



4701 South 3rd Street
Abilene, Texas 79605
Phone (325) 677-6712
Firm Registration No.
10194134

Invoice

Date	Invoice #
9/28/2023	EC

Bill To
Cole Beauchamp 244D Key Lane Abilene Texas 79602

Terms
Due on receipt

Item Code	Description	Amount
Elevation Certificate	Elevation Certificate	600.00T

Please make checks payable to GEOTEX PROPERTY SOLUTIONS, LLC

Subtotal \$600.00

Sales Tax (8.25%) \$49.50

Total \$649.50

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 Cole and Jessica Beauchamp				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 244D Key Lane				Company NAIC Number:	
City Abilene		State Texas		ZIP Code 79602	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 4.0 acres out of the SW 1/4 of Section 36, Lunatic Asylum Lands, Taylor County, Texas. TaylorCad PID 1063187					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>32°19'10.84965"N</u> Long. <u>99°40'04.17546"W</u> Horizontal Datum: ☐ NAD 1927 ☒ 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>1B</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) _____ sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____					
c) Total net area of flood openings in A8.b _____ sq in					
d) Engineered flood openings? ☐ Yes ☐ No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>200.00</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A9.b _____ sq in					
d) Engineered flood openings? ☐ Yes ☐ No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number City of Abilene 485450			B2. County Name Taylor		B3. State Texas
B4. Map/Panel Number 48441C0360	B5. Suffix F	B6. FIRM Index Date 01-06-2012	B7. FIRM Panel Effective/ Revised Date 01-06-2012	B8. Flood Zone(s) A	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) No BFE provided on FIRM
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					

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022

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. 244D Key Lane			Policy Number:
City Abilene	State Texas	ZIP Code 79602	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: Leica Texas SmartNet GPS Vertical Datum: NAVD88

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>1841.9</u> | ☒ feet | ☐ meters |
| b) Top of the next higher floor | _____ | ☐ feet | ☐ meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | _____ | ☐ feet | ☐ meters |
| d) Attached garage (top of slab) | <u>1841.4</u> | ☒ feet | ☐ meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) | _____ | ☐ feet | ☐ meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>1840.9</u> | ☒ feet | ☐ meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>1841.4</u> | ☒ feet | ☐ meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | _____ | ☐ feet | ☐ 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
James L. Williams, Jr.

License Number
4885

Title
Registered Professional Land Surveyor

Company Name
Geotex Property Solutions

Address
4701 South 3rd. Street

City
Abilene

State
Texas

ZIP Code
79605



Signature
[Handwritten Signature]

Date
09-26-2023

Telephone
(325) 677-6712

Ext.

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

Comments (including type of equipment and location, per C2(e), if applicable)

No outside equipment at this property at this date.

GeoTex Property Solutions File # 91-47-23

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022

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. 244D Key Lane			Policy Number:
City Abilene	State Texas	ZIP Code 79602	Company NAIC Number

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 _____ 0.5 ☒ feet ☐ meters ☒ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ 1.0 ☒ 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 1–2 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 _____ 0.0 ☒ 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
James L. Williams, Jr.

Address 4701 South 3rd. Street	City Abilene	State Texas	ZIP Code 79605
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Signature 	Date 09-26-2023	Telephone
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Comments
There is no outside equipment servicing this building at this time.
Geotex Property Solutions file No. 91-47-23

☐ Check here if attachments.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2022

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. 244D Key Lane			Policy Number:
City Abilene	State Texas	ZIP Code 79602	Company NAIC Number

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–G10) 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
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Community Name	Telephone
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Signature	Date
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Comments (including type of equipment and location, per C2(e), if applicable)

☐ Check here if attachments.

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
244D Key Lane

FOR INSURANCE COMPANY USE

Policy Number:

City
Abilene

State
Texas

ZIP Code
79602

Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption Front View 09-26-2023

Clear Photo One



Photo Two

Photo Two Caption Right Side View 09-26-2023

Clear Photo Two

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

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.
244D Key Lane

Policy Number:

City
Abilene

State
Texas

ZIP Code
79602

Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption Left Side View 09-26-2023

Clear Photo Three



Photo Four

Photo Four Caption Back View 09-26-2023

Clear Photo Four