

JOE K. RIPPLE
FLOODPLAIN ADMINISTRATOR, CFM
SOFIA GARCIA GIBSON
FLOODPLAIN / BUILDING PERMITS
OFFICE ASSISTANT SR.
BELINDA HOWELL
FLOODPLAIN / BUILDING PERMITS
PERMIT TECHNICIAN
VICKIE THOMAS
FLOODPLAIN/BUILDING PERMITS
FLOODPLAIN CONSULTANT



PHONE:
(979) 864-1295
(979) 388-1295
(281) 756-1295

BRAZORIA COUNTY

451 North Velasco, Suite #210
Angleton, Texas, 77515

December 29, 2023

Mei Ling Valdes
Planning, Permitting & Technical Services
Coastal Resources Division
Texas General Land Office
P.O. Box 12873
Austin, TX 78711-2873

Re: Beach front construction application for 13211 Buccaneer Parkway (Treasure Island) Freeport, TX

Dear Ms. Valdes,

This application is for a residential structure with 180 Square feet of living area with (3) bedrooms and (2) baths built upon pilings certified by a professional engineer.

After construction a final elevation certificate will be turned into this office to show compliance with County and FEMA elevation requirements.

This beachfront construction application does not include a walkover and it complies with and promotes Brazoria County's beach access policies and requirements, particularly the dune protection and beach access policies relation to public beach ingress/egress, off beach parking and avoidance of reduction in the size of the public beach due to erosion.

Sincerely,

A handwritten signature in black ink, appearing to read "Joe K. Ripple". The signature is written in a cursive style and is positioned above the printed name and title.

Joe K. Ripple
Floodplain Department

Enclosures



TEXAS GENERAL LAND OFFICE
COMMISSIONER DAWN BUCKINGHAM, M.D.

January 8, 2023

Via Electronic Mail

Joe Ripple, CFM
Floodplain Administrator
Brazoria County
451 N Velasco, Suite #210
Angleton, Texas 77515

Beachfront Construction Certificate and Dune Protection Permit in Brazoria County

Site Address: 13211 Buccaneer Pkwy, Freeport (Treasure Island)
Legal Description: Treasure Island (A0029 S F Austin) Blk 1 Lot 8
Lot Applicant: SunChase Construction c/o Josh & Dachia Dufur
GLO ID No.: BDBC-23-0248

Dear Mr. Ripple:

The General Land Office (GLO) has reviewed the application materials for a beachfront construction certificate and dune protection permit for the above-referenced location. The applicant proposes to construct a single-family residence with fibercrete paving beneath the habitable structure, a crushed concrete driveway, and a septic system. The proposed construction is located more than 200 feet landward of the line of vegetation. According to the Bureau of Economic Geology, the area is eroding at a rate of eight to nine feet per year.

Based on the materials forwarded to our office for review, we have the following comments:

- The applicant proposes to construct the habitable structure seaward of the Building Setback Line, which is prohibited without an exemption from Brazoria County.¹ To qualify for an exemption, the applicant must demonstrate to the satisfaction of the County that no practicable alternatives to construction seaward of the Building Setback Line exist.²
- Since the construction is located in an eroding area more than 200 feet landward of the line of vegetation, the applicant may pave or alter only the ground within the footprint of the proposed habitable structure, which does not include incidental projecting eaves, uncovered decks, or uncovered stairs.³ The applicant is prohibited from paving the area beneath the uncovered stairs. Permeable materials such as brick pavers for a landing at the bottom of the stairs is allowed.

¹ Brazoria County Erosion Response Plan § 5.

² Brazoria County Erosion Response Plan § 5.1.

³ Brazoria County Dune Protection and Beach Access Plan § 5(IV)(B)(3) & 31 Tex. Admin. Code § 15.2(39).

Mr. Ripple
January 8, 2023
Page 2 of 2

- Driveways may be stabilized using gravel, crushed limestone, or pavers.⁴ Crushed concrete as proposed is allowed.
- Cisterns, septic tanks, and septic fields are prohibited from being constructed seaward of any structure serviced by the cisterns, septic tanks, and septic fields.⁵ As proposed, the septic system appears to comply with this requirement.
- The County may only permit the applicant to construct an enclosure beneath the habitable structure if the walls are breakaway and the construction is consistent with the requirements of the National Flood Insurance Program.⁶
- The County must limit the area of enclosures below BFE to 299 square feet and must ensure the enclosure is designed to minimize impacts to hydrology.⁷
- The County must ensure the proposed construction is consistent with the FEMA-approved county commissioners court order.⁸

Any deviations from what is proposed in this permit application requires a new or amended beachfront construction certificate and dune protection permit and further GLO review.

If you have any questions, please contact me at (512) 463-5720 or at meiling.valdes@glo.texas.gov.

Sincerely,



Mei Ling Valdes
Beach Access & Dune Protection Program
Coastal Resources Division
Texas General Land Office

cc: Vickie Thomas, Brazoria County

⁴ Brazoria County Dune Protection and Beach Access Plan § 5(IV)(B)(3).

⁵ Brazoria County Dune Protection and Beach Access Plan § 3(II)(K) & 31 Tex. Admin. Code § 15.4(c)(10).

⁶ 31 Tex. Admin. Code § 15.6(f)(4).

⁷ Brazoria County Erosion Response Plan § 5.3.

⁸ 31 Tex. Admin. Code § 15.6(e)(3).

**BRAZORIA COUNTY
DEVELOPMENT/BUILDING PERMIT APPLICATION**

Angleton 979-864-1295

451 North Velasco, Suite 210, Angleton, TX 77515

Houston/Alvin 281-756-1295

OWNERSHIP INFORMATION:

Name: JOSH & DARLINA DUFUR Phone: 570 920 3852
 Current/Mailing Address: 5622 N LONECREEK RD CRANDALL OK 74139
Street or PO Box City/State Zip

Building Contractors Information: SUNCOMBE CONSTRUCTION Address: 24 FLAG LAKE DR LAKE STEVEN Phone: 979 769 1302

LOCATION OF CONSTRUCTION:

Subdivision: <u>TREASURE ISLAND</u>		SITE ADDRESS (Where Structure Will Be Placed or Constructed)			
		<u>Buccanour</u>			
		Street Address: <u>13211 BUCKINBER DR</u>		City (required): <u>TREASURE ISLAND</u>	
Section:	Block:	Lot:	Abstract No.:	Acreage:	PID #:
1	1	8	29		257245

TYPE OF IMPROVEMENT Check Appropriate Box(es)	PROPOSED USE Fill Out and Check Any That Apply to Your Application	OWNERSHIP Check Appropriate Box(es) Fill Out Cost & Sq. Ft.	TYPE OF WATER SUPPLY Check Appropriate Box	TYPE OF SEWAGE DISPOSAL Check Appropriate Box(es)
<input checked="" type="checkbox"/> New Building <input type="checkbox"/> Addition to Building <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Mobile Home <input type="checkbox"/> Residential RV <input type="checkbox"/> Levee Construction <input type="checkbox"/> Relocated Building - <input type="checkbox"/> Came from Outside County <input type="checkbox"/> Mobile Home Park or RV Park # of Spaces _____	<input checked="" type="checkbox"/> Residential Number of Bedrooms: <u>3</u> Number of Bathrooms: _____ Full <u>2</u> Partial _____ <input checked="" type="checkbox"/> One Family <input type="checkbox"/> Multi Family - # of Units: _____ <input type="checkbox"/> Non Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Other: _____ (Type of Building)	<input checked="" type="checkbox"/> Private (Individual, Corp, Non Profit) <input type="checkbox"/> Public (Federal, State, etc...) Cost: \$ <u>300,000</u> Floor Area Sq. Ft. (including garage): <u>1280</u> sq. ft.	<input checked="" type="checkbox"/> Public/Private Company <input type="checkbox"/> Individual (Water Well)	<input type="checkbox"/> Public/Private Company <input checked="" type="checkbox"/> Individual (Septic) Copy of Environmental Health Permit attached: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No #: <u>2023-687</u>

Fee: Application fee of \$75.00 for Residential permits. If the property lies within the Special Flood Hazard Area of the County, an additional fee of \$0.04 per square foot for Inspection fees will be charged. A natural ground elevation certificate and copy of floor plan are also required for Flood Zone areas. Any application for property of less than ten (10) acres shall obtain an Environmental Permit approval before a County building permit will be issued. UNLESS otherwise specified. **MAKE CHECKS PAYABLE TO "TREASURER OF BRAZORIA COUNTY" - NO REFUNDS.**

ALL COMMERCIAL BUILDINGS will require approvals from the local Drainage District, Environmental Health and a Fire Code permit by the County Emergency Management Coordinator. **Special flood hazard areas require additional documents.** All commercial construction in Pearland's ETJ is required to contact Pearland City Hall. **Fees Vary According To Type of Business.**

ANY construction located on a proposed County and/or Municipal Thoroughfare in Pearland's ETJ is required to contact Pearland City Hall

Signature: Jim Cloney Contractor Date: 12/29/2023

DO NOT WRITE BELOW THIS LINE					
Approved By: <u>Vickie Hornum</u>		Highest Natural Ground is <u>2.45</u> ft. Certified By: <u>Terry Singletary</u> RPLS # <u>4886</u> on <u>9/27/23</u>		Permit Fee \$ <u>75</u>	Inspection Fee \$ <u>51.20</u>
Electric <u>CP</u>	Mailbox Ltr <u>Yes</u>	Setback Ltr <u>25'</u>	Thoroughfare <u>No</u>	Total Fee: \$ <u>126.20</u>	Check # <u>3718</u>
ETJ <u>Freeport</u>	Inspection Ltr <u>Yes</u>	Ack Ltr <u>No</u>	Mobile Home Information <u>No</u>	FEMA Zone: <u>VE</u> <u>16+2</u> Elevation: <u>18</u> MSL	Panel No.: <u>67514</u> Map Date: <u>12/30/23</u>
				Permit Number	Receipt No. <u>19040</u>
				Class	<u>B</u>

Special Provisions:

Mail Email To: _____ Pick Up



Brazoria County Floodplain Receipt

(979) 864-1295

(281) 756-1295

111 East Locust Bldg. A-29
Angleton, Texas 77515

Floodplain Administrator

Receipt No 00019040 Receipt Date 12/29/2023 Receipt Time 10:31:30 AM
NO REFUND(S)

Received From: SunChase Construction

Trans Type: RPR75 Permit Fee - NC - Residential, Mobile Homes and Barns HUD / County Exempt: N
Misc. Descr: Qty: 1 Price: \$75.00

Permit No: Square Footage: 0 Amount Sq. Ft \$0.00

Contractor:

Owner:

Amount Owed: \$75.00

Trans Type: SQFTG Square Footage HUD / County Exempt: N
Misc. Descr: Qty: 1 Price: \$0.04

Permit No: Square Footage: 0 Amount Sq. Ft \$0.00

Contractor:

Owner:

Amount Owed: \$51.20

Comments: 13211 Buccaneer Parkway Freeport CK# 3718

Payment Information

Payment Type: CHK Check# / MO#: 3718 Pay Amount: \$126.20

Payment Type: Check# / MO#: Pay Amount: \$0.00

Office Use Only Posted: N

Total Amount Received: \$126.20

Rec. By: 16157

Void: N Void By

Void Date:

Void Reason: Void Time:

STATEMENT OF COMMISSIONER'S COURT
OF BRAZORIA COURT
TO CONFORM TO REQUIREMENTS OF
CLASS "B" BUILDING PERMIT

STATE OF TEXAS

COUNTY OF BRAZORIA

The undersigned holder of **Development Permit No.** _____ (whether acting individually or through a duly authorized agent or attorney) does hereby certify to Commissioners' Court of Brazoria County, Texas as follows.

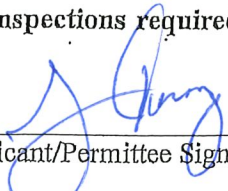
The undersigned permittee:

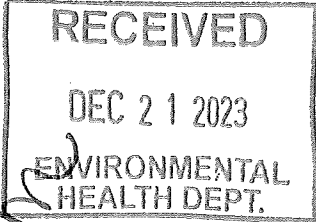
1. Accepted **Development Permit No.** _____.
2. Is familiar with all plans, specifications and other written material attached to or filed with the **Development Permit Application** on file with the County Floodplain Administrator.
3. Acknowledges that the plans, specifications and other written material filed with **Development Permit Application** is incorporated by reference and made part of this Certificate for purposes.
4. Acknowledges self (itself) to be strictly bound to Commissioners' Court to construct the work permitted under the above described building permit in strict conformity with the plans, specifications and other written material incorporated by reference of this Certificated.
5. Hereby binds himself to establish the required construction elevation to a National Geodetic Survey Marker and have same certified by Texas Registered Surveyor (or agreeable alternate). **The original Finished Construction Elevation certificate with registered surveyor's stamp, signature, date and pictures shall be forwarded to the County Floodplain Administrator's office verifying top of bottom floor reading upon completion of the structure. It must indicate that it is the "Finished Construction" certificate showing (a) top of bottom floor reading and (e) lowest elevation of machinery or equipment in Section C of the certificate.**

If the Finished Construction Elevation Certificate is not received, your building permit will be put in violation in the Brazoria County Floodplain Administrator's office.

6. Is required to notify the County Floodplain Administrator when construction progresses to the point necessary for the foundation inspection (after certification) and later for the electrical/plumbing to verify the electrical and plumbing facility are above the base flood.
7. Shall not have a valid permit until this agreed upon and signed original document is on file and in possession of the County Floodplain Administrator.
8. If at any time an Engineering Study was required and the data submitted is found to be inaccurate, **Brazoria County or the County Floodplain Administrator** cannot be held liable. The responsibility shall fall back on the property owner and/or Engineering Firm submitting the information.
9. **Any structure that is used for commercial or a public facility must adhere to the International Fire Codes. Contact the Emergency Management Coordinator of Brazoria County for inspections required.**

Applicant/Permittee Signature





ON-SITE SEWAGE FACILITY PERMIT APPLICATION
BRAZORIA COUNTY ENVIRONMENTAL HEALTH DEPT
111 East Locust Bldg A-29, Suite 270 ANGLETON, TX 77515
HOUSTON (281)756-1600 ANGLETON (979)864-1600 CLUTE (979)388-1600

2023-687
Permit Number
\$250 Single Family
\$450 All Others
New
Replacement
Alteration
Type DE w/ chl
BCEHD USE ONLY

This application will expire one year from the application date if inspection not complete. No refunds once permit is issued. Attach Copy of Legal Description (i.e. Deed, Plat, Survey, Appraisal)

PROPERTY OWNER (NAME ON DEED) (LAST) (FIRST) (INT)
Dufur Joshua & Dacha

PHONE NUMBERS 580-920-3852 EMAIL dachia.dufur@yahoo.com

MAILING ADDRESS 5622 N. Lone Oak Rd. Caddo OK. 74729

SITE ADDRESS 13211 Buccaneer Parkway, Freeport, Texas 77541 Acres 0.1148

WATER SOURCE Private Public Treasure Island Mud (Name) Water Saving Devices: Yes No

SINGLE FAMILY RESIDENCE: # of Bedrooms 3 Living Area(Sq Ft) 1480 Daily Wastewater Usage Rate 240

COMMERCIAL/MULTI FAMILY: Type # of Employees/Units Days/Wk Occupied

DESIGNER Garry Gana, R.S. Reg# RS 3207 Phone# 281-235-4201

SITE EVALUATOR Garry Gana, R.S. Reg# OS10343 Phone# 281-235-4201

INSTALLER William Church Reg# 09902 Phone# 979-665-9058

MAINTENANCE PROVIDER Carolyn Klingerson Core Septic Reg# 1819 Phone# 979-482-8125

TREATMENT TANK(S): Table with columns Tank #, # of Compartments, Size, Manufacturer, Model. Includes entries for Aquaklear TX PreCast and Aqua Kleer TX PreCast.

DISPOSAL TYPE (check one): Standard Gravelless Leaching Chamber Low Pressure Dosing Surface Irrigation Drip Emitter
Disposal Area 840 sq ft Disposal Length 420 feet Trench Depth 6-12 inches Trench width

I certify that the above statements are true and correct to the best of my knowledge. Authorization is hereby given to the Authorized Agent to enter upon the above described property for the purpose of lot evaluation and inspection of the OSSF. I also acknowledge that inspection of the OSSF is required prior to all components being covered and use of the system.

Signature of Owner (Name on Deed) [Signature] Date 12/12/23

DEPARTMENT USE ONLY BELOW THIS LINE

APPLICATION: APPROVAL DISAPPROVAL DATE 12-27-23 INSPECTOR Jenia Bell LIC# 8227

Well Log or Plugging Reports Required? Yes No Recorded Plat Required? Yes No Flood Zone Yes No

Brazoria County Appraisal ID # 257245 ETJ Freeport Flood Plain Info: New Construction Upgrade

Legal Description: SUB Treasure Island Ab 29 Sec Block 1 Lot 8 Precinct 1

Authorization to Construct Provided to Installer: William Church - Rep Date: 12-28-23 In person Fax Mail By: MC

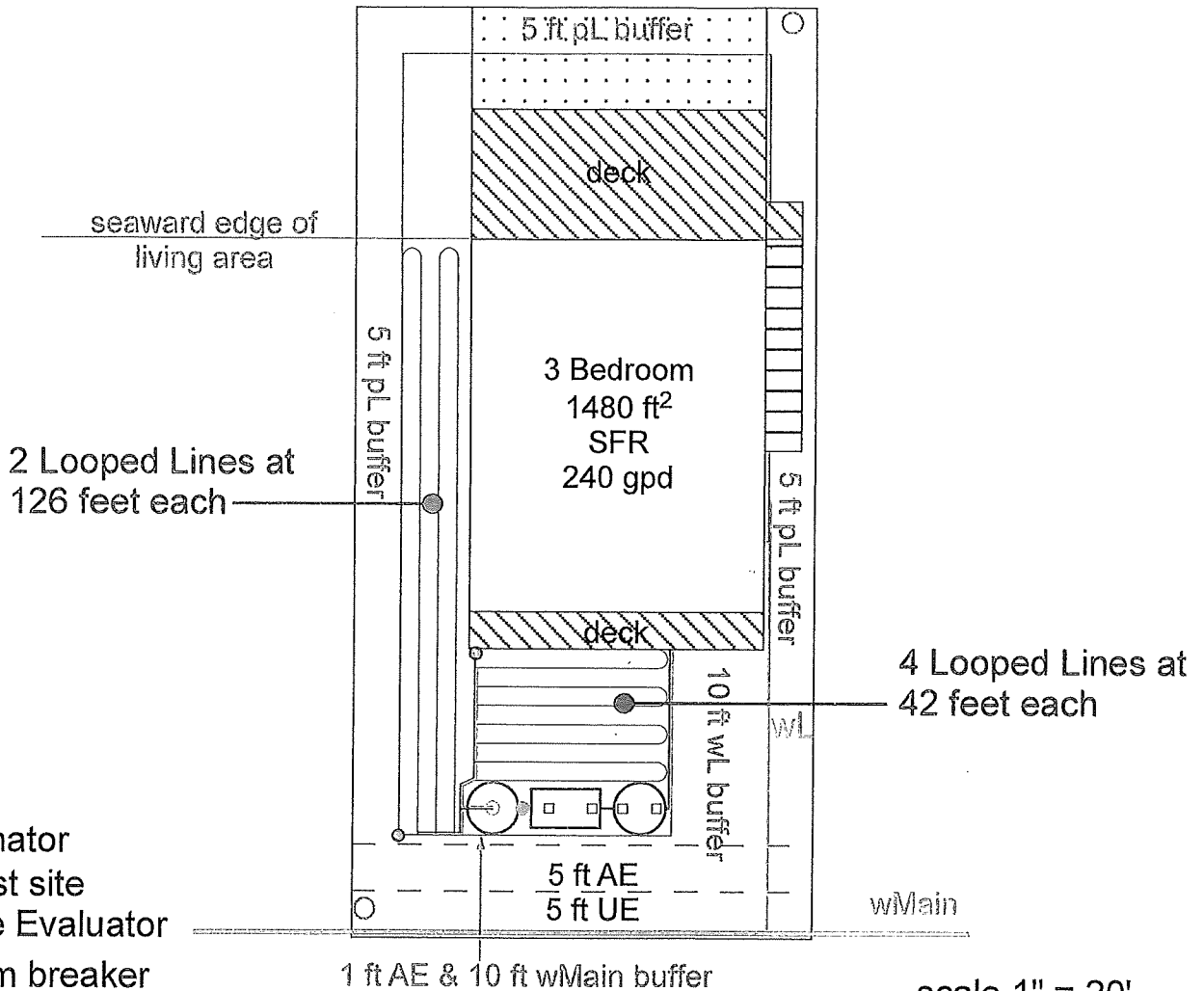
INSPECTION: APPROVAL DISAPPROVAL DATE INSPECTOR LIC#

Final Permit Copies Provided to Installer: Date: In person Fax Mail By:

Provided to Maintenance Prov: Date: In person Fax Mail By: Revised 10/10/23 jcs

811 ft to
MHW
(per survey)

13211 BUCCANEER PARKWAY

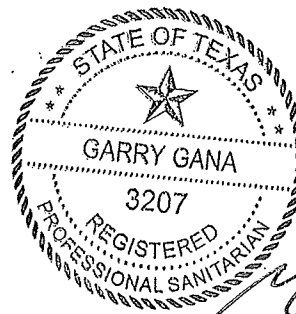


- = Chlorinator
- = soil test site by Site Evaluator
- ◉ = vacuum breaker

This property does lie within the 100 year floodplain

This property exhibits less than 4% slope across its entire area

Note:
The OSSF drainfield is to be completely sodded by the property owner prior to operation of the system



G. Gana
11-20-23

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>Jim Corsey</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>13211 Buccaneer Parkway</u>	Company NAIC Number: _____
City: <u>Freeport</u> State: <u>TX</u> ZIP Code: <u>77541</u>	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>Lot 8, Block 1 Treasure Island Subdivision, Section1 (Vol. 9, Pg. 73 B.C.P.R.), S.F. Austin Peninsular League, Abstract 29</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>Residential Pre-Construction</u>	
A5. Latitude/Longitude: Lat. <u>29°04'30.97" N</u> Long. <u>95°07'37.18" W</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: _____	
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>0.00</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.	
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
B1.a. NFIP Community Name: <u>Unincorporated Area</u>	B1.b. NFIP Community Identification Number: <u>485458</u>
B2. County Name: <u>Brazoria</u>	B3. State: <u>TX</u> B4. Map/Panel No.: <u>48039C0675</u> B5. Suffix: <u>K</u>
B6. FIRM Index Date: <u>06/05/1989</u>	B7. FIRM Panel Effective/Revised Date: <u>12/30/2020</u>
B8. Flood Zone(s): <u>VE</u>	B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>16.0'</u>
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" 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 checked="" type="checkbox"/> Yes <input 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.: <u>13211 Buccaneer Parkway</u>	FOR INSURANCE COMPANY USE
City: <u>Freeport</u> State: <u>TX</u> ZIP Code: <u>77541</u>	Policy Number: _____ 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: RTCM-REF 2521 Vertical Datum: NAVD 88

Indicate elevation datum used for the elevations in items a) through h) below.
 NGVD 1929 NAVD 1988 Other: _____

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): _____ | <input type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor (see Instructions): _____ | <input type="checkbox"/> feet <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (see Instructions): _____ | <input type="checkbox"/> feet <input type="checkbox"/> meters |
| d) Attached garage (top of slab): _____ | <input 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): _____ | <input type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest Adjacent Grade (LAG) next to building: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Finished _____ <u>2.54</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest Adjacent Grade (HAG) next to building: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Finished _____ <u>2.65</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: _____ | <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: Terry Singletary License Number: TX RPLS 4808

Title: Registered Professional Land Surveyor

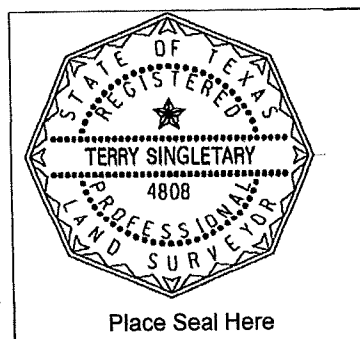
Company Name: Doyle & Wachtstetter Inc.

Address: 131 Commerce St.

City: Clute State: TX ZIP Code: 77531

Signature: Terry Singletary Date: 09/27/2023

Telephone: (979) 265-3622 Ext.: 1042 Email: t.singletary@dw-surveyor.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):
A bridge spike was set in a power pole across the street from the subject tract for bench mark at elevation 7.00 feet.

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.: 13211 Buccaneer Parkway	FOR INSURANCE COMPANY USE
City: <u>Freeport</u> State: <u>TX</u> ZIP Code: <u>77541</u>	Policy Number: _____ Company NAIC Number: _____

SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

- 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 state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.a. A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.
- G2.b. A local official completed Section H for insurance purposes.
- G3. In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.
- G4. The following information (Items G5–G11) is provided for community floodplain management purposes.
- G5. Permit Number: _____ G6. Date Permit Issued: _____
- G7. Date Certificate of Compliance/Occupancy Issued: _____
- G8. This permit has been issued for: New Construction Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum: _____
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: _____ feet meters Datum: _____
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: _____ feet meters Datum: _____
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: _____ feet meters Datum: _____
- G11. Variance issued? Yes No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. *I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.*

Local Official's Name: _____ Title: _____

NFIP Community Name: _____

Telephone: _____ Ext.: _____ Email: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):

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.: 13211 Buccaneer Parkway	FOR INSURANCE COMPANY USE
City: Freeport State: TX ZIP Code: 77541	Policy Number: _____ Company NAIC Number: _____

SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). **Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.**

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) For Building Diagrams 1A, 1B, 3, and 5–9. Top of bottom _____ feet meters above the LAG floor (include above-grade floors only for buildings with subgrade crawlspaces or enclosure floors) is:

b) For Building Diagrams 2A, 2B, 4, and 6–9. Top of next _____ feet meters above the LAG higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is:

H2. Is all Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

Yes No

SECTION I – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge.* **Note:** If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Telephone: _____ Ext.: _____ Email: _____

Comments: _____

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.: <u>13211 Buccaneer Parkway</u>	FOR INSURANCE COMPANY USE
City: <u>Freeport</u> State: <u>TX</u> ZIP Code: <u>77541</u>	Policy Number: _____ Company NAIC Number: _____

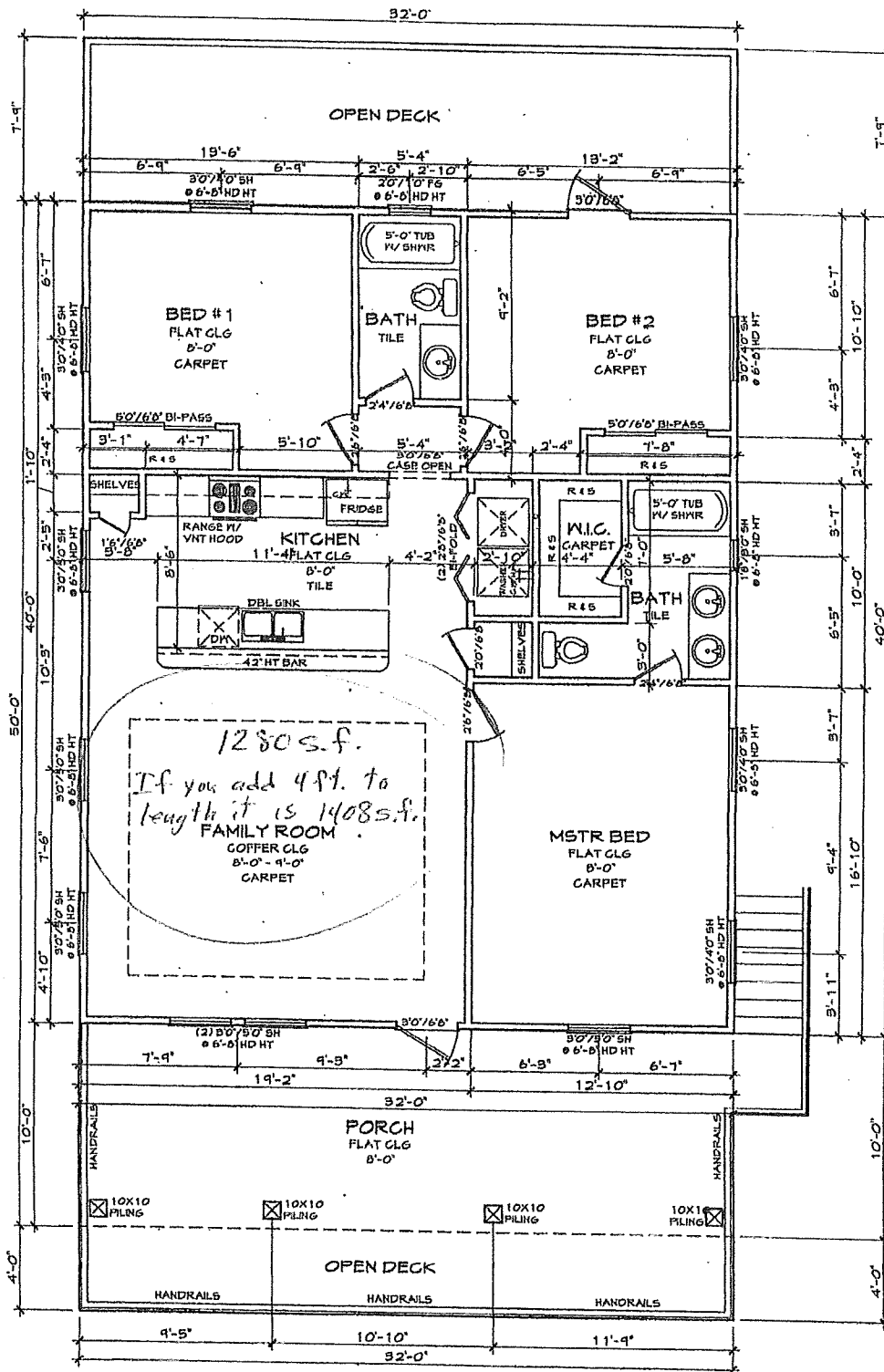
Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left 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 View	<input type="button" value="Clear Photo One"/>
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Photo Two

Photo Two Caption:	Rear View	<input type="button" value="Clear Photo Two"/>
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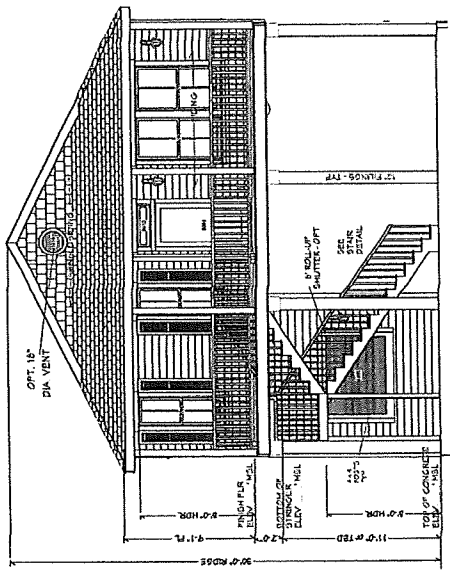
1 FLOOR PLAN

DESIGN BY:
 DATE: 05.05.2020

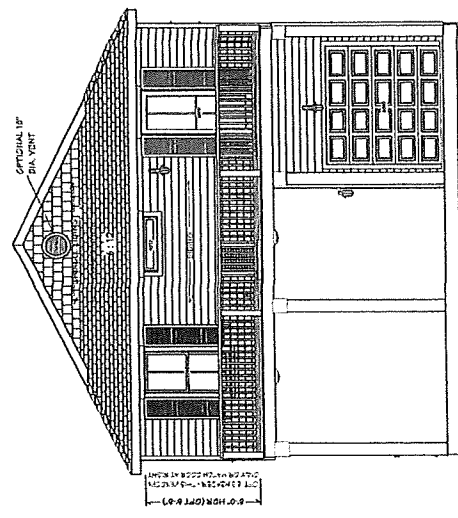
DUFUR RESIDENCE
 "PERKINS POINT" Plan
 Coronado Dr. Freeport, TX 77541
 EXTERIOR ELEVATIONS

SEASIDE HOME DESIGN, LLC
 2215 SE 28th TER.
 Cape Coral, FL 33904
 Galveston, Texas, 77554
 RR 4 Box 22503
 409-632-0381
 California@SeasideHomeDesign.com

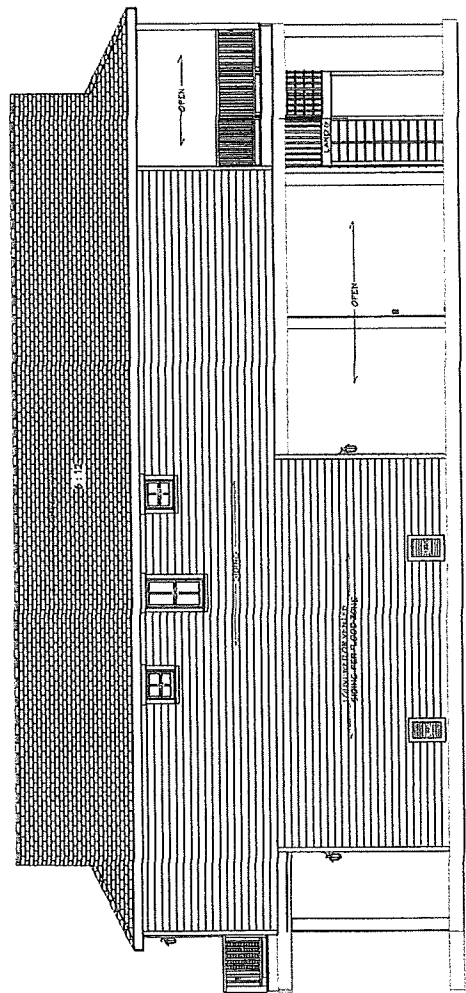
File:
 PERKINS_PT
 05052020.dwg
 Sht.
 3



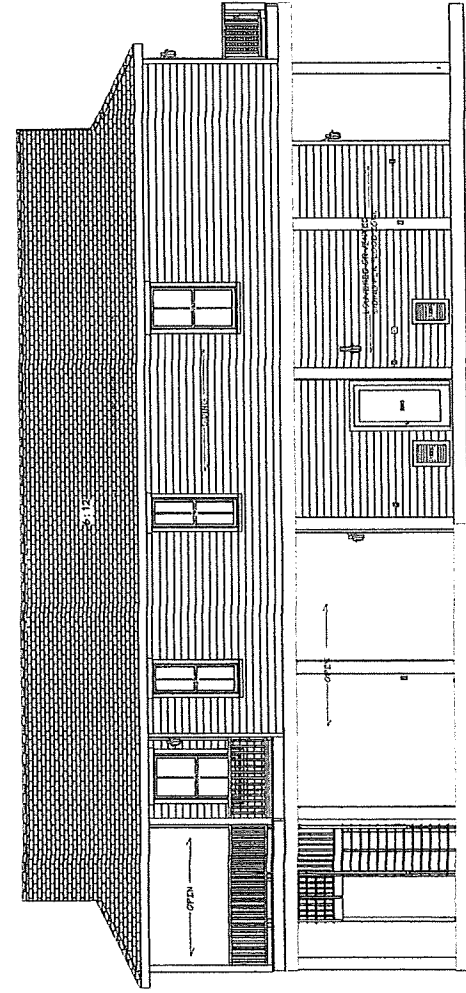
VIEW ELEVATION
 SCALE: 1/4" = 1'-0"



STREET ELEVATION
 SCALE: 1/4" = 1'-0"



LEFT SIDE ELEVATION
 SCALE: 1/4" = 1'-0"



RIGHT SIDE ELEVATION
 SCALE: 1/4" = 1'-0"

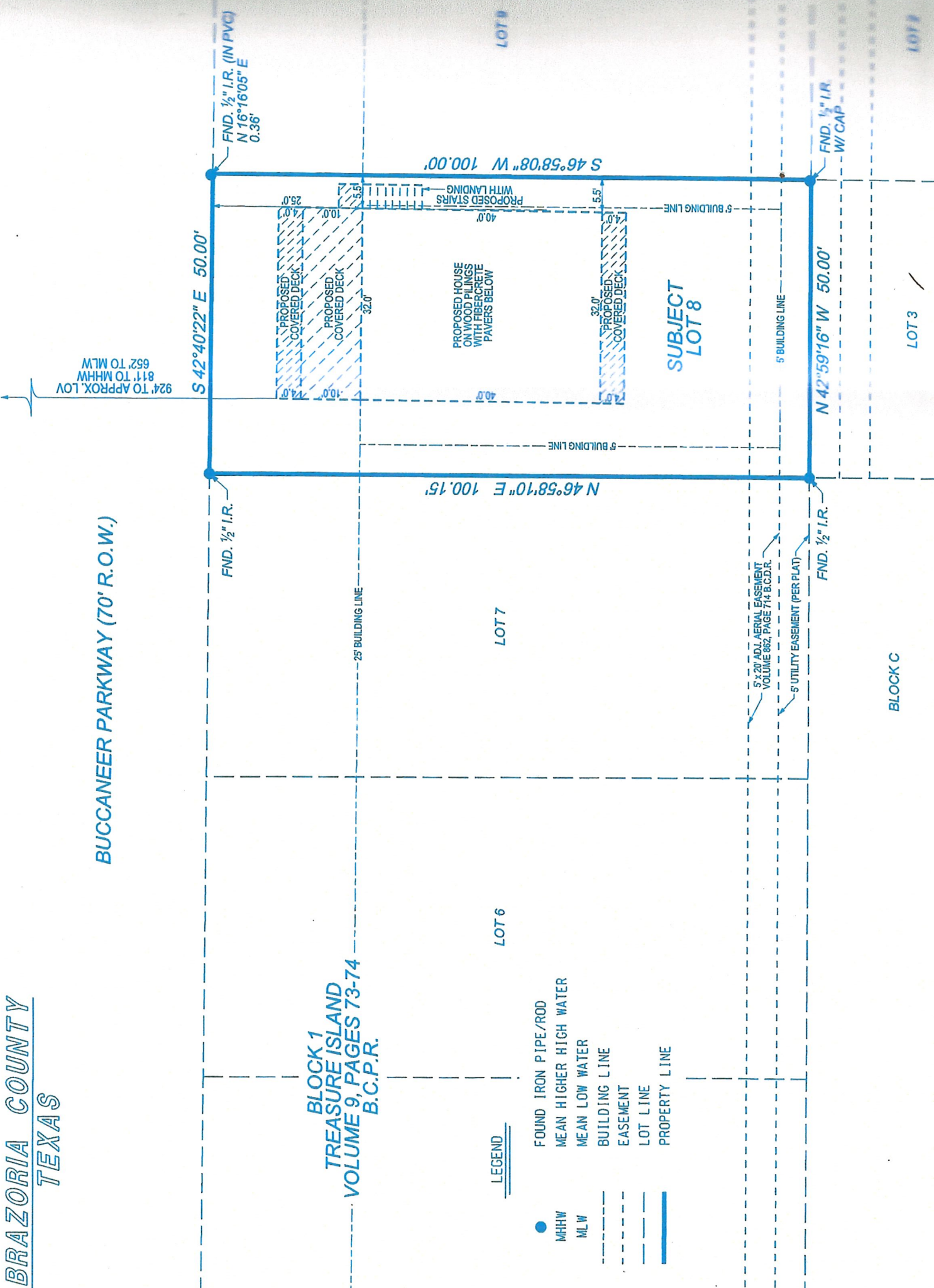
**BRAZORIA COUNTY
TEXAS**

BUCCANEER PARKWAY (70' R.O.W.)

**BLOCK 1
TREASURE ISLAND
VOLUME 9, PAGES 73-74
B.C.P.R.**

LEGEND

- FOUND IRON PIPE/ROD
- MHHW
- MLW
- BUILDING LINE
- EASEMENT
- LOT LINE
- PROPERTY LINE



BLOCK C

LOT 3

LOT 9







FOR SALE

NEXT

Reboerah Mcquire
281.772.6920



BRAZORIA COUNTY

**NOTICE OF RESIDENTIAL CONSTRUCTION
INSPECTION COMPLIANCE
IN UNINCORPORATED AREA**

(TO BE SUBMITTED BY BUILDER)

Received _____

Related OSSF
Application # _____

Permit # _____

IRC # _____

BUILDERS NAME: Smartest Construction

PROJECT INFORMATION

TYPE OF CONSTRUCTION: (Check One)

- 1) New Residential Construction on a vacant lot
- 2) Addition to an Existing Residential Unit

NOTE: *If a property lies in an ETJ it is required to contact the city hall for appropriate building codes.*

LOCATION:

Address 13122 Buccaneer

Lot and Block # 8 1 Subdivision TEASDALE ISLAND

or Survey _____ Tract/Acreage _____

or Deed Reference _____ Property ID (MCAD)# _____

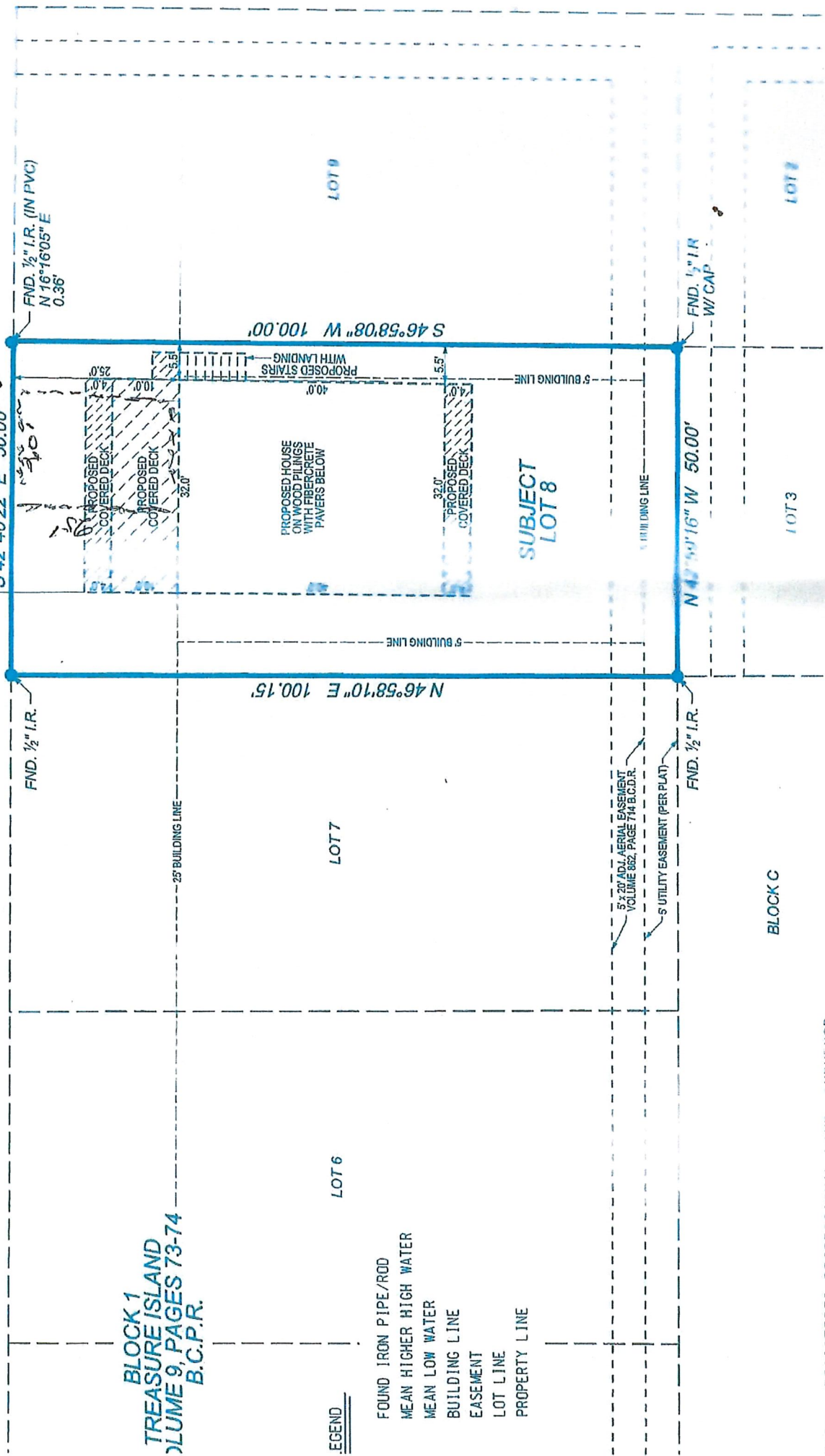
RESIDENTIAL CODE USED IN CONSTRUCTION:

- 1) INTERNATIONAL RESIDENTIAL CODE – published 12 2 2012

date

BUCCANEER PARKWAY (70' R.O.W.)

**BLOCK 1
TREASURE ISLAND
VOLUME 9, PAGES 73-74
B.C.P.R.**



DOTED LINES DATE 11/25/17

- LEGEND**
- FOUND IRON PIPE/ROD
 - MEAN HICHER HIGH WATER
 - MEAN LOW WATER
 - BUILDING LINE
 - EASEMENT
 - LOT LINE
 - PROPERTY LINE

TARY, REGISTERED PROFESSIONAL LAND SURVEYOR
FY THAT THE ABOVE PLAT IS A TRUE REPRESENTATION OF A
ER MY SUPERVISION, ON THE GROUND, AND THAT THERE ARE
INTRUSIONS ON THIS PROPERTY, EXCEPT AS SHOWN.

NOTES: