

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 INSURANCE COMPANY USE	
A1. Building Owner's Name HTS Job #21-0608		Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16713 MOBY DICK		Company NAIC Number:	
City JAMAICA BEACH	State TX	ZIP Code 77554	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) GCAD: 4197-0003-0004-000 LEGAL: LOT 4, BLOCK C, JAMAICA BEACH SECTION 10			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>			
A5. Latitude/Longitude: Lat. <u>29°11'07.2"</u> Long. <u>94°58'43.6"</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.			
A7. Building Diagram Number <u>5 (FIVE)</u>			
A8. For a building with a crawlspace or enclosure(s): <ul style="list-style-type: none"> a) Square footage of crawlspace or enclosure(s) <u>NA</u> sq ft b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>NA</u> c) Total net area of flood openings in A8.b <u>NA</u> sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 			
A9. For a building with an attached garage: <ul style="list-style-type: none"> a) Square footage of attached garage <u>NA</u> sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>NA</u> c) Total net area of flood openings in A9.b <u>NA</u> sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 			
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION			
B1. NFIP Community Name & Community Number Jamaica Beach, City of - 481271		B2. County Name Galveston	
B3. State TX - TEXAS			
B4. Map/Panel Number 48167C	B5. Suffix 0511	B6. FIRM Index Date Aug 15, 2019	B7. FIRM Panel Effective/ Revised Date Aug 15, 2019
B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 11'		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____			
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			

EL E V A T I O N C E R T I F I C A T E

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. 16713 MOBY DICK			Policy Number:
City JAMAICA BEACH	State TX	ZIP Code 77554	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, 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: HGCSD 62 (AW5708) Vertical Datum: NAVD 88

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

 NGVD 1929 NAVD 1988 Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.

		Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	17.6	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	27.0	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	NA	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	NA	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	17.5	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	5.1	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	5.2	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	5.6	<input checked="" 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 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 Brian S. House	License Number 6520		
Title Registered Professional Land Surveyor (RPLS)			
Company Name High Tide Land Surveying, LLC	Registration Number 10193855		
Address 8017 Harborside Dr.			
City Galveston	State TX	ZIP Code 77554	
Signature 	Date Jul 21, 2021	Telephone (409) 740-1517	

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Comments (including type of equipment and location, per C2(e), if applicable)
A5: LAT/LONG ESTABLISHED VIA RTK GPS AT SUBJECT TRACT.

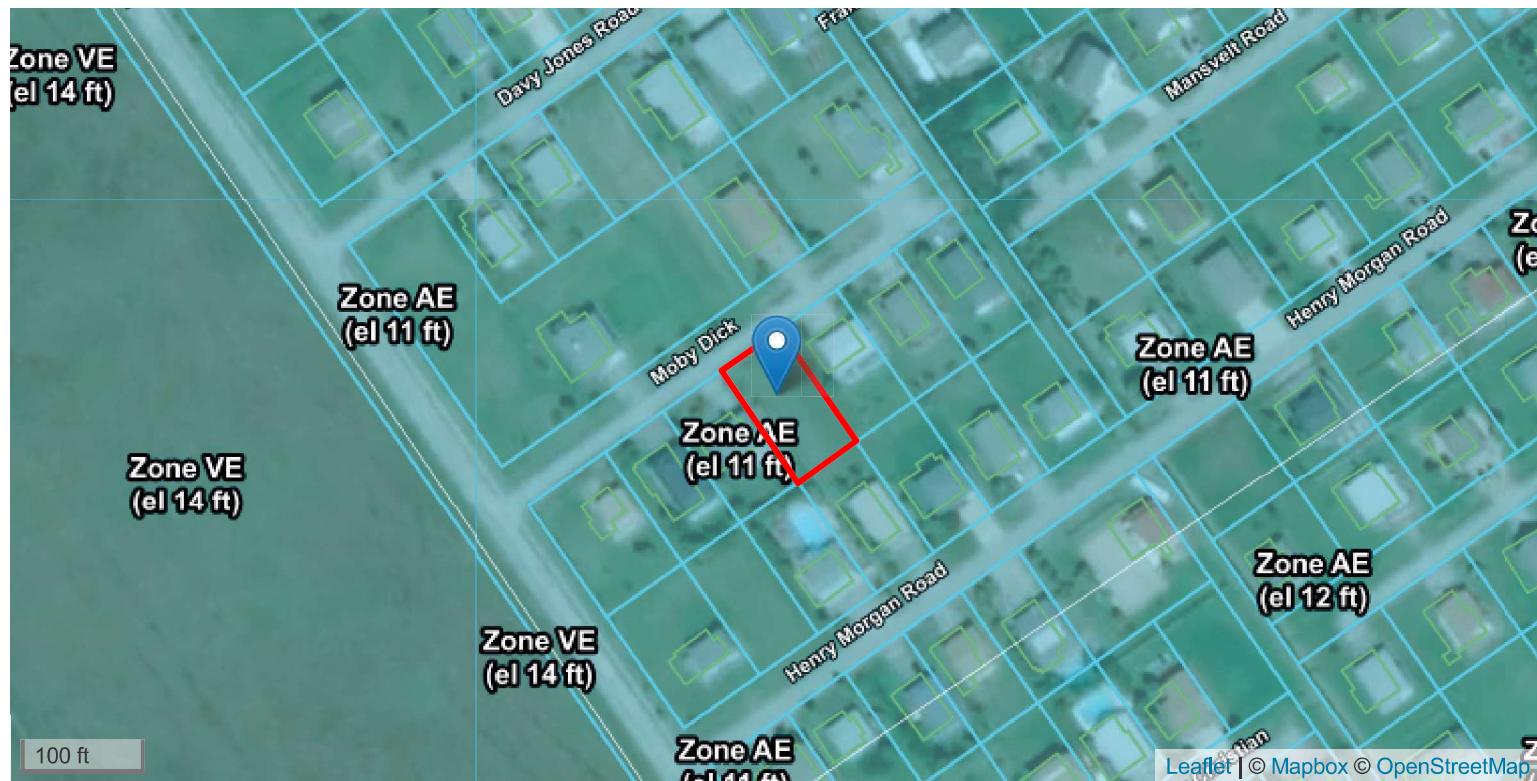
C2e: REFERS TO THE TOP OF AN AIR CONDITIONER DECK.





FloodRisk Standard

Provided Location	16713 MOBY DICK, JAMAICA BEACH, TX 77554		
Standardized Location	16713 MOBY DICK, JAMAICA BEACH, TX 77554		
Latitude, Longitude	29.185279, -94.978753	Parcel ID	4491
FIPS / MSA / Tract	48167 / 26420 / 7261.01	Community No.	481271
Community Name	JAMAICA BEACH, CITY OF		
County Name	GALVESTON COUNTY		



Flood Zone	Zone AE	Next Nearest Zone (Dist.)	X500 (10246 ft)
BFE	11 Feet NAVD88 (10.99 ft NGVD29)	USGS Ground Elev	5 ft NAVD88
FEMA Map	48167C0511G, 08/15/2019	Previous Map	4812710002D, 12/06/2002, Zone AE
NFIP Status	PARTICIPATING	NFIP Program	REGULAR
LOMA or LOMR	NO	CBRS / OPA	NO
Claims* \$ / #	\$22,843,654 / 1603	NFIP PIF*	952
Flood Source	1245 ft	Salt Water	1728 ft
Flood Source	1245 ft	Fresh Water	1598 ft

*Aggregated by NFIP community.

Look Up a ZIP Code™

Cities by ZIP Code™

For more rapid delivery, please use the recommended or recognized city names whenever possible for this ZIP Code™.

You entered:

77554

RECOMMENDED CITY NAME

GALVESTON TX

OTHER CITY NAMES RECOGNIZED FOR ADDRESSES IN THIS ZIP CODE™

JAMAICA BEACH TX

TIKI ISLAND TX

CITY NAMES TO AVOID

[Look Up Another ZIP Code™](#)

[Edit and Search Again \(/zip-code-lookup.htm?citybyzipcode\)](#)

[Feedback](#)



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 #: 16713 MOBY DICK, Galveston, TX, 77554
POLICY #: FLD1660000279
NFIP POLICY #: 1660000279
POLICY TERM: 12-05-2023 (At time of loan closing) - 12-05-2024 (12:01 AM)
POLICY ISSUED BY: Texas Farmers Insurance Company
PAYOR: THE Y CHAPTER LLC

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

INSURED NAME & MAILING ADDRESS

THE Y CHAPTER LLC
17 NINOS,
Irvine, CA, 92620

AGENT CONTACT INFORMATION

LUKE BOHLMAN
ELIZABETH SHAW
522 WAUGH DR, Houston, TX, 77019
Phone : 2813701000

FLOOD INSURANCE POLICY DECLARATIONS

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

Policy Coverages & Endorsements

	COVERAGE	DEDUCTIBLE	\$ 1,608
Building	\$ 250,000	\$ 2,000	Total Annual Payment
Contents	\$ 30,000	\$ 2,000	Includes Premium, Discounts, Fees, and Surcharges

Coverage limitations may apply. See your Policy Form for details.

Property Information

Primary Residence	NO
Building Occupancy	Single Family
Building Description	Main House/Building
First Floor Height (FFH)	11
Method Used to Determine FFH	EC
Property Description	Elevated without enclosure on piers, posts & piles, 1 Floors , Frame
Date of Construction	03-01-2021
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:	\$ 842
Contents Premium:	\$ 348
Increased Cost of Compliance (ICC) Premium:	\$ 23
Community Rating System Discount:	\$ (102.00)
Full-Risk Premium:	\$ 1,111
Discounted Premium:	\$ 1,111
Fees and Surcharges:	
Reserve Fund Assessment:	\$ 200
HFIAA Surcharge:	\$ 250
Federal Policy Fee:	\$ 47
Total Premium	\$ 1,608

ADDITIONAL INTERESTS

First Mortgagee
HOME EXPRESS MORTGAGE CORP,
1936 E DEERE AVE STE 200,
Santa Ana, Orange County, CA, 92705
Loan # : [REDACTED]

Date Mailed: 12-06-2023

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 12-05-2023	Application Number FLD1660000279	Effective Date 12-05-2023	Expiration Date 12-05-2024	Waiting Period Loan Transaction - No Wait
Insured Name(s) THE Y CHAPTER LLC	Mailing Address & Phone 17 NINOS,Irvine,CA,92620	Property Address 16713 MOBY DICK, 77554, Galveston, , TX	Agency Name, Address & Phone 522 WAUGH DR,Houston,TX,77019	
	Home Phone: Work Phone: Cell Phone:(949)698-2279 Email:naichen.cheng@gmail.com	Property Address Type:Location	Email:lbohlman@farmersagent.com Phone Number:2813701000 Agent Name:LUKE BOHLMAN	

Applicant Type: BUSINESS

Prior Company NAIC:

Prior Policy Number:

Prior Company Name:

Renewal Billing:

Other Policy Number:

Potential Duplicate Policy:

1st Mortgagor

HOMEXPRESS MORTGAGE CORP

1936 E DEERE AVE STE 200,

Santa Ana, Orange County , CA, 92705

Phone Number:

Fax Number:

Loan Number:2 [REDACTED]

Required under

Mandatory

Purchase:

Current Community Information

Community Name:

Community Number:481271

Map Panel:0511

Map Panel Suffix:G

Current Flood Zone:AE

Current Base Flood Elevation(BFE):5

FIRM Date:04-08-1971

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:04-08-1971

Has This Property Been Remapped?:

Map Revision Date:

Construction Date

Date of Original Construction:03-01-2021

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: NO

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
12-05-2023	FLD1660000279	12-05-2023	12-05-2024	Loan Transaction - No Wait

Building Information

Building Located In CBRS/OPA: NO

CBRS/OPA Designation Date:

If the building is in the buffer zone, did USFWS issue an official determination showing the building outside the system unit or OPA?:

Is the building use consistent with the protected area purpose?:

Prior NFIP Claims:

Building Severe Repetitive Loss (SRL)

Property:

Property on NFIP SRL list, Document(s) provided indicating non-SRL:

Coverage Req'd for Disaster Assistance:

Building Located Over Water: Not over Water

Building in Course of Construction: NO

Building Construction Type: Frame

Construction Type Description:

Estimated Building Replacement Cost: 250000

Replacement Cost Value Returned by FEMA: 248474

Total sq. footage of building: 1621

Total # of floors in building: 1

Total # of units in building: 1

What floor is the unit located on?:

Number of Detached Structures: 0

Building Located on Federal Land:

Is the policy force-placed by the lender?:

Foundation Information

Foundation: Elevated without enclosure on piers, posts & piles

Enclosure/Crawlspace Size:

Number of Elevators:

Mobilehome/Travel Trailer Information

On Permanent Foundation:

Anchored By:

Serial Number:

Venting Information (excluding V-Zones)

Enclosure/Crawlspace Has Valid Flood Openings:

Number of Openings:

Area of Permanent Openings (Sq. In.):

Has Engineered Openings:

Building Machinery, Equipment and Appliances

Does the building contain appliances?:

Are all appliances elevated above the first floor?:

Does the building contain machinery and equipment servicing the building?:

Is all machinery and equipment servicing the building, located inside or outside the building, elevated above the first floor?: NO

Elevation Certificate Information

Elevation Certificate Section Used: C

Elevation Certificate Date: 07-21-2021

Diagram Number: 5

Top of Bottom Floor: 17

Top of Next Higher Floor: 27

Lowest Adjacent Grade (LAG): 6

Floodproofing Certificate:

Flood Proofing Elevation:

Lowest (Rating) Floor Elevation:

Elevation Certificate First Flood Height: 11

FEMA First Floor Height: 11

First Floor Height Method Used: EC

Premium Calculations

RISK RATING 2.0	COVERAGE	DEDUCTIBLE	COMPONENTS OF THE TOTAL	AMOUNT DUE
Building	250,000.00	2,000.00	Building Premium:	\$ 842.00
Content	30,000.00	2,000.00	Content Premium:	\$ 348.00
			Increased Cost of Compliance (ICC) Premium:	\$ 23.00
			Mitigation Discount:	\$ 0.00
			Community Rating System Reduction:	\$ (102.00)
			Full Risk Premium:	\$ 1,111.00
			Annual Increase Cap Discount:	\$ 0.00
			Pre-Firm Discount:	\$ 0.00
			Discounted Premium:	\$ 1,111.00
			Reserve Fund Assessment:	\$ 200.00
			HFIAA Surcharge:	\$ 250.00
			Federal Policy Fee:	\$ 47.00
			Probation Surcharge:	\$ 0.00
			Total Quoted Premium	\$ 1,608.00

Signature of Insurance Agent/Producer

Date

Signature of Policy Holder (Optional)

Date

Date:

APC PRV 07 21



FLD1660000279 / THE Y CHAPTER LLC

16713 MOBY DICK, Galveston, Galveston County, TX, 77554

- 0000

17 NINOS, Irvine, Orange County, CA, 92620

naichen.cheng@gmail.com

(949)698-2279

Renew indicator : BATCH RENEWAL

Agent Tasks :

Term Start Date : 12/05/2023

Term End Date :

12/05/2024

Transaction Type :

New Busi
Business

Transaction Eff. Dt. : 12/05/2023

Waiting Period:

Loan Transaction - No Wait

Last Updated Date :

12-06-20

Last Updated By : CHRISTINA POWELL

Applicant Date :

12/05/2023

Claims

0

Loss Run

Risk Rating

2.0

Total Premium Change : \$1,608.00

Total Premium : \$1,608.00

Bill To :

POLHOLDER

Serv Rep :

U/writer :

Product Name :

Flood Prc

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	CREDIT	BALANCE	SY:
12/05/2023	PAYMENT	F2166000000662		12/05/2023	\$0.00	\$(1,608.00)	\$(1,608.00)	12
12/06/2023	INVOICE	INV00773263			\$1,608.00	\$0.00	\$0.00	12
01/05/2024	INVOICE	INV00782147			\$0.00	\$(1,608.00)	\$(1,608.00)	01
01/08/2024	REFUND	ref	800131015		\$1,608.00	\$0.00	\$0.00	01

Forms

Tickets

Commission

[Log](#) [Documents](#) [Agent Portal](#) [Customer Portal](#)

Term Selection: (1110025)

12-05-2023/12-05-2024

Transaction Selection: (1498480)

CANCEL - ISSUED

Last transaction

**Cancel Policy by NIKKI
BUCHER**
Transaction date: 01-05-2024
Transaction Eff. Dt. 2023-12-05

Note

(01-05-2024) Refund should be mailed to the insured at the address on file.

Agency Info

08811-12817-000 Luke
Bohlman
Elizabeth Shaw
522 WAUGH DR

12-05-2023 3:18:31 PM

Chatted agent Carolyn wanted to verify if payment has been received. Assisted and vised payment has been received today. Advised to allow few days to update the payment and for the policy declaration available on the system.

ANALIZA MODELO