

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

28179-15

OMB No. 1660-0008  
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION			FOR INSURANCE COMPANY USE	
A1. Building Owner's Name	CST Job No. 15-0991		File No. 7344-0000-0027-000	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	1980 Sea Glass		Company NAIC Number:	
City	Crystal Beach	State	TX	ZIP Code 77650
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 27, THE VILLAS AT CRYSTAL BEACH				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>RESIDENTIAL</b>				
A5. Latitude/Longitude: Lat. <u>29°27'25"</u>		Long. <u>094°37'51"</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>SIX (6)</u>				
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:		
a) Square footage of crawlspace or enclosure(s)	<u>384</u>	sq ft	a) Square footage of attached garage	<u>NA</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	<u>3</u>		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 A8.b	<u>750</u>	sq in	c) Total net area of flood openings in A9.b	<u>NA</u> sq in
d) Engineered flood openings?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings?	<input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>GALVESTON COUNTY 485470</b>	B2. County Name <b>GALVESTON</b>	B3. State <b>TX</b>			
B4. Map/Panel Number <b>485470</b>	B5. Suffix <b>0124</b>	B6. FIRM Index Date <b>E 04/08/1971</b>	B7. FIRM Panel Effective/ Revised Date <b>07/05/1993</b>	B8. Flood Zone(s) <b>A15</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>15'</b>

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: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  CBRS  OPA

## 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 64 (NAVD 88) Vertical Datum: NGVD 1929 (Adjustment-0.00 NGS Vertcon 2.1)

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.

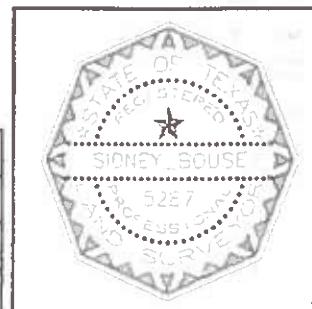
		Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>9 . 6</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<u>22 . 6</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>NA .</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>NA .</u>	<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)	<u>22 . 4</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>8 . 9</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>9 . 1</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>9 . 3</u>	<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.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  
 Check here if attachments.

Certifier's Name <b>SIDNEY BOUSE</b>	Email: <b>sid@surveygalveston.com</b>		License Number <b>5287</b>
Title <b>R.P.L.S.</b>	Company Name <b>COASTAL SURVEYING OF TEXAS, INC.</b>		
Address <b>P.O. BOX 2742 - 975 LAZY LANE WEST</b>	City <b>CRYSTAL BEACH</b>	State <b>TX</b>	ZIP Code <b>77650</b>
Signature 	Date <b>Nov 25, 2015</b>	Telephone <b>(409) 684-6400</b>	



## ELEVATION CERTIFICATE, page 2

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1980 Sea Glass			Policy Number:
City Crystal Beach	State TX	ZIP Code 77650	Company NAIC Number:

### SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

Comments C2e is top of AC deck.

Signature

Date Nov 25, 2015

### SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

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).

- a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the HAG.  
b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ feet  meters  above or  below the LAG.

E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions),

the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ feet  meters  above or  below the HAG.

E3. Attached garage (top of slab) is \_\_\_\_\_ feet  meters  above or  below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ feet  meters  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  No  Unknown. The local official must certify this information in Section G.

### SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.

### SECTION G - COMMUNITY INFORMATION (OPTIONAL)

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 E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3.  The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ feet  meters Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ feet  meters Datum \_\_\_\_\_

G10. Community's design flood elevation: \_\_\_\_\_ feet  meters Datum \_\_\_\_\_

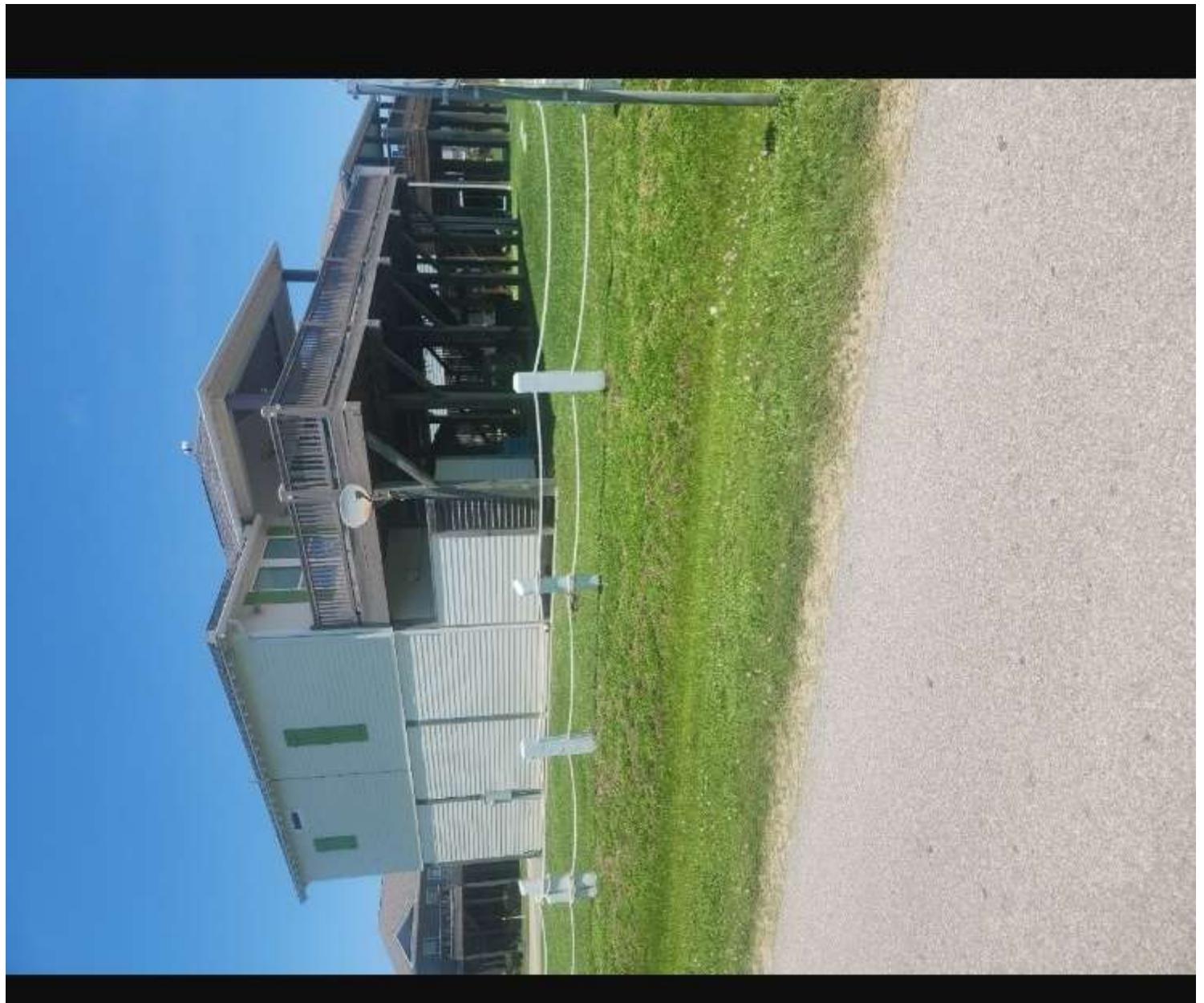
Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

Check here if attachments.





## **VERIFICATION OF PRIMARY RESIDENCE STATUS FOR NFIP POLICY RATING**

Insured Name: MORRIS MONTALVO  
Policy or Quote#: TMP240430731978  
Property Address: 1980 SEA GLASS  
City, State, Zip CRYSTAL BEACH, TX 77650

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The above address is my primary residence, and I and/or my spouse live at this location for more than 50% of the 365 days following the policy effective date.

**Morris Montalvo**

Insured Name (Printed)

DocuSigned by:  
Morris Montalvo  
732707359007413

Insured Signature

4/30/2024

Date

PURSUANT TO 28 U.S.C. § 1746 I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES OF AMERICA THAT THE FOREGOING IS TRUE AND CORRECT. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY CAUSE MY POLICY TO BE VOID, AND MAY BE PUNISHABLE BY FINE OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW.

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Please submit your signed and dated enclosed statement, to your agent, or to the Insurance Company listed on the application.

If you have any questions, please contact your flood insurance agent or licensed representative.

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*Privacy Notice: The Flood Insurance Processing Center collects and uses personal information to process transactions. This information is not shared with outside parties except to the extent necessary to provide the service. We exercise appropriate data collection, storage and processing practices, and security measures to protect against unauthorized access, alteration, disclosure or destruction of your personal information.*



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 #:** 1980 SEA GLASS, Crystal Beach, TX, 77650

**POLICY FORM:** Dwelling Policy

**POLICY #:** FLD1660041976

**POLICY DECLARATIONS TYPE:** New Policy Declarations

**NFIP POLICY #:** 1660041976

**RATE CATEGORY :** RatingEngine

**POLICY TERM:** 05-30-2024 (12:01 AM) - 05-30-2025 (12:01 AM)

**AGENT CONTACT INFORMATION**

**POLICY ISSUED BY:** Texas Farmers Insurance Company

**INSURED NAME & MAILING ADDRESS**

**PAYOR:** MORRIS MONTALVO

Daniel Priest

MORRIS MONTALVO

347 S MAIN ST STE 100, Lumberton, TX, 77657

6480 MONROE STREET,  
Groves, TX, 77619

Phone : 4097557600

## FLOOD INSURANCE POLICY DECLARATIONS

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

### Policy Coverages & Endorsements

COVERAGE	DEDUCTIBLE	\$ 1,001
Building	\$ 234,000	
Contents	\$ 93,000	Total Annual Payment

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

Includes Premium, Discounts, Fees, and Surcharges

### Property Information

### Premium Calculations

		COMPONENTS OF THE TOTAL	PREMIUM
<b>Primary Residence</b>	YES	Building Premium:	\$ 482
<b>Building Occupancy</b>	Single Family	Contents Premium:	\$ 290
<b>Building Description</b>	Main House/Building	Increased Cost of Compliance (ICC) Premium:	\$ 15
<b>First Floor Height (FFH)</b>	13.7	Community Rating System Discount:	\$ 0
<b>Method Used to Determine FFH</b>	EC	<b>Full-Risk Premium:</b>	\$ 787
<b>Property Description</b>	Elevated with enclosure on piers, posts & piles, 1 Floors , Frame	<b>Discounted Premium:</b>	\$ 787
<b>Date of Construction</b>	12-31-2014	Fees and Surcharges:	
<b>Prior NFIP Claims</b>	0 Claim(s)	Reserve Fund Assessment:	\$ 142
Your property's NFIP flood claims history can affect your premium.		HFIAA Surcharge:	\$ 25
		Federal Policy Fee:	\$ 47
		<b>Total Premium</b>	<b>\$ 1,001</b>

### ADDITIONAL INTERESTS

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](http://FloodSmart.gov)

Date Mailed: 08-16-2024





# STANDARD FLOOD INSURANCE APPLICATION

PO Box 2057 Kalispell MT 59903 USA

Texas Farmers Insurance

Company

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

(888) 391-2810

Date 04-30-2024	Application Number FLD1660041976	Effective Date 05-30-2024	Expiration Date 05-30-2025	Waiting Period Standard - 30 Day Wait
Insured Name(s) MORRIS MONTALVO	Mailing Address & Phone 6480 MONROE STREET,Groves,TX,77619	Property Address 1980 SEA GLASS, 77650, Port Bolivar, GALVESTON COUNTY, TX	Agency Name, Address & Phone 347 S MAIN ST STE 100,Lumberton,TX,77657	
Home Phone: Work Phone: Cell Phone:(409)300-8613 Email:bigmo831@hotmail.com	Property Address Type:Location	Other Policy Number: Potential Duplicate Policy:	Email:dpriest@farmersagent.com Phone Number:4097557600 Agent Name:Daniel Priest	
Applicant Type:INDIVIDUAL	Prior Company NAIC:	Prior Policy Number:	Prior Company Name:	
Prior Company Name:	Renewal Billing:			

Current Community Information  
Community Name:GALVESTON COUNTY\*  
Community Number:485470  
Map Panel:0309  
Map Panel Suffix:G  
Current Flood Zone:VE  
Current Base Flood Elevation(BFE):16  
FIRM Date:04-09-1971  
Program:FLOODREGULAR  
Program Status:  
County:GALVESTON COUNTY  
Current Map Date:04-09-1971  
Rating Map Date:

Prior Community Information  
Community Number:  
Map Panel:  
Map Panel Suffix:  
Flood Zone:  
FIRM Date:04-09-1971  
Has This Property Been Remapped?:  
Map Revision Date:

Construction Date  
Date of Original Construction:12-31-2014  
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)?:NO  
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
04-30-2024	FLD1660041976	05-30-2024	05-30-2025	Standard - 30 Day 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: 300000

Replacement Cost Value Returned by FEMA: 219446

Total sq. footage of building: 1380

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: 11-25-2015

Diagram Number: 5

Top of Bottom Floor: 8

Top of Next Higher Floor: 23

Lowest Adjacent Grade (LAG): 8

Floodproofing Certificate:

Flood Proofing Elevation:

Lowest (Rating) Floor Elevation:

Elevation Certificate First Floor Height: 0

FEMA First Floor Height: 13.2

First Floor Height Method Used: TOOL

## Premium Calculations

RISK RATING 2.0	COVERAGE	DEDUCTIBLE	COMPONENTS OF THE TOTAL	AMOUNT DUE
Building	250,000.00	5,000.00	Building Premium:	\$ 484.00
Content	100,000.00	5,000.00	Content Premium:	\$ 285.00
			Increased Cost of Compliance (ICC) Premium:	\$ 15.00
			Mitigation Discount:	\$ 0.00
			Community Rating System Reduction:	\$ 0.00
			Full Risk Premium:	\$ 784.00
			Annual Increase Cap Discount:	\$ 0.00
			Pre-Firm Discount:	\$ 0.00
			Discounted Premium:	\$ 784.00
			Reserve Fund Assessment:	\$ 141.00
			HFIAA Surcharge:	\$ 25.00
			Federal Policy Fee:	\$ 47.00
			Probation Surcharge:	\$ 0.00
			<b>Total Quoted Premium</b>	<b>\$ 997.00</b>

Signature of Insurance Agent/Producer

Date

Signature of Policy Holder (Optional)

Date

Date:

APC PRV 07 21



# FLD1660041976 / MORRIS MONTALVO

1980 SEA GLASS, Crystal Beach, Galveston County, TX,  
77650 - 1980

6480 MONROE STREET, Groves, Jefferson County, TX,  
77619

Quote Source: AGENT

bigmo831@hotmail.com

(409)300-8613

Renew indicator : BATCH RENEWAL

Agent Tasks :

<b>Term Start Date :</b>	05/30/2024	<b>Term End Date :</b>	05/30/2025	<b>Transaction Type :</b>	New Busi Business
<b>Transaction Eff. Dt. :</b>	05/30/2024	<b>Waiting Period:</b>	Standard - 30 Day Wait	<b>Last Updated Date :</b>	05-28-20

Claims	0	Loss Run	Risk Rating	2.0
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<b>Total Premium Change :</b>	\$1,001.00	<b>Bill To :</b>	POLHOLDER	<b>Serv Rep :</b>	
<b>Total Premium :</b>	\$1,001.00			<b>U/writer :</b>	
				<b>Product Name :</b>	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
05/09/2024	PAYMENT	Transferred to new policy		04/26/2024	\$0.00	\$(852.00)	\$(852.00)	05
05/28/2024	PAYMENT	1832		05/21/2024	\$0.00	\$(145.00)	\$(997.00)	05
05/28/2024	INVOICE	INV00835508			\$1,001.00	\$0.00	\$4.00	05
05/28/2024	BREAKAGE	REF60584252		05/28/2024	\$0.00	\$(4.00)	\$0.00	05

Forms

Tickets

Commission

Log    Documents    Agent    Customer  
Portal    Portal

Term Selection: (1314875)

05-30-2024/05-30-2025

Transaction Selection: (1779662)

NEWBUSINESS - ISSUED

Last transaction

New Business by MARCUS  
DUNCAN  
Transaction date: 05-28-2024  
Transaction Eff. Dt. 2024-05-  
30

#### Note

(05-28-2024) Aprvd NB  
effective 5/30/24, 30 day wait  
from App Submission date of  
4/30/24. Pr...

#### Agency Info

08811-07379-000 Daniel  
Priest  
**Daniel Priest**  
247 S MAIN ST STE 100

**M**

MORRIS J. OR RENEE MONTALVO  
HIS LIC 03742477 HER 08300014  
6480 MONROE PH 409-960-9185  
GROVES, TEXAS 77619

1832

88-7772/3131  
B77706

**CHECK GUARD**  
SAFEGUARD PROTECTION

5-20-24

Date

\$ 145.00

Dollars



Photo  
Safe  
Deposit®  
Details on back

PAY to the  
order of Texas Farmers Insurance Company  
One Hundred Forty Five Dollars ~~00~~ <sup>00</sup>

**Rave**  
FINANCIAL

Policy #FD1660071976

13131777271

0002120310111832

Harland Clarke

COLONIAL CLASSIC

Page 2 of 4

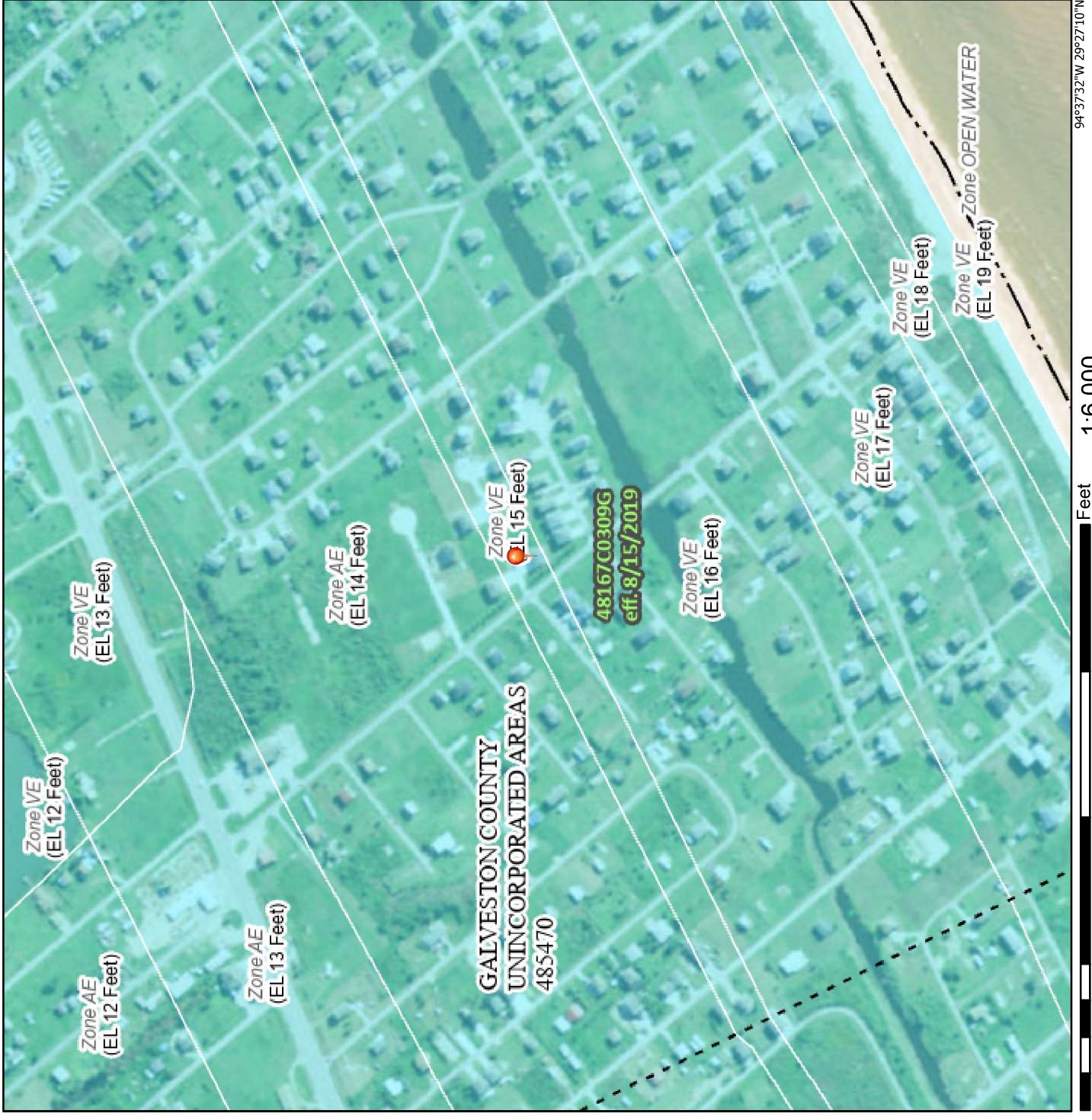
# National Flood Hazard Layer FIRMette



## Legend

94°38'10"W 29°27'41"N

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT



<b>SPECIAL FLOOD HAZARD AREAS</b>	Without Base Flood Elevation (BFE) Zone A, V A99 With BFE or Depth Zone AE, AC, AH, VE, AR Regulatory Floodway
	0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone X
	Future Conditions 1% Annual Chance Flood Hazard Zone X
	Area with Reduced Flood Risk due to Levee. See Notes. Zone X
	Area with Flood Risk due to Levee Zone D

<b>OTHER AREAS OF FLOOD HAZARD</b>	0.2% Annual Chance Flood Hazard Zone X
	Effective LOWRIS Area of Undetermined Flood Hazard Zone D
	Channel, Culvert, or Storm Sewer
	Levee, Dike, or Floodwall

<b>GENERAL STRUCTURES</b>	NO SCREEN Area of Minimal Flood Hazard Zone X
	Effective LOWRIS Area of Undetermined Flood Hazard Zone D
	Channel, Culvert, or Storm Sewer
	Levee, Dike, or Floodwall

<b>OTHER FEATURES</b>	Digital Data Available
	No Digital Data Available
	Unmapped

The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on **5/28/2024 at 3:52 PM** and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRMS effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.

94°37'32"W 29°27'10"N  
1:6,000  
2,000  
1,500  
1,000  
500  
250  
0  
Basemap Imagery Source: USGS National Map 2023

## Notes

[Print Log](#)

Type note here

0/500

**Make hidden? :** [Save Note](#)[Reset](#)

Date	Description	Inserted By	Mark Hidden
05-28-2024 3:57:45 PM	<p><b>Aprvd NB effective 5/30/24, 30 day wait from App Submission date of 4/30/24. Premium received within 9 days of Application Submission date of 4/30/24. EC and photos on file used for rating. POR doc on file for Primary Residence. after correcting the Community info, the premium rose by \$34. Cvgs reduced and issued from \$250K/\$100K to \$234K/\$93K.</b></p>	MARCUS DUNCAN	