alls ceralicate	ns being completed – see pages	o and 7. In no diagram accurately	
The top of the bottom floor (including base		ft.(m) <u>10</u> in.(cm) 🛭 abo	ve or 🔲 below (check one) th	e highest adjacent grade. (Use	
natural grade, if available).				· · · · · · · · · · · · · · · · · · ·	
grade. Complete items C3.h and C3.i or	(see page 7), the next higher floor or eleva	ted floor (elevation b) of	the building isft.(m)in.(a	n) above the highest adjacent	
	ber is available, is the top of the bottom floo	or elevated in accordance	e with the community's floodolais	n management ordinance?	
Yes No Unknown. The k	ocal official must certify this information in S	Section G.	o marano continuanty a nocupica	maiagana kolulla ke:	
	TION F - PROPERTY OWNER (OR C				
e property owner or owner's authorized re	epresentative who completes Sections A, E	B, C (Items C3.h and C3	i only), and E for Zone A (withou	t a FEMA-issued or community-	
SUPPLY OF ZONE AO must sign here.	he statements in Sections A, B, C, and E a	are correct to the best of	my knowledge.		
ROPERTY OVVNER'S OR OWNER'S AU ante Carlomagno, Carlomagno Surveying	JTHORIZED REPRESENTATIVE'S NAM	E			
DDRESS	OF	CITY	STAT	ZIP CODE	
14 Finfeather GNATURE	4.5.5.1.V	Bryan DATE	TX TCL C	77801 PHONE	
Dage	Land Company of the C	5/17/02		75-2873	
OMMENTS DANT	CARLOMO (1)				
We to	2 1502	· · · · · · · · · · · · · · · · · · ·			
Revo	C112			Check here if attachmer	
	SECTION G - COMMUNIT	TY INFORMATION (OPTIONAL)	Z Oricov fiere il allaci il fier	
	dinance to administer the community's floc			A. B. C (or E), and G of this Elevatio	
ficate. Complete the applicable item(s) ar	nd sign below.				
The information in Section C was take	n from other documentation that has been	signed and embossed I	by a licensed surveyor, engineer	, or architect who is authorized by	
state of local law to certify elevation in A community official completed Section	nformation. (Indicate the source and date on on E for a building located in Zone A (withou	of the elevation data in the	e Comments area below.)	<u> </u>	
☐ The following information (Items G4-G	is provided for community floodplain ma	uta rizivia-issueu orcor anadement purposes.	nmunity-issued BFE) or Zone A	J.	
. PERMIT NUMBER	G5. DATE PERMIT ISSUED		DATE CERTIFICATE OF COMP	IANCE/OCCLIDANCY ISSUED	
			A DATE OF COME	TATOMICOUPPINOT (000ED)	
This permit has been issued for: New	Construction Substantial Improvem	ent			
Elevation of as-built lowest floor (including BFE or (in Zone AO) depth of flooding at th	basement) of the building is:		ft.(m)	Datum:	
	ie Dukding site is:		, ft.(m)	Datum:	
CAL OFFICIAL'S NAME		TITLE			
MMUNITY NAME		TELEPI	HONE		
GNATURE		DATE			
MMENTS					
				Check here if attachmen	