

U.S. DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
National Flood Insurance Program

OMB Control No. 1660-0008  
Expiration Date: 06/30/2026

**ELEVATION CERTIFICATE**

**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19**

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 INSURANCE COMPANY USE		
A1. Building Owner's Name: <u>Cervelle Homes</u>	Policy Number: _____		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>2217 Estancia Lane</u>	Company NAIC Number: _____		
City: <u>League City</u>	State: <u>TX</u> ZIP Code: <u>77539</u>		
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>Lot 25, Block 4, Pedregal, Section 3</u>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>Residential</u>			
A5. Latitude/Longitude: Lat. <u>N29d 26' 41.17"</u> Long. <u>W95d 07' 24.99"</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> WGS 84			
A6. Attach at least two and when possible four clear photographs (one for each side) of the building (see Form pages 7 and 8).			
A7. Building Diagram Number: <u>1B</u>			
A8. For a building with a crawlspace or enclosure(s):			
a) Square footage of crawlspace or enclosure(s): <u>0.00</u> sq. ft.			
b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>			
d) Total net open area of non-engineered flood openings in A8.c: <u>0.00</u> sq. in.			
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): <u>0.00</u> sq. ft.			
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): <u>0.00</u> sq. ft.			
A9. For a building with an attached garage:			
a) Square footage of attached garage: <u>2,113.00</u> sq. ft.			
b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>0</u> Engineered flood openings: <u>0</u>			
d) Total net open area of non-engineered flood openings in A9.c: <u>0.00</u> sq. in.			
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): <u>0.00</u> sq. ft.			
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): <u>0.00</u> sq. ft.			
<b>SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION</b>			
B1.a. NFIP Community Name: <u>City of League City</u>	B1.b. NFIP Community Identification Number: <u>485488</u>		
B2. County Name: <u>Galveston</u>	B3. State: <u>TX</u>	B4. Map/Panel No.: <u>48167C0228</u>	B5. Suffix: <u>G</u>
B6. FIRM Index Date: <u>08/15/2019</u>	B7. FIRM Panel Effective/Revised Date: <u>08/15/2019</u>		
B8. Flood Zone(s): <u>X</u>	B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>N/A</u>		
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input checked="" type="checkbox"/> FIS <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____			
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____			
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 Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA			
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

## ELEVATION CERTIFICATE

**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <b>2217 Estancia Lane</b>	<b>FOR INSURANCE COMPANY USE</b>
City: <u>League City</u>	Policy Number: _____
State: <u>TX</u>	Company NAIC Number: _____

### **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. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a-h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: League City Reference Mark #102 Vertical Datum: NAVD 1988 2002 Adj

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929  NAVD 1988  Other: NAVD 1988 2002 Adj

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used?  Yes  No  
 If Yes, describe the source of the conversion factor in the Section D Comments area.

- |   |                   |  |
|---|-------------------|--|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor):  | <u>22.00</u>      | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor (see Instructions):   | <u>          </u> | <input type="checkbox"/> feet <input type="checkbox"/> meters            |
| c) Bottom of the lowest horizontal structural member (see Instructions):  | <u>          </u> | <input type="checkbox"/> feet <input type="checkbox"/> meters            |
| d) Attached garage (top of slab):   | <u>21.70</u>      | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): | <u>22.10</u>      | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest Adjacent Grade (LAG) next to building: <input type="checkbox"/> Natural <input checked="" type="checkbox"/> Finished              | <u>20.80</u>      | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest Adjacent Grade (HAG) next to building: <input type="checkbox"/> Natural <input checked="" type="checkbox"/> Finished             | <u>21.70</u>      | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| h) Finished LAG at lowest elevation of attached deck or stairs, including structural support:   | <u>          </u> | <input type="checkbox"/> feet <input type="checkbox"/> meters            |

### **SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by state 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 and describe in the Comments area.

Certifier's Name: Troy Shanks License Number: 99552

Title: Professional Engineer

Company Name: Shanks Engineering & Surveying, Inc

Address: 1446 Pirates Cove

City: Houston State: TX ZIP Code: 77058

Signature: Troy Shanks PE Date: 09/01/2023

Telephone: (281) 488-1486 Ext.:            Email: Shanksls@sbcglobal.com

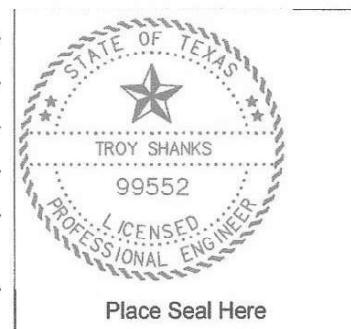
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):  
 Benchmark is League City Reference Mark LC-2005-102, Brass disc on headwall. Elevation 19.88' NAVD 88.

Comment A9a, garage is attached to the house by a breezeway.

Comment C2e is the air conditioner along the exterior of the home.

Closest 500 year flood plain elevation is 18.3' (Transect 95)



Place Seal Here

**ELEVATION CERTIFICATE**  
**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19**  
**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:  
2217 Estancia Lane

City: League City      State: TX      ZIP Code: 77539

**FOR INSURANCE COMPANY USE**

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo One

Photo One Caption: Front Left view of Home (09/01/23)



Photo Two

Photo Two Caption: Front Right View of Home (09/01/23)

**ELEVATION CERTIFICATE**  
**IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19**  
**BUILDING PHOTOGRAPHS**

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:  
2217 Estancia Lane

City: League City State: TX ZIP Code: 77539

**FOR INSURANCE COMPANY USE**

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo Three

Photo Three Caption: Rear view of Home (09/01/23)

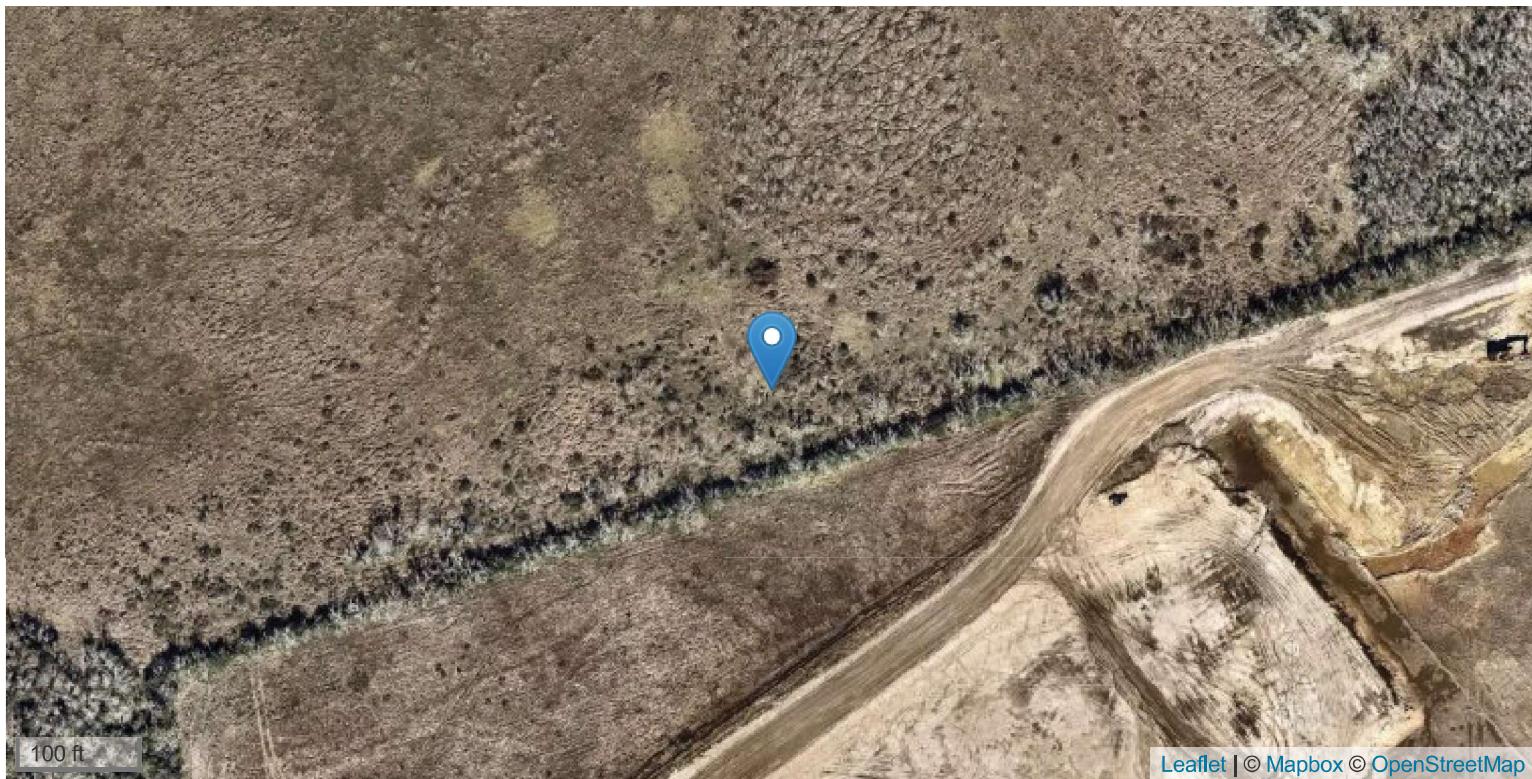


Photo Four

Photo Four Caption: Rear view of Home and AC (09/01/23)

# FloodRisk Standard

Provided Location	2217 ESTANCIA LN, LEAGUE CITY, TX 77539		
Standardized Location	2217 ESTANCIA LN, DICKINSON, TX 77539-2144		
Latitude, Longitude	29.444764, -95.12362	Parcel ID	
FIPS / MSA / Tract	48167 / 26420 / 7206.05	Community No.	485488
Community Name	LEAGUE CITY, CITY OF		
County Name	GALVESTON COUNTY		



Leaflet | © Mapbox © OpenStreetMap

Flood Zone	Zone X	Next Nearest Zone (Dist.)	AE (2900 ft)		
BFE	NOT APPLICABLE	USGS Ground Elev	21 ft NAVD88		
FEMA Map	48167C0228G, 08/15/2019	Previous Map	4854880030E, 09/22/1999, Zone X		
NFIP Status	PARTICIPATING	NFIP Program	REGULAR	First FIRM	06/05/1970
LOMR or LOMR	NO	CBRS / OPA	NO	EC On-File	NO
Claims* \$ / #	\$256,799,148 / 5496	NFIP PIF*	17760	NFIP Discount	25%
Flood Source	952 ft	Salt Water	40272 ft	Fresh Water	1342 ft

\*Aggregated by NFIP community.



Texas Farmers Insurance Company  
PO Box 2057 Kalispell MT 59903 USA

Texas Farmers Insurance Company  
<https://www.farmers.com/>  
(888) 391-2810  
NAIC# : 21660

**PROPERTY ADDRESS #:** 2217 ESTANCIA LN, Dickinson, TX, 77539  
**POLICY #:** FLD1660008674  
**NFIP POLICY #:** 1660008674  
**POLICY TERM:** 02-11-2024 (12:01 AM) - 02-11-2025 (12:01 AM)  
**POLICY ISSUED BY:** Texas Farmers Insurance Company  
**PAYOR:** DELORES TAMBORELLO

**POLICY FORM:** Dwelling Policy  
**POLICY DECLARATIONS TYPE:** New Policy Declarations  
**RATE CATEGORY :** RatingEngine

**INSURED NAME & MAILING ADDRESS**  
DELORES TAMBORELLO & RONALD TAMBORELLO  
2217 Estancia Ln,  
Dickinson, TX, 77539

**AGENT CONTACT INFORMATION**  
Dan Frickey  
Alexandra Ryan  
2911 S SHORE BLVD STE 100A, League City, TX, 77573  
Phone : 2814618707

## FLOOD INSURANCE POLICY DECLARATIONS

This Declarations Page is part of your policy. THIS IS NOT A BILL.

### Policy Coverages & Endorsements

	COVERAGE	DEDUCTIBLE	
Building	\$ 250,000	\$ 1,250	
Contents	\$ 100,000	\$ 1,000	
Coverage limitations may apply. See your Policy Form for details.			<b>\$ 1,306</b> Total Annual Payment
			Includes Premium, Discounts, Fees, and Surcharges

### Property Information

Primary Residence YES  
Building Occupancy Single Family  
Building Description Main House/Building  
First Floor Height (FFH) 1  
Method Used to Determine FFH EC  
Property Description Slab on Grade (non-elevated), 1 Floors , Frame  
Date of Construction 09-14-2023  
Prior NFIP Claims 0 Claim(s)

Your property's NFIP flood claims history can affect your premium.

### Premium Calculations

COMPONENTS OF THE TOTAL	PREMIUM
Building Premium:	\$ 783
Contents Premium:	\$ 521
Increased Cost of Compliance (ICC) Premium:	\$ 25
Community Rating System Discount:	<b>\$ (283.00)</b>
<b>Full-Risk Premium:</b>	\$ 1,046
<b>Discounted Premium:</b>	\$ 1,046
Fees and Surcharges:	
Reserve Fund Assessment:	\$ 188
HFIAA Surcharge:	\$ 25
Federal Policy Fee:	\$ 47
<b>Total Premium</b>	<b>\$ 1,306</b>

### ADDITIONAL INTERESTS

First Mortgagee  
PENNYMAC LOAN SERVICES LLC ISAOA/ATIMA,  
4349 HAZEL AVE STE 100,  
Fair Oaks, Sacramento County, CA, 95628  
Loan # : 8207041476

ADDITIONALINSURED  
RONALD TAMBORELLO ,  
2217 Estancia Ln

Date Mailed: 01-24-2024

If there have been any mortgagee changes, please make sure your profile reflects the changes.  
For questions about your flood insurance rating, contact your agent or insurance company.

To learn more about your flood risk, please visit FloodSmart.gov





# STANDARD FLOOD INSURANCE APPLICATION

PO Box 2057 Kalispell MT 59903 USA

Texas Farmers Insurance

Company

<https://www.farmers.com/>

(888) 391-2810

Date 01-12-2024	Application Number FLD1660008674	Effective Date 02-11-2024	Expiration Date 02-11-2025	Waiting Period Standard - 30 Day Wait
Insured Name(s) DELORES TAMBORELLO	Mailing Address & Phone 2217 Estancia Ln,Dickinson,TX,77539	Property Address 2217 ESTANCIA LN, 77539, Dickinson, , TX	Property Address Type:Location	Agency Name, Address & Phone 2911 S SHORE BLVD STE 100A,League City,TX,77573  Email:dfickey@farmersagent.com Phone Number:2814618707 Agent Name:Dan Frickey

Applicant Type:INDIVIDUAL

Prior Company NAIC:

Prior Policy Number:

Prior Company Name:

Renewal Billing:

Other Policy Number:

Potential Duplicate Policy:

1st Mortgagor

PENNYSMAC LOAN SERVICES LLC ISAOA/ATIMA

,  
,,,

Phone Number:(111) 111-1111

Fax Number:

Loan Number:8207041476

Required under

Mandatory

Purchase:

## Current Community Information

Community Name:

Community Number:485488

Map Panel:0228

Map Panel Suffix:G

Current Flood Zone:X

Current Base Flood Elevation(BFE):21

FIRM Date:11-20-1970

Program:FLOODREGULAR

Program Status:

County:

Current Map Date:08-15-2019

Rating Map Date:

## Prior Community Information

Community Number:

Map Panel:

Map Panel Suffix:

Flood Zone:

FIRM Date:11-20-1970

Has This Property Been Remapped?:

Map Revision Date:

Construction Date

Date of Original Construction:09-14-2023

Building Substantially Improved:NO

Post-FIRM Construction:YES

Substantial Improvement Date:

Building is on list of Historic Buildings:

## Prior Policy Information

Is this a new purchase (within the last year)?:YES

Prior Owner Policy Number:

Prior Owner Company Name:

Did the applicant have a prior NFIP policy for  
the building that lapsed?:

Was the policy receiving a PRE-FIRM or  
Newly Mapped discount?:

Mapped discount when it lapsed?:

Did the Policy lapse for a valid reason?:

## Occupancy Information

Occupancy Type:Single Family

Building Description:

Is this the Applicant's Primary

Residence: YES

Is the insured a small business with  
less than 100 employees?: NO

Is the insured a nonprofit entity?:NO

Date:

APC PRV 07 21





# STANDARD FLOOD INSURANCE QUOTE

PO Box 2057 Kalispell MT 59903 USA

Texas Farmers Insurance

Company

<https://www.farmers.com/>

(888) 391-2810

Date	Application Number	Effective Date	Expiration Date	Waiting Period
01-12-2024	FLD1660008674	02-11-2024	02-11-2025	Standard - 30 Day Wait
<b>Building Information</b>		Building Located Over Water:Not over Water		
Building Located In CBRS/OPA:NO		Building in Course of Construction:NO		
CBRS/OPA Designation Date:		Building Construction Type:Frame		
If the building is in the buffer zone, did USFWS issue an official determination showing the building outside the system unit or OPA?:		Construction Type Description:		
Is the building use consistent with the protected area purpose?:		Estimated Building Replacement Cost:250000		
Prior NFIP Claims:		Replacement Cost Value Returned by FEMA:430282		
Building Severe Repetitive Loss (SRL)		Total sq. footage of building:2863		
Property:		Total # of floors in building:1		
Property on NFIP SRL list, Document(s) provided indicating non-SRL:		Total # of units in building:1		
Coverage Req'd for Disaster Assistance:		What floor is the unit located on?:		
Foundation Information		Number of Detached Structures:0		
Foundation:Slab on Grade (non-elevated)		Building Located on Federal Land:		
Enclosure/Crawlspace Size:		Is the policy force-placed by the lender?:		
Number of Elevators:		Mobilehome/Travel Trailer Information		
Venting Information (excluding V-Zones)		On Permanent Foundation:		
Enclosure/Crawlspace Has Valid Flood Openings:		Anchored By:		
Number of Openings:		Serial Number:		
Building Machinery, Equipment and Appliances		Area of Permanent Openings (Sq. In.):		
Does the building contain appliances?:		Has Engineered Openings:		
Are all appliances elevated above the first floor?:		Does the building contain machinery and equipment servicing the building?:		
Elevation Certificate Information		Is all machinery and equipment servicing the building, located inside or outside the building, elevated above the first floor?: NO		
Elevation Certificate Section Used:C		Floodproofing Certificate:		
Elevation Certificate Date:09-01-2023		Flood Proofing Elevation:		
Diagram Number:1B		Lowest (Rating) Floor Elevation:		
Top of Bottom Floor:22		Elevation Certificate First Flood Height:		
Top of Next Higher Floor:		FEMA First Floor Height:		
Lowest Adjacent Grade (LAG):21		First Floor Height Method Used:EC		

## Premium Calculations

RISK RATING 2.0	COVERAGE	DEDUCTIBLE	COMPONENTS OF THE TOTAL	AMOUNT DUE
Building	250,000.00	1,250.00	Building Premium:	\$ 783.00
Content	100,000.00	1,000.00	Content Premium:	\$ 521.00
			Increased Cost of Compliance (ICC) Premium:	\$ 25.00
			Mitigation Discount:	\$ 0.00
			Community Rating System Reduction:	\$ (283.00)
			Full Risk Premium:	\$ 1,046.00
			Annual Increase Cap Discount:	\$ 0.00
			Pre-Firm Discount:	\$ 0.00
			Discounted Premium:	\$ 1,046.00
			Reserve Fund Assessment:	\$ 188.00
			HFIAA Surcharge:	\$ 25.00
			Federal Policy Fee:	\$ 47.00
			Probation Surcharge:	\$ 0.00
			Total Quoted Premium	\$ 1,306.00

Signature of Insurance Agent/Producer

Date

Signature of Policy Holder (Optional)

Date

Date:

APC PRV 07 21



# FLD1660008674 / DELORES TAMBORELLO

2217 ESTANCIA LN, Dickinson, Galveston County, TX,  
77539 - 4040  
2217 Estancia Ln, Dickinson, Galveston County, TX, 77539 -  
4040

Quote Source: AGENT

dtamborello@icloud.com

(281)904-8483

Renew indicator : BATCH RENEWAL

Agent Tasks : File complete

Term Start Date :	02/11/2024	Term End Date :	02/11/2025	Transaction Type :	New Busi Business
Transaction Eff. Dt. : Last Updated By :	02/11/2024 MARCUS DUNCAN	Waiting Period: Applicant Date :	Standard - 30 Day Wait 01/12/2024	last Updated Date :	01-24-20
Claims	0	Loss Run		Risk Rating	2.0
Total Premium Change :	\$1,306.00	Bill To :	POLHOLDER	Serv Rep : U/writer : Product Name :	Flood Prc
Total Premium :	\$1,306.00				

Coverage

Property Info

Additional info

Billing

Account View	Receivable View	Invoicing	Subledger		Unposted
Policy Transaction					
ACCOUNTING DT.	TRANS TYPE	TRANS REF	CHECK NO	CERTIFIED DATE	DEBIT
01/12/2024	PAYMENT	F2166000006885		01/12/2024	\$0.00
01/24/2024	INVOICE	INV00788282			\$1,306.00
					\$0.00
					01,

Forms

Tickets

Commission

Log Documents Agent Customer  
Portal Portal

Term Selection: (1139801)

02-11-2024/02-11-2025

Transaction Selection: (1541693)

ENDORSE - ISSUED

Last transaction

**Endorsement by ODESA**  
**RECIO**  
**Transaction date: 02-13-2024**  
**Transaction Eff. Dt. 2024-02-11**

**Note**

(02-13-2024) Chat with agt Alexandra want to update the mortgagee/agt assisted/email the copy...

**Agency Info**

08811-00340-000 Dan  
Frickev

Type note here

0/500

Make hidden? :

[Save Note](#)

[Reset](#)

Date	Description	Inserted By	Mark Hidden
02-13-2024 4:36:44 PM	Mortgagee Clause PennyMac Loan Services, LLC PO Box 6618 Springfield, OH 45501-6618	Alexandra Ryan	<input type="checkbox"/>
02-12-2024 12:26:19 PM	Chatted agent Alexandra looking for a policy declaration . Assisted and provided a copy of the policy declaration.	ANALIZA MODELO	<input type="checkbox"/>
02-06-2024 4:03:26 PM	Chat with agt Alexandra asking if there is still pending for the app/adv all good they can update the mortgagee/eoc	ODESA RECIO	<input type="checkbox"/>
01-24-2024 8:18:52 AM	Approved NB effective 2/11/2024. 30 day wait from	MARCUS DUNCAN	<input type="checkbox"/>