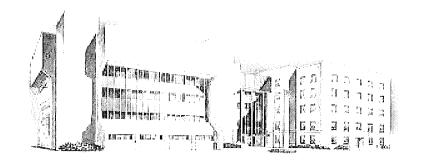
JOE K. RIPPLE
FLOODPLAIN ADMINISTRATOR, CFM
SOFIA GARCIA GIBSON
FLOODPLAIN / BUILDING PERMITS
OFFICE ASSISTANT SR.
BELINDA HOWELL
FLOODPLAIN / BUILDING PERMITS
PERMIT TECHNICIAN
VICKIE THOMAS
FLOODPLAIN/BUILDING PERMITS
FLOODPLAIN/BUILDING PERMITS
FLOODPLAIN CONSULTANT



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

BRAZORIA COUNTY

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

January 5, 2024

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 5034 Bluewater Hwy. (CR 257) Freeport, TX

Dear Ms. Valdes,

This application is for a residential structure with 5429 Square feet of living area with (6) bedrooms and (6) baths (3 half) 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.

Joe K. Ripple

Since

loodplain Department

Enclosures

BRAZORIA COUNTY BUILDING PERMIT APPLICATION

Angleton 979-864-1295

451 North Velasco, Suite 210, Angleton, TX 77515

Houston/Alvin 281-756-1295

OWNER	SHIP INFORMA	1.4	Τ	T . 1	111	V		000 1	01 1	2070
Name:	Smart	Home.	Three		LL		Phone:	832-6	71-	18.18
Current/	Mailing Address	Street or P		ants L	ake B	Jud#	City/Stat		Zip-Co	Tx 77479
Building Co	ntractors Informa	tome	5 61	C	Asldr.	ess Ri	polinaSt	ream	Phon	52,770,1018
LOCATIO	N OF CONSTRU	CTION:		. 0.2	P.	hmon	do TX	17407		
							Structure	Will Be Pla	iced o	r Constructed)
Subdivision:	Seahorse	Estate	es s	treet Addre	ess:503	,4 Blu	rewater	Hwy City (r	equired): Freeport
Se	ection:	Block		Lot			ract No.:	Acreage	:	PID #:
	NIA I					29			Peninsul	ar 575547
Check .	TYPE OF IMPROVEMENT Check Appropriate PROPOSED USE Fill Out and Check Any That Apply to Your			Check	OWNERSHIP TYPE OF SUPP		OF WATER JPPLY propriate Box	100A	TYPE OF SEWAGE DISPOSAL Check Appropriate Box(es)	
New Building Addition to Building Manufactured Home Residential Number of Bedrooms: Number of Bathrooms:			_ Cor	vate (Individ rp, Non-Problic (Federa	līt)	Compan Individu	any dual (Water		Public/Private Company Individual (Septic)	
Resident	Mobile Home Full Partial Setc Well Residential RV Multi Family Cost: \$ 600 000 Levee Construction # of Units:			Hea	y of Environmental Ith Permit attached:					
Relocate Came Count	ed Building - from Outside	# of Units. Non-Res Commerce Other: (Ty	idential	(inclu	or Area Sq. Ft. luding garage): 440 sq. ft.			,	#: <u>2</u>	23-690
r square foot plication for p herwise speci LL COMME mergency Man quired to cont	for Inspection fees property of less that fied. MAKE Cland RCIAL BUILDIN nagement Coordinat act Pearland City I	will be chargen ten (10) acr HECKS P. NGS will requestor. Special states.	ged. A natures shall obt AYABLE uire approva flood hazar ry Accordi	ral ground elegain an Environ TR TO: "TR als from the lead areas required To Type	evation certionmental Pe REASURI ocal Drainaguire additio of Business	ficate and rmit appro ER OF I ge District nal docur	I copy of floo oval before a BRAZORI , Environmer ments. All co	r plan are also re County building A COUNTY Ital Health and a mmercial constru	quired for permit we will will will will will will be seen to be s	e permit by the County Pearland's ETJ is
	ion located on a p	reposed Cou	nty and/or	Municipal T	horoughfa	re in Pear		1 11 1	ntact Pe	arland City Hall
Signa	ture:	SOLVE	- ()Y	7			Date	1/9/	27	
				DØ NOT WI	10000 000		1000			Permit
Approved	By:	Highest Nat Certified By		A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Permit Fee	11	rspection Fee	Date Of Pern	nit	Number
Vuh	i Shomen	RPLS# 48	San Carlotte Control of the Control	10/13/43	s 75	s á	17.36			
Electric	Mailbox Ltr	Setback Ltr	Thora	oughfare	Total Fee	s 29	2.16	Check #		Receipt No.
CR	Yes	45'	ma	or				375		19049
ETJ	Inspection Ltr	Ack Ltr		le Home mation	FEMA Ze		 MSL	Panel No.:		Class
No	Yes	No	1	la		80 III = 200 III 1		Map Date:	2	В
Special	Provisions:	Tento In comme	_	+0	医乳腺性	(and provide			
Mail L	Email To:_	rober	ISM	art w	MVV	aho	D. COM	1		_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	00019049	Receipt Date	1/5/2024	Receipt Time	08:22:29 AM	
		-	N	NO REFUND(S)		
Received Fron	n: Smart Home	Investment L.L.C.				

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:SQFTGSquare FootageHUD / County Exempt:NMisc. Descr:Qty:1 Price:\$0.04

Permit No:

Square Footage:

0 Amount Sq. Ft

\$0.00

Contractor:

Owner:

Amount Owed:

\$217.16

Comments:

5034 Bluewater Hwy Freeport CK # 375

Payment Information

Payment Type: CHK Check#/MO#: 375 Pay Amount: \$292.16

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

Office Use Only Posted: N Total Amount Received: \$292.16

Rec. By: 14554

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

C	U.	TT	JT	V	OF	BR	47.	OD.	rA
_	v	\mathbf{v}	у л	0.00	111	DIM	1		

CO	UNII OF BRAZORIA							
thro	undersigned holder of DevelopmentPermit No							
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 pu 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

Revised 10/10/23 jcs

BRAZORIA COUNTY ENVIRONMENTAL HEALTH DEPT

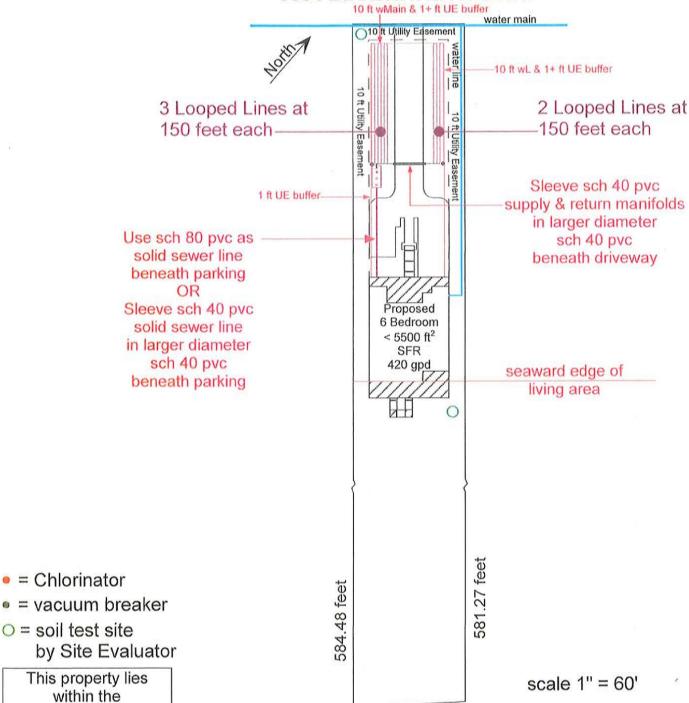
111 East Locust Bldg A-29, Suite 270 ANGLETON, TX 77515

HOUSTON (281)756-1600 ANGLETON (979)864-1600 CLUTE (979)388-1600 \$250 Single Family □ \$450 All Others WIRONMENTAL application will expire one year from the application date if inspection New □ Replacement not complete. No refunds once permit is issued. HEALTH DEPT. Attach Copy of Legal Description (i.e. Deed, Plat, Survey, Appraisal) □ Alteration Type

Permit Number

PROPERTY OWNER Smart Home Investment, LLC		BCEHD	USE ONLY
(NAME ON DEED) (LAST)	(FIRST)	(INT)	
PHONE NUMBERS 832-691-7878	EMAIL_ robertsm	art@myyahoo.com	
MAILING ADDRESS 3130 Grants Lake Blvd,. Ste 16533, Sugar	Land, Texas 77479-1255		
SITE ADDRESS 5034 Bluewater Hwy, Freeport, Texas 77541		Acres0.93	20.70
WATER SOURCE ☐ Private ☑ Public Seahorse Estates		(Name) Water Saving Devices	s: Yes ⊠ No □
SINGLE FAMILY RESIDENCE: # of Bedrooms 6 Living	Area(Sq Ft) < 5500	Daily Wastewater Usage Rate	,420
COMMERCIAL/MULTI FAMILY: Type# of	Employees/Units	Days/Wk Occupied	
DESIGNER Garry Gana, R.S.	Reg#_ RS 3207	Phone#_281-23	35-4201
SITE EVALUATOR Garry Gana, R.S.	Reg#_OS10343	Phone#_281-2	35-4201
INSTALLER Joshua Bigole	Reg# 32415	No. and the second second	- 215-0863
MAINTENANCE PROVIDER JOSHUA RIPPLE	Reg# 2064	Phone# 979-	215-0863
TREATMENT TANK(S): Tank # of Compartments Size Ma #1 4 600 No #2 #3 #4	nufacturer uWater	Model B-550	
DISPOSAL TYPE (check one):	1/1	3-11	
	ow Pressure Dosing	Surface Irrigation 💢 Drip	p Emitter
Disposal Area 1500 sq ft Disposal Length 750	In ftTrench Depth	10 - 12 in. Trench width	
I certify that the above statements are true and correct to the best of upon the above described property for the purpose of lot evaluation a required prior to all components being covered and use of the system Signature of Owner (Name on Deed)	and Inspection of the OSSF. I a	hereby given to the Authorizes acknowledge that inspection	ed Agent to enter on of the OSSF is
	ONLY BELOW THIS LINE	71	44033966
APPLICATION: ☐ APPROVAL☐ DISAPPROVAL DATE 12-29-2023 Well Log or Plugging Reports Required? ☐ Yes ☐ No Recorded	INSPECTOR fear Ula d Plat Required? □Yes □No	7	
	1/2	/	
Brazoria County Appraisal ID # 575547 ETJ /	- California	d Plain Info: 🗹 New Construct	1
Legal Description: SUB Scahorse Estates Ab A00 29 Se	ecBlock	Lot Pre	cinct
Authorization to Construct Provided to Installer: Date	e: 2.29-23	ı 🗆 Fax Mail By: M	0
INSPECTION: APPROVAL DISAPPROVAL DATEINSP	ECTOR	Lic	C#
Final Permit Copies Provided to Installer:	_ Date:	person 🗌 Fax 🗎 Mail By	
Provided to Maintenance Prov	Date: □ In	person ☐ Fax ☐ Mail By	ı:

5034 BLUEWATER HIGWAY



Note:

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

100 year floodplain

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



12-20-23

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: Angelica Smart	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 5034 Blue Water Highway	Company NAIC Number:
City: Freeport State: TX	ZIP Code: 77541
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Nul Lot 5, Seahorse Estates (06-048912 B.C.O.R.), S.F. Austin Peninsular League, Abstract	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): Residential	
A5. Latitude/Longitude: Lat. 28°59'57.57" Long. 95°13'35.53" Horizontal Datum:	NAD 1927 ⊠ NAD 1983 □ WGS 84
A6. Attach at least two and when possible four clear photographs (one for each side) of the buildin	g (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): sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area?	?
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 food Non-engineered flood openings: Engineered flood openings:	
d) Total net open area of non-engineered flood openings in A8.c: sq. in.	
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructi	ons): sq. ft.
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): sq. ft.	
A9. For a building with an attached garage:	
a) Square footage of attached garage: sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage	? Yes No N/A
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adj Non-engineered flood openings: Engineered flood openings:	
d) Total net open area of non-engineered flood openings in A9.c:sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructi	ions): sq. ft.
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): sq. ft.	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFO	RMATION
B1.a. NFIP Community Name: Brazoria County Unincorporated B1.b. NFIP Community Ide	entification Number: 485458
B2. County Name: Brazoria B3. State: TX B4. Map/Panel No.:	48039C0675 B5. Suffix: K
B6. FIRM Index Date: 05/04/1992 B7. FIRM Panel Effective/Revised Date: 12/30/20	020
B8. Flood Zone(s): AE B9. Base Flood Elevation(s) (BFE) (Zone AO, use	Base Flood Depth):14'
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9:	
B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Othe	r/Source:
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Pro Designation Date: 10/01/1983 ☐ CBRS ☐ OPA	tected Area (OPA)? 🛚 Yes 🔲 No
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? 🛛 Yes 🗌] No

Building Street Address (including Apt., Unit, Suite, a 5034 Blue Water Highway	and/or Bldg. No.)	or P.O. Route	and Box N	o.: FOR	INSURANCE COMPANY USE	
City: Freeport	Policy Number:					
SECTION C - BUILDI	NG ELEVATIO	ON INFORM	ATION (S			
C1. Building elevations are based on: Const *A new Elevation Certificate will be required v					Finished Construction	
C2. Elevations – Zones A1–A30, AE, AH, AO, A (A99. Complete Items C2.a–h below according Benchmark Utilized: RTCM-REF 2521			cified in Iter	m A7. In Puerto		
Indicate elevation datum used for the elevations ir ☐ NGVD 1929 ☑ NAVD 1988 ☐ Other:		h h) below.				
Datum used for building elevations must be the salf Yes, describe the source of the conversion factor				n factor used?	☐ Yes ☒ No Check the measurement used:	
a) Top of bottom floor (including basement, o	rawlspace, or er	nclosure floor)):		☐ feet ☐ meters	
b) Top of the next higher floor (see Instructio	ns):				☐ feet ☐ meters	
c) Bottom of the lowest horizontal structural r	nember (see Ins	tructions):	_		feet meters	
d) Attached garage (top of slab):			_		☐ feet ☐ meters	
 e) Lowest elevation of Machinery and Equipr (describe type of M&E and location in Sec 			ling 		☐ feet ☐ meters	
f) Lowest Adjacent Grade (LAG) next to buil	ding: 🔀 Natur	al 🔲 Finish	ed _	5.40		
g) Highest Adjacent Grade (HAG) next to bu	lding: 🔲 Natur	al 🗌 Finish	ed _	5.50		
 h) Finished LAG at lowest elevation of attach support: 	ed deck or stair	s, including st	ructural _		☐ feet ☐ meters	
SECTION D - SURV	EYOR, ENGIN	IEER, OR A	RCHITEC	T CERTIFICA	TION	
This certification is to be signed and sealed by a lainformation. I certify that the information on this Calse statement may be punishable by fine or implement the control of the certification.	ertificate represe	ents my best e	efforts to int	erpret the data		
 Were latitude and longitude in Section A provided	by a licensed la	nd surveyor?	⊠ Yes	∏No		
Check here if attachments and describe in the						
Certifier's Name: Terry Singletary		ense Number:	4808			
Title: Registered Professional Land Surveyo		•			OF TE OF	
Company Name: Doyle & Wachtstetter Inc.					Sur at A Control	
Address: 131 Commerce St.				(TERRY SINGLETARY	
City: Clute	State:	TX ZIP	Code: 775	531	4808	
Signature: Teny Singlitary			 ate: 10/13/	2023	SURVE	
	email: t.sing				Place Seal Here	
Copy all pages of this Elevation Certificate and all a					ompany, and (3) building owner.	
Comments (including source of conversion factor TBM= Set PK nail in Bluewater Highway. TBM = 5.92 Feet.						

Building Street Address (including Apt., Unit	, Suite, and/or Bldg. No.)	or P.O. Route and Bo	ox No.:	FOR INSURANCE COMPANY USE
5034 Blue Water Highway	OL / TV	71D O. J. 77E4		Policy Number:
City: Freeport	State: TX	ZIP Code: <u>7754</u>	1	Company NAIC Number:
	DING MEASUREMEI DNE AO, ZONE AR/A			
For Zones AO, AR/AO, and A (without BF intended to support a Letter of Map Changenter meters.				
Building measurements are based on: *A new Elevation Certificate will be require				on*
E1. Provide measurements (C.2.a in appl measurement is above or below the r			d check the a	ppropriate boxes to show whether the
 a) Top of bottom floor (including base crawlspace, or enclosure) is: 	ement,	feet	meters	above or below the HAG.
 b) Top of bottom floor (including base crawlspace, or enclosure) is: 	ement, 		meters	above or below the LAG.
E2. For Building Diagrams 6–9 with perm next higher floor (C2.b in applicable	anent flood openings pr	ovided in Section A I	tems 8 and/o	r 9 (see pages 1–2 of Instructions), the
Building Diagram) 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 e servicing the building is:	equipment	feet	meters	above or below the HAG.
E5. Zone AO only: If no flood depth numb floodplain management ordinance?				ccordance with the community's ust certify this information in Section G.
SECTION F - PROPERTY C	WNER (OR OWNER	'S AUTHORIZED	REPRESEN	ITATIVE) CERTIFICATION
The property owner or owner's authorized sign here. The statements in Sections A, I				one A (without BFE) or Zone AO must
Check here if attachments and descrit		-		
Property Owner or Owner's Authorized Re	epresentative Name:			
Address:				
City:			State:	ZIP Code:
Ciamatura		Data		
Signature: Telephone: Ex	t.: Email:	Date		
Comments:	Lillali.			
Comments.				

	Street Address (including Apt., Unit, Suite, and/or Bldg. No.)	or P.O. Route	and Box No.:	FOR INSU	JRANCE COMPANY USE				
	ue Water Highway eeport State: TX	7ID 0 - 4 - 1	77511	Policy Num	nber:				
City: Fre	City: Freeport State: TX ZIP Code: 77541 Company NAIC Number:								
S	ECTION G - COMMUNITY INFORMATION (RECO	MMENDED	FOR COMMUNIT	TY OFFICIA	L COMPLETION)				
	l official who is authorized by law or ordinance to adminis A, B, C, E, G, or H of this Elevation Certificate. Complete				dinance can complete				
G1. [The information in Section C was taken from other does engineer, or architect who is authorized by state law to elevation data in the Comments area below.)	cumentation th certify elevat	at has been signed ion information. (Ind	I and sealed I dicate the sou	by a licensed surveyor, arce and date of the				
G2.a.	A local official completed Section E for a building local E5 is completed for a building located in Zone AO.	ted in Zone A	(without a BFE), Zo	ne AO, or Zo	ne AR/AO, or when item				
G2.b.	☐ A local official completed Section H for insurance purp	oses.							
G3. [\square In the Comments area of Section G, the local official c	lescribes spec	ific corrections to th	ne information	in Sections A, B, E and H.				
G4.	☐ The following information (Items G5–G11) is provided	for community	/ floodplain manage	ement purpos	es.				
G5. P	Permit Number: G6. Date	Permit Issued	·						
G7. C	Date Certificate of Compliance/Occupancy Issued:								
G8. T	This permit has been issued for:	Substantial	I Improvement						
G9.a. E	Elevation of as-built lowest floor (including basement) of the building:	ne 	feet	meters	Datum:				
1	Elevation of bottom of as-built lowest horizontal structural nember:	***************************************	[feet	meters	Datum:				
G10.a. E	BFE (or depth in Zone AO) of flooding at the building site:		feet	meters	Datum:				
re	Community's minimum elevation (or depth in Zone AO) equirement for the lowest floor or lowest horizontal struct nember:	ural	☐ feet	☐ meters	Datum:				
G11. V	√ariance issued? ☐ Yes ☐ No If yes, attach docu	mentation and	describe in the Co	mments area					
The loca	al official who provides information in Section G must sign to the best of my knowledge. If applicable, I have also pro	here. I have d	completed the inforr	mation in Sec	tion G and certify that it is				
Local Of	fficial's Name:	T	itle:						
	ommunity Name:								
Telepho									
Address	·								
l .				ZIP C	ode:				
Signatur	re:	Da	ate:						
	nts (including type of equipment and location, per C2.e; d s A, B, D, E, or H):	escription of a	ny attachments; an	d corrections	to specific information in				

Building Street Address (including Apt., Unit, Su	FOR INSURANCE COMPANY USE		
5034 Blue Water Highway	Policy Number:		
City: Freeport	State: TX Z	IP Code: 7/541	Company NAIC Number:
		HEIGHT INFORMATION INSURANCE PURPOSE	
The property owner, owner's authorized repre to determine the building's first floor height for nearest tenth of a foot (nearest tenth of a meter Instructions) and the appropriate Building	insurance purposes. Se er in Puerto Rico). Refer e	ctions A, B, and I must also ence the Foundation Type	be completed. Enter heights to the e Diagrams (at the end of Section H
H1. Provide the height of the top of the floor (as indicated in Foundatio	on Type Diagrams) above t	ne Lowest Adjacent Grade (LAG):
a) For Building Diagrams 1A, 1B, 3, ar floor (include above-grade floors only for subgrade crawlspaces or enclosure floors.	buildings with	[feet	meters above the LAG
 b) For Building Diagrams 2A, 2B, 4, ar higher floor (i.e., the floor above basement enclosure floor) is: 		feet	meters above the LAG
H2. Is all Machinery and Equipment servicing H2 arrow (shown in the Foundation Type			
SECTION I - PROPERTY OWN	NER (OR OWNER'S A	UTHORIZED REPRESE	NTATIVE) CERTIFICATION
The property owner or owner's authorized rep A, B, and H are correct to the best of my know indicate in Item G2.b and sign Section G.			
☐ Check here if attachments are provided (ir	ncluding required photos)	and describe each attachn	nent in the Comments area.
Property Owner or Owner's Authorized Repre	esentative Name:	,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Address:			
City:		State:	ZIP Code:
Signaturo		Date:	
Signature:		Date:	
Telephone: Ext.:	Email:	Date:	
		Date:	
Telephone: Ext.:		Date:	

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

BUILDING PHOTOGRAPHS

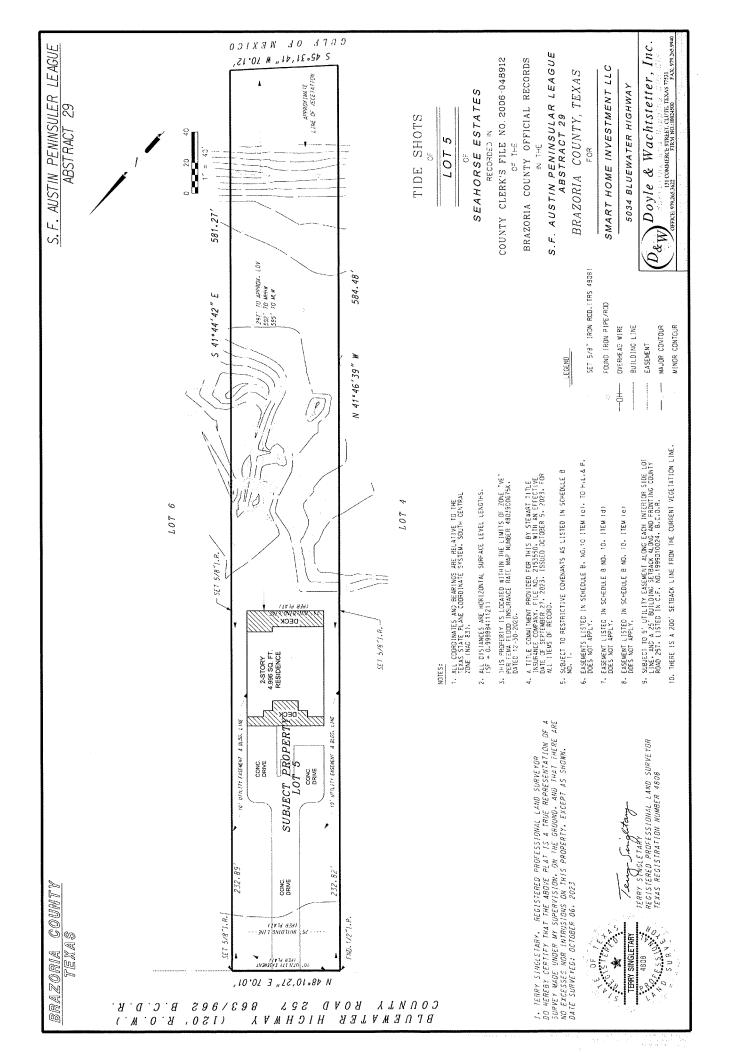
See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, a	and/or Bld	g. No.) c	or P.O. Route	and Box No.:	FOR INSURANC	E COMPANY USE
5034 Blue Water Highway		TV	71001	77544	Policy Number: _	
City: Freeport	State:	TX	_ ZIP Code:	77541	Company NAIC N	lumber:
Instructions: Insert below at least two and when pable to take front and back pictures of townhouse: "Right Side View," or "Left Side View." Photograph close-up photograph of representative flood openi	s/rowhous ns must sl	es). Ide now the	entify all photo foundation.	ographs with the dat When flood opening	te taken and "Front	View," "Rear View,"
		Ph	oto One		uu	
Photo One Caption:						Clear Photo One
		Ph	oto Two	***************************************		
Photo Two Caption:						Clear Photo Two

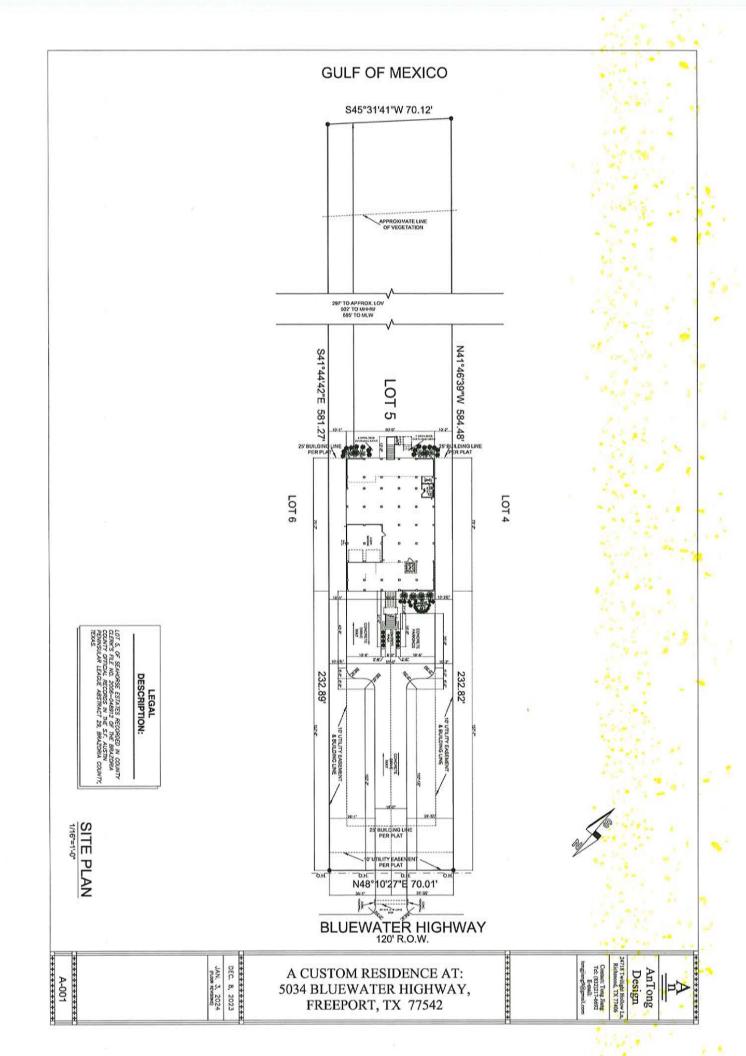
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 **BUILDING PHOTOGRAPHS**

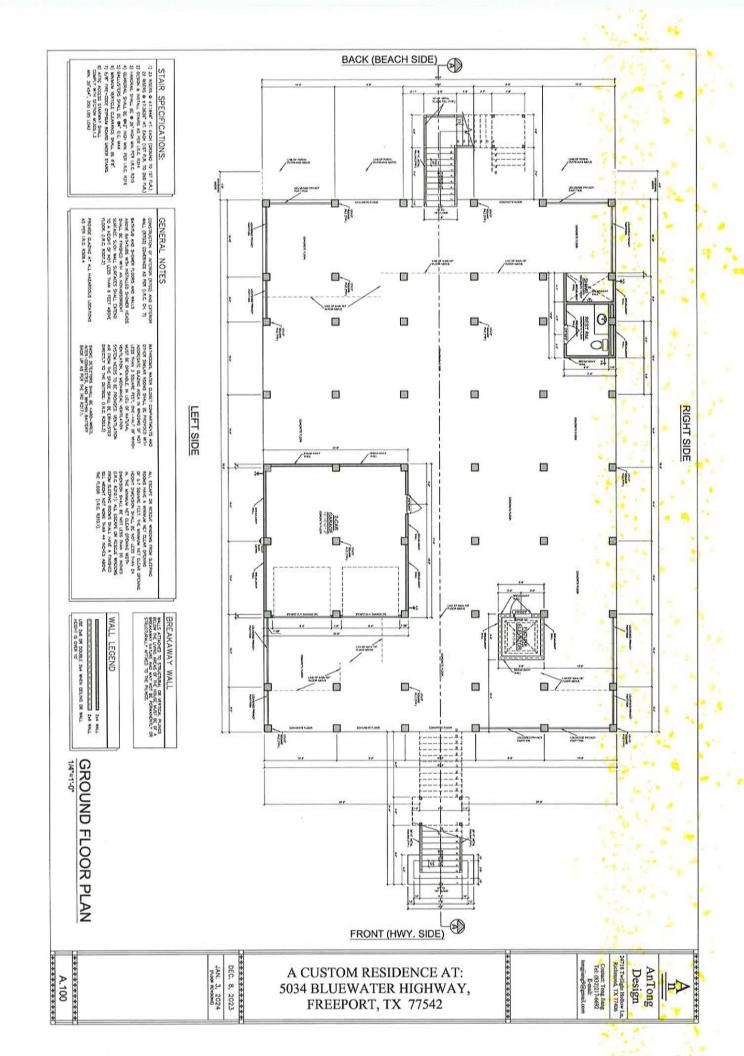
Continuation Page

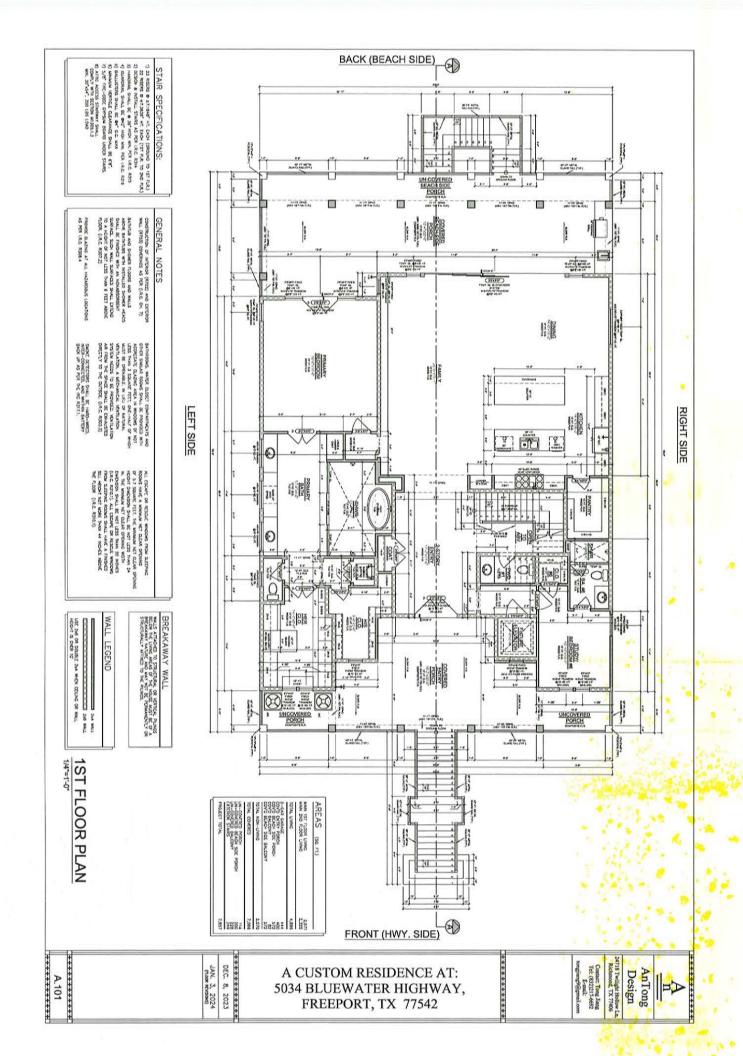
Building Street Address (including Apt., Unit, Suite,	and/or Bldg	g. No.) o	or P.O. Route and Box No.:	FOR INSURAN	CE COMPANY USE
5034 Blue Water Highway	Ctata	TX	7ID Code: 77541	Policy Number: _	
City: Freeport	_ State:	1/	_ ZIP Code: <u>77541</u>	Company NAIC I	Number:
Insert the third and fourth photographs below. Ide View," or "Left Side View." When flood openings vents, as indicated in Sections A8 and A9.					
		Pho	to Three		
Photo Three Caption:					Clear Photo Three
	·				
		Pho	oto Four		
Di 4 E - Outline					
Photo Four Caption:					Clear Photo Four

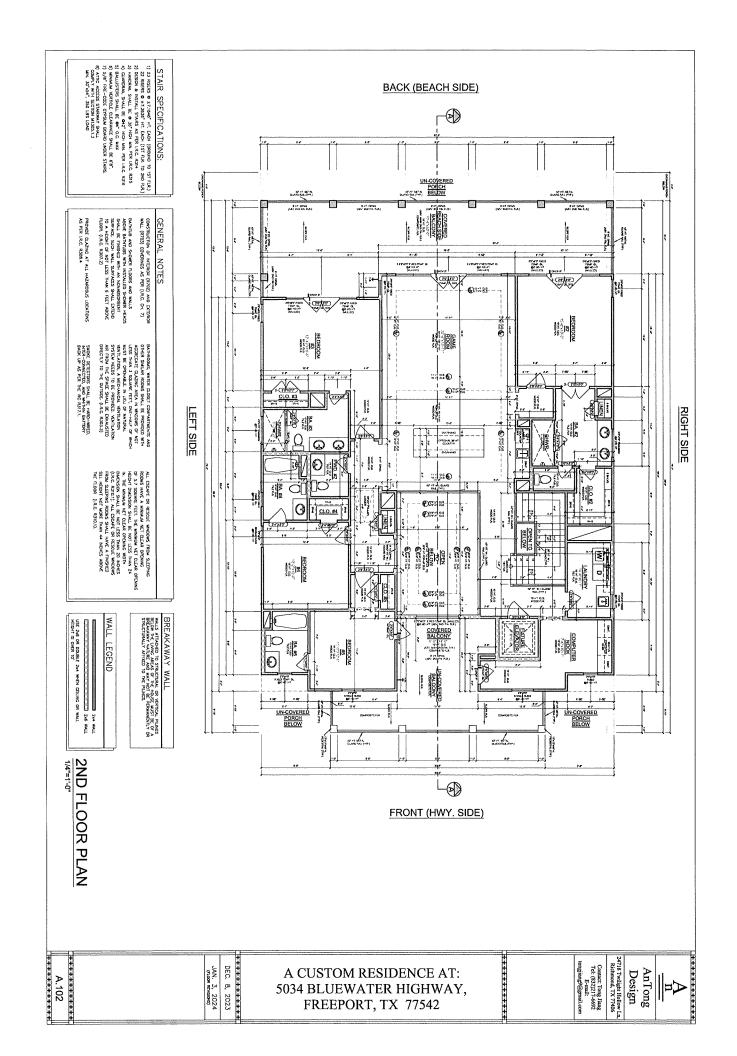


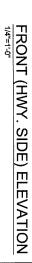


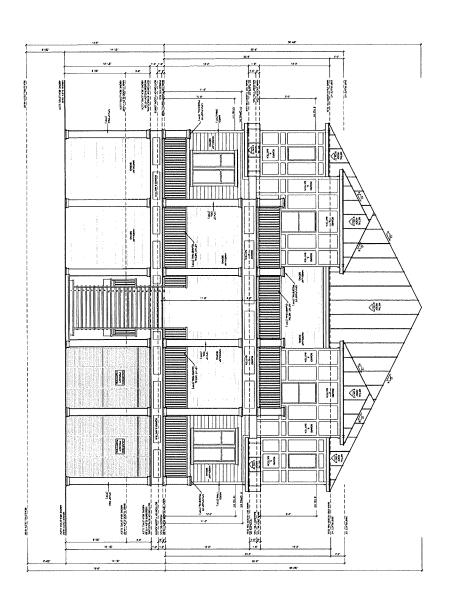










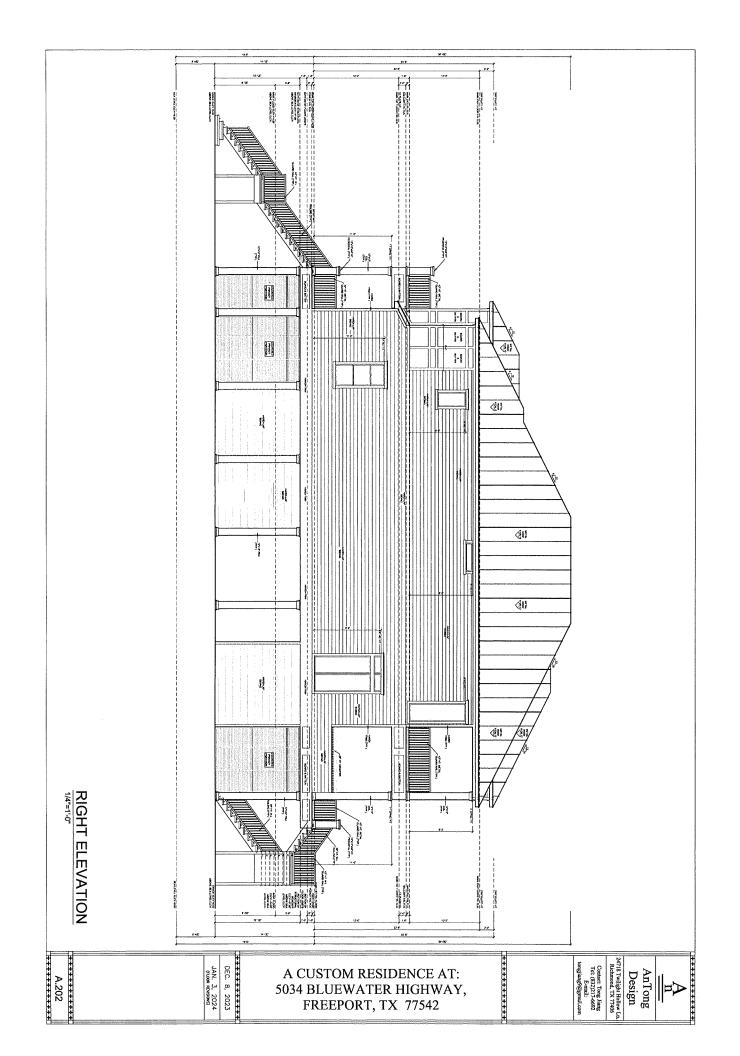


A CUSTOM RESIDENCE AT: 5034 BLUEWATER HIGHWAY, FREEPORT, TX 77542

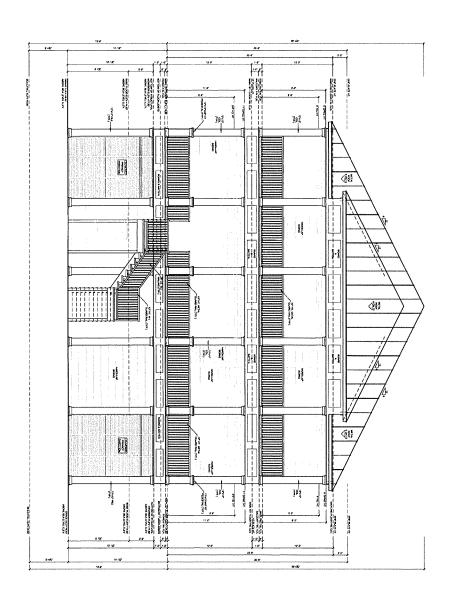
DEC. 8, 2023
JAN. 3, 2024
(ruson revisions)

AnTong
Design

2/18 Twilght Hollow Ln.
Richmond, TX 77406
Connect Trong Jiang
Tel: (832)217-6992
E-mail:
torgjiang@@gmail.com







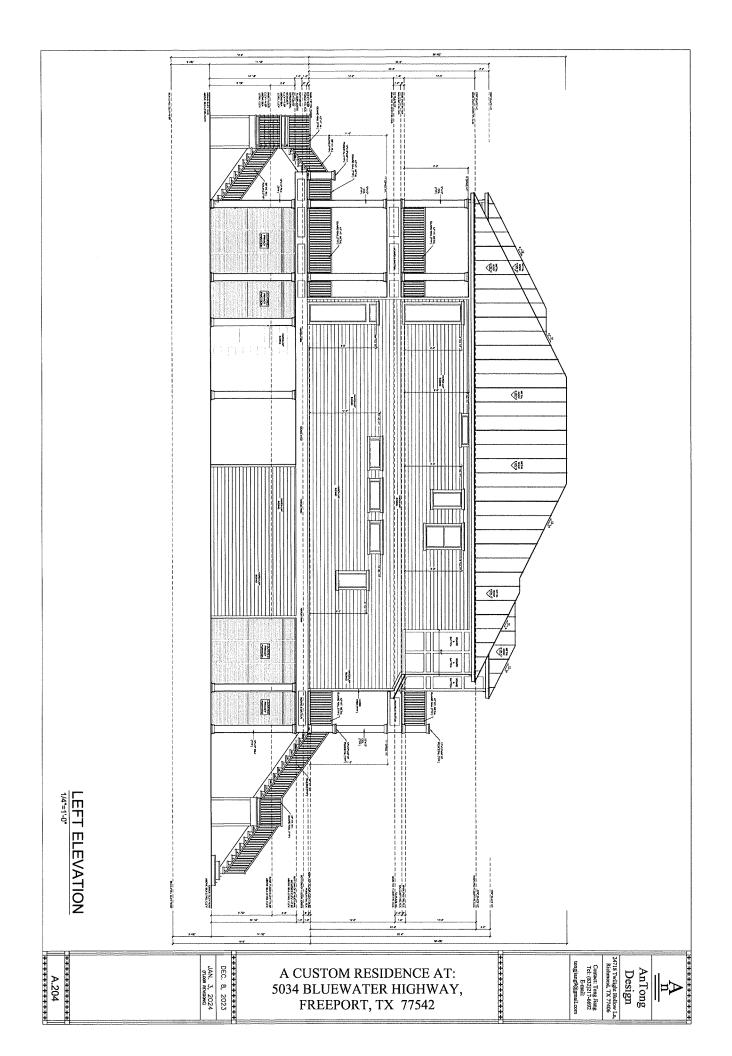
A CUSTOM RESIDENCE AT: 5034 BLUEWATER HIGHWAY, FREEPORT, TX 77542

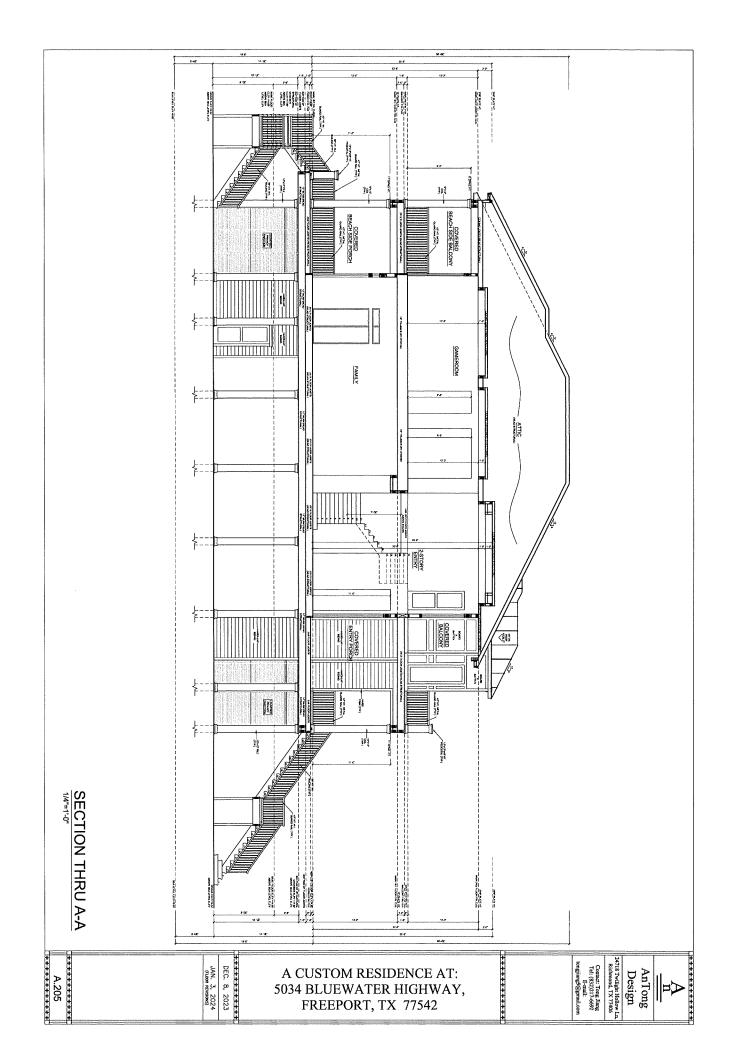
DEC. 8, 2023

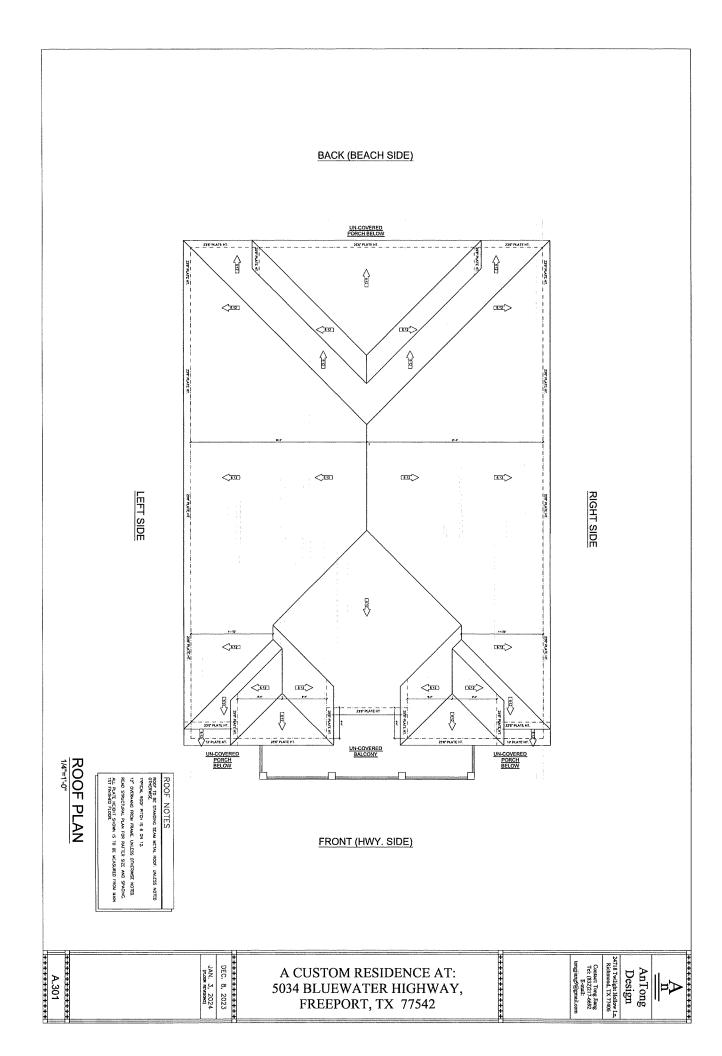
JAN. 3, 2024
(FLOOR RENISONS)

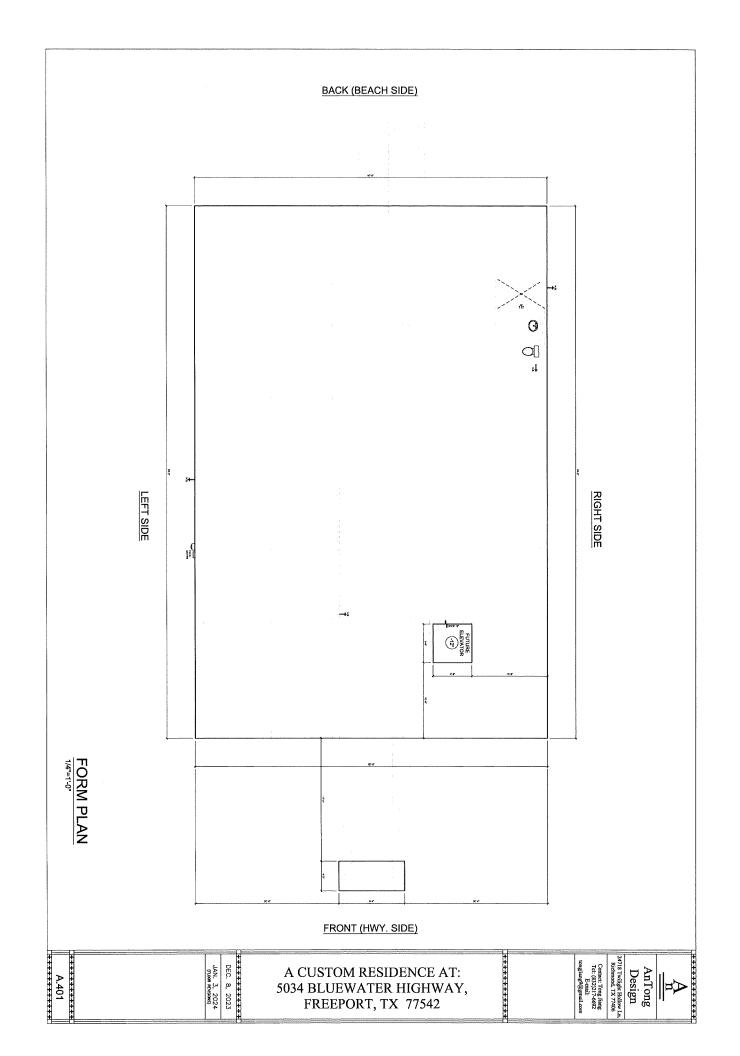
AnTong
Design

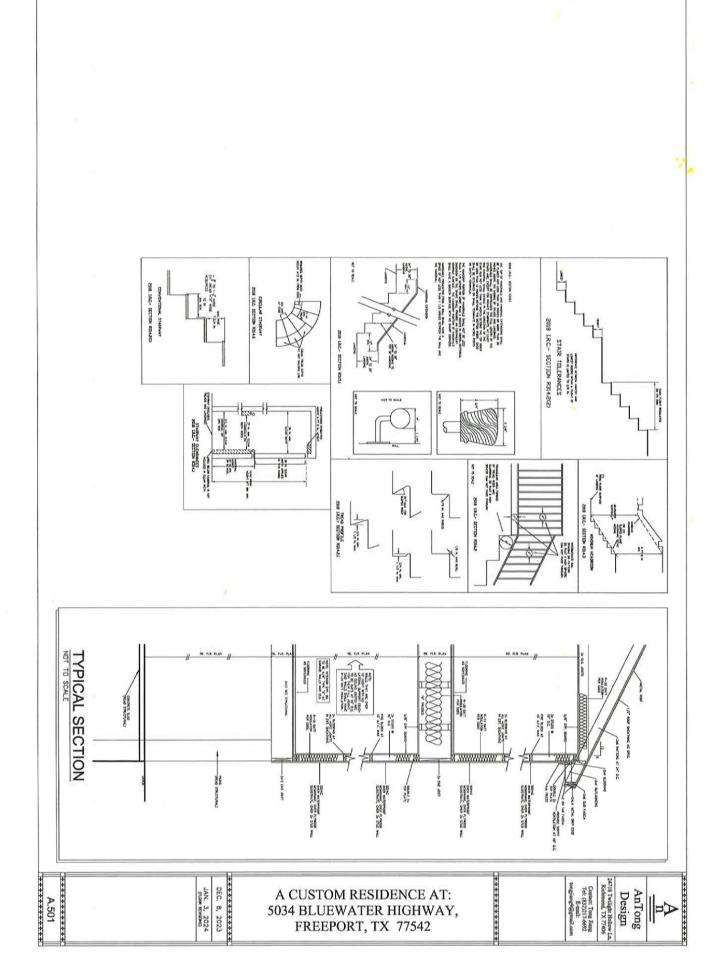
24718 Trailight Hollow La.
Richamond, 127/406
Contact Tong, Jiang
Teit, 1827217-6892
E-mail.
tongjiang-96gmail.com

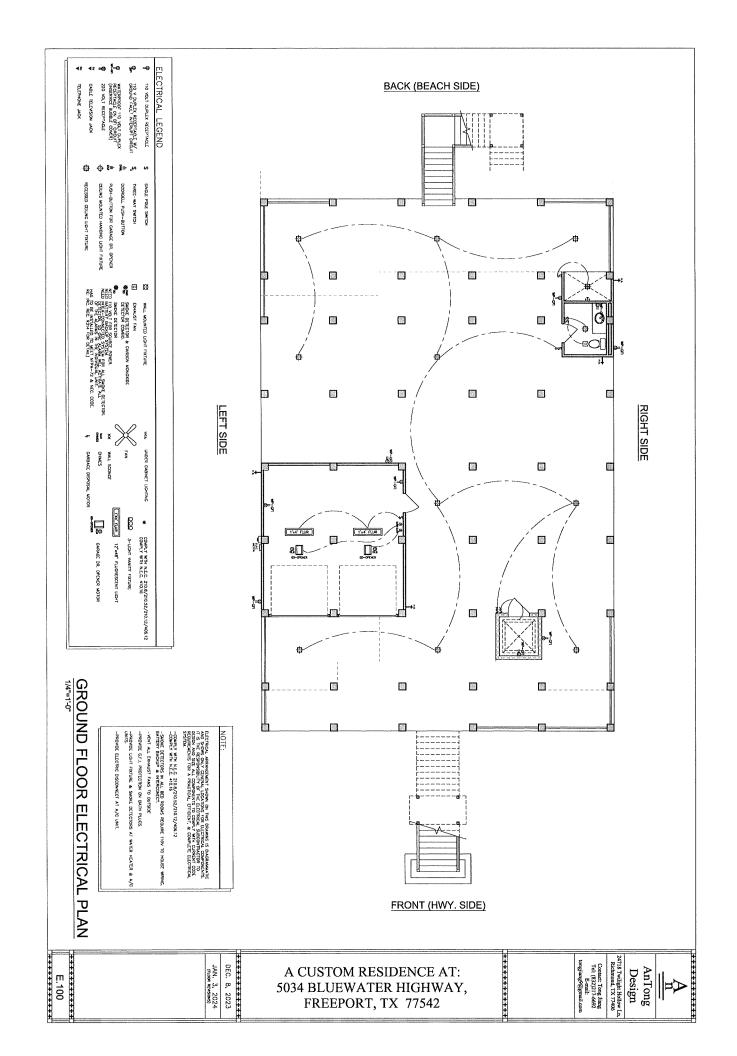


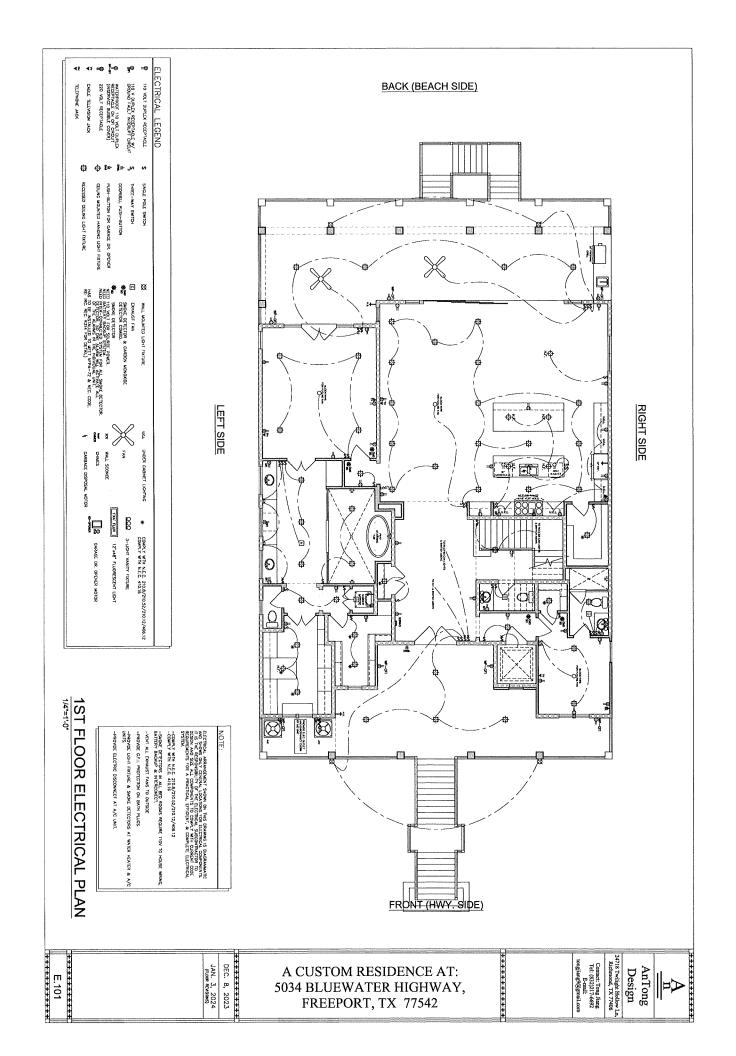


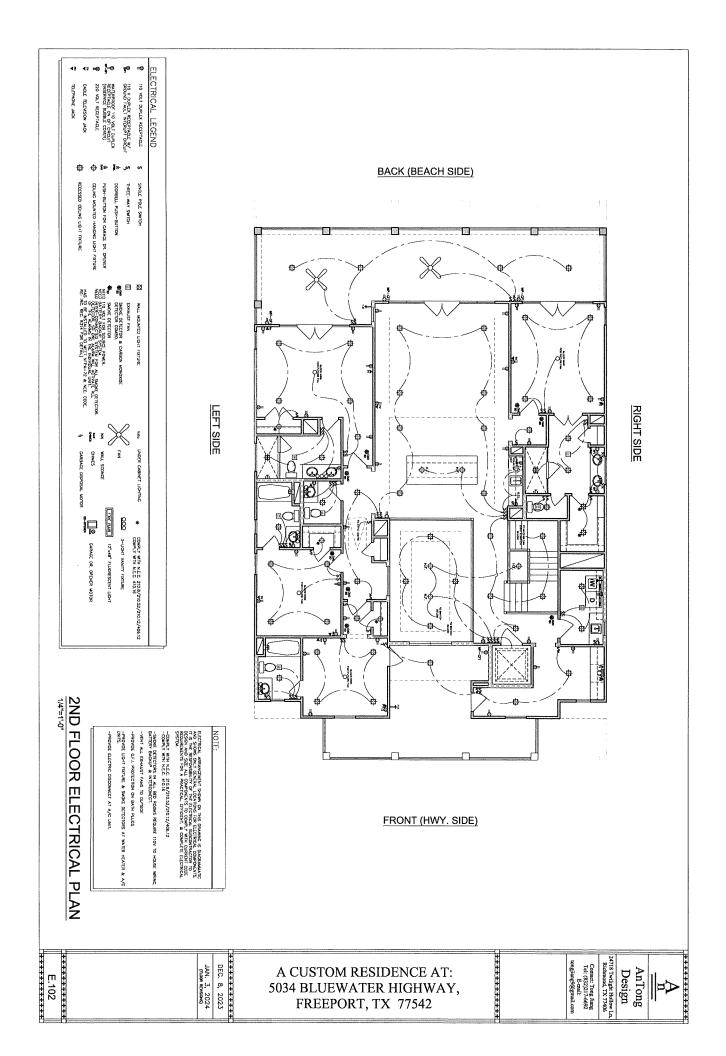
















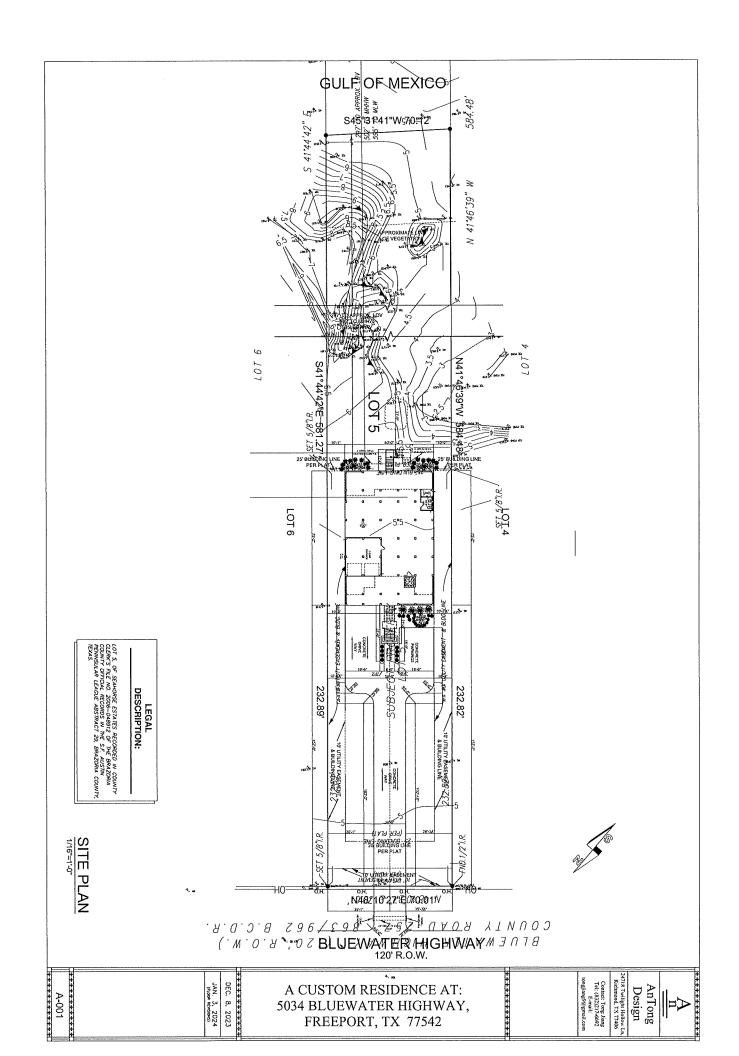


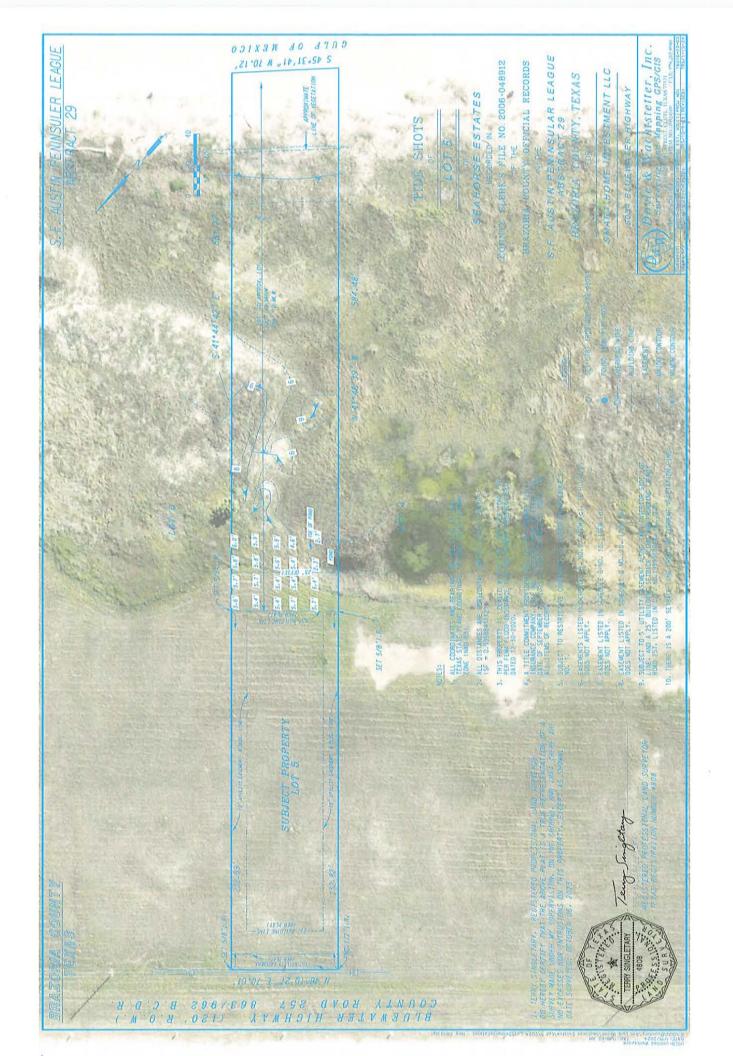


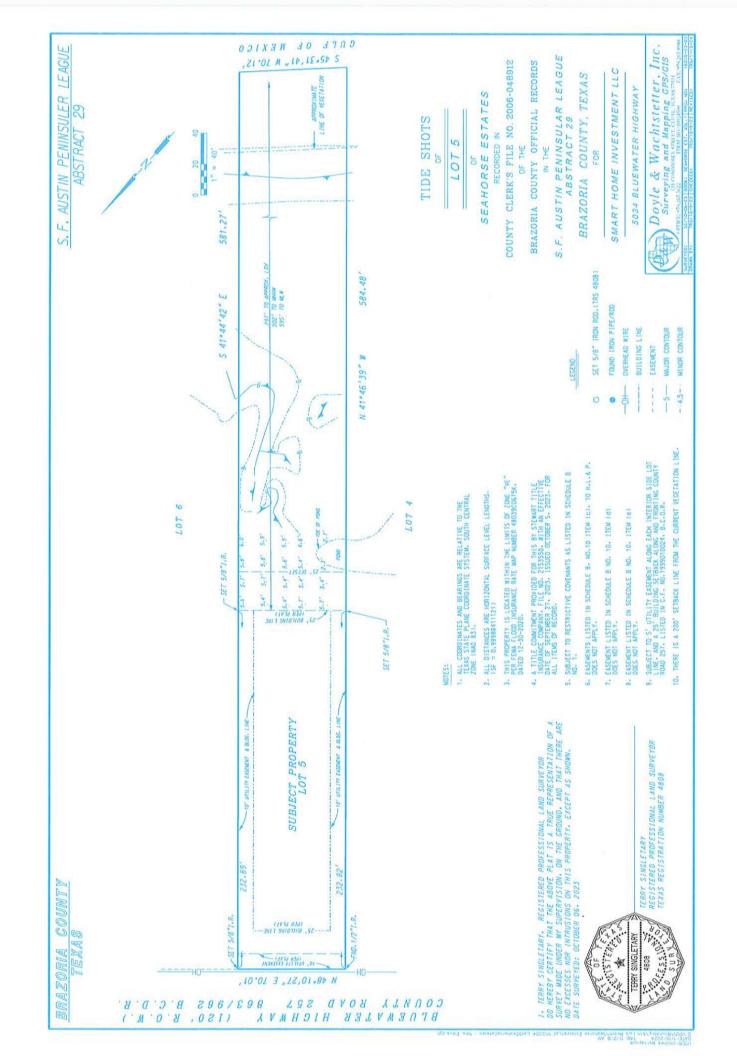












IRC Registration for Builders / Contractors – Effective as of 7-1-2010			
Date: 1/4/24 IRC # 515			
Name of Company: Khodr Homes LLC			
Owner: Nour Khode			
Address: 8018 Rippling Stream Richmond TX 1900			
Phone: work: Cell: 832,775,1610			
Email: nour @ Khodrhomes.com			

(25)



BRAZORIA COUNTY

NOTICE OF RESIDENTIAL CONSTRUCTION INSPECTION COMPLIANCE IN UNINCORPORATED AREA

Received

Related OSSF Application #

(TO BE SUBMITTED BY BUILDER)

Permit #

515 IRC#

BUILDERS NAME: Khodr Homes LLC

PROJECT INFORMATION

TYPE OF CONSTRUCTION: (Check One)			
1)	New Residential Construction on a vacant lot	M	
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 5034 Blue water Hwy Free Subdivision	seahouse Estates	
or	SurveyTract/Acre	age SF Austin Peninsular League	
or	Deed Reference Property ID ((MCAD)#	
RESII	DENTIAL CODE USED IN CONSTRUCTION:		
1)	INTERNATIONAL RESIDENTIAL CODE – published_	2015 []	