GALVESTON COUNTY COMMISSIONERS COURT
GALVESTON COUNTY COURTHOUSE
722 MOODY (FIRST FLOOR) - GALVESTON
JANUARY 10, 2012 – 9:30 A.M.

CONSENT AGENDA: ALL ITEMS MARKED WITH A SINGLE ASTERISK (*) ARE PART OF THE CONSENT AGENDA AND REQUIRE NO DELIBERATION BY THE COMMISSIONERS COURT. ANY COMMISSIONERS' COURT MEMBER MAY REMOVE AN ITEM FROM THIS AGENDA TO BE CONSIDERED SEPARATELY. ***APPEARANCES*****:** SHOULD ANYONE WISH TO ADDRESS THE COMMISSIONERS COURT ON A SPECIFIC ITEM, PLEASE ARRIVE PRIOR TO THE MEETING AND SIGN IN WITH THE COUNTY CLERK. COMMENTS ARE LIMITED TO 5 MINUTES.

REGULARLY SCHEDULED MEETING – AGENDA – 9:30 A.M.

Pledge of Allegiance and Invocation

*1. Submitted by County Auditor's Office:

a. Approval of Accounts Payable checks dated 1/3/2012 and 1/10/2012.

b. Order for Payroll period ending 1/4/2012 Bi-Weekly #1.

c. Order for monthly health insurance payments made by Boon Chapman for the month ending 10/31/11.

d. Order for monthly worker's compensation claims made by The Littleton Group for the month ending 10/31/11.

*2. Receive and file notice of settlement of a claim for damages submitted by County Legal.

a. Date of loss September 2, 2011 with damages of $1,015.05

*3. Consideration of accepting *Right of Way Deed on Parcel 148, F.M. 646* submitted by Right of Way.

*4. Authorization to *Dispose of County Property through GovDeals* submitted by the Purchasing Agent.

*5. Consideration of *resolution authorizing application for the Juvenile Accountability Block Grant* submitted by the Grants Manager.

*6. Consideration of *resolution authorizing application for the Violence Against Women Grant* submitted by the Grants Manager.

*7. Receive and file *Notice pursuant to H.B. 3059, Section 366.005 of Texas-New Mexico Power Company providing utility service to Galveston County.*

*8. Receive and file *Summary of Votes for the Galveston Central Appraisal District Board*

of Directors for 2012/2013.

*9. Consideration of approving *Travel and Training Costs for County Departments*.

*10. Consideration of requests for approval of Tax Refunds in Excess of $2,500.00 submitted by Tax Assessor and Collector.

Account Number	Amount	Reason
1160-0080-0002-014	$2,991.13	Overpayment
1897-0004-0006-000	$2,504.70	Overpayment
2114-0000-0207-000	$3,908.34	Overpayment
2397-0001-0001-000	$3,498.44	Overpayment
2818-0013-0037-000	$4,109.52	Overpayment
3510-0093-1007-002	$3,400.79	Overpayment
3841-0000-0015-000	$2,525.19	Overpayment
4131-0001-0018-000	$9,020.85	Overpayment
4572-0003-0003-000	$2,849.94	Overpayment
5461-0000-0009-000	$3,868.80	Overpayment
6383-0000-1747-000	$7,295.46	Overpayment
7314-0001-0008-000	$4,655.28	Overpayment
8600-0461-4942-020	$2,901.55	Supplemental Adjustment

*11. Consideration of a contract amendment with Comcast for Mid-County Annex submitted by Information Technology.

12. Consideration of approving the Intergovernmental Transfer of funds during the month of January not to exceed $600,000 for participation in the State Non-Federal Share Private Hospital Medicaid Fund (UPL) made in concert with affiliated private hospitals in Galveston and neighboring counties, submitted by the Assistant Director of Community Services.

13. Consideration of approving exemption to the 4 pay period mandatory vacancy policy for Customer Service Representative-Tax Office submitted by Human Resources.

14. Consideration of approval of Grant Agreement between Galveston County, Department of Parks & Senior Services and Texas Department of Agriculture for Home Delivered Meal Grant Program submitted by Parks & Senior Services Director.

15. Consideration of change order no. 7 to the Conrad Construction Co., Ltd. Melody Ln contract to add turn lane improvements on FM 2351 submitted by the County Engineer.

16. Consideration of application from Terri Varner on behalf of Varner Development, Ltd. to convey portions of the 86.208 acres in Burrell Franks Survey, Abst. No. 64 on Bolivar Peninsula by metes & bounds without revising the plat submitted by the County Engineer.

17. Consideration of change order no. 2 to the R W Lucas Construction LLC contract for the Texas City 6th Street Reconstruction project submitted by the County Engineer.

18. Consider recommending awarding a contract on the following RFP submitted by the Purchasing Agent.

RFP #B122005 Hitchcock Boat Ramp Concession

19. Consideration of authorizing the Purchasing Agent to issue an RFP for Contract and Management Services for the I.T. Department submitted by the Purchasing Agent.

20. Consideration of Budget Amendments submitted by the Budget Officer.

Fiscal Year	Amendment #	Description
2012	12-021-0110-A	Sheriff's Office –Request to transfer budget from Self Insurance Reserve Fund to cover the replacement of wrecked Sheriff's patrol vehicle.
2012	12-023-0110-C	Engineering Department – Request to transfer budget from Caroline Street to Texas City 6th Street Project for Change Order No. 2 – R. W. Lucas Construction LLC Contract.
2012	12-024-0110-D	Engineering Department – Request to budget revenue and expenditure for Change Order No. 7 - Conrad Construction Co., Ltd. (Add turn lane improvements - Melody Lane – FM 2351).
2012	12-025-0110-E	Information Technology –Request to transfer budget from Budgeted Fund Balance Reserves to Cellular Phone to cover cellular phone costs for new employee in Veterans Services Division.

21. Consideration of authorizing the County Judge to execute grant contract with the Texas Water Development Board for elevation of repetitive-loss homes in Galveston County submitted by the Emergency Management Coordinator.

22. Consideration of Hurricane Ike items:

    a. Consideration of authorizing execution of revised Contracts for Sale under the Hazard Mitigation Grant Program submitted by the Emergency Management Coordinator.

    b. Consideration to approve the following policy change requests submitted by the

Acting Housing Director:

1. Galveston County Landlord Assistance Program PCR-2 through PCR-5.

2. Galveston County Slum & Blight Program PCR-6.

c. Update on the housing program presented by the Acting Housing Director.

WORKSHOP WILL BEGIN IMMEDIATELY AFTER COMMISSIONERS COURT ADJOURNS

WORKSHOP AGENDA

1. Discussion on Information Technology submitted by Commissioner Precinct 4.

2. Discussion of time and location for Galveston County Sheriff's Sales.

3. Discuss proposed changes to Commissioners' Court agenda format and back-up documentation.

AGENDA ITEM #1

THE COUNTY OF GALVESTON

COUNTY AUDITOR'S OFFICE
P O Box 1418
GALVESTON, TEXAS 77553

Cliff Billingsley, CPA
County Auditor

Ron Chapa, CPA
First Assistant, Director of Auditing

Jeff Modzelewski, CPA
First Assistant, Director of Accounting

First Assistant, I.T Systems
LaToya Jordan

Honorable Judge Mark Henry
And Members of the Commissioners' Court
Galveston County Courthouse
Galveston, Texas

January 3, 2012

I hand you the following items for action at the meeting of Commissioners' Court on Tuesday,

Submitted by Cliff Billingsley, County Auditor

Approval of Accounts Payable checks dated 1/3/2012 and 1/10/2012

Order for Payroll period ending 1/3/2012 Bi-Weekly #1

Order for monthly health insurance payments made by Boon Chapman for the month ending 10/31/11

Order for monthly worker's compensation claims made by The Littleton Group for the month ending 10/31/11

AGENDA ITEM #1a

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Invoice Number	Account Info		Amount
FUND: 1101	**General Fund**		
Warrant #:	**VW 00000328**	**Payee Name: BOB PAGAN FORD INC**	
229403	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	1,050 87
229449	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	795 39
229783	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	1,156 56
229811	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	872 28
229889	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	847 03
229890	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	126 44
229969	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	62 44
230009	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	274 97
230064	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	292 81
230375	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	42 49
230416	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	47 67
230420	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	42 49
230439	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	47 67
230446	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	68 26
230515	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	204 70
230577	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	396 91
230578	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	45 08
230582	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	39 75
		Warrant Total:	**6,413.81**
Warrant #:	**VW 00000330**	**Payee Name: LONE STAR UNIFORMS INC**	
233968	1101211101 - 5312101	Administration Sheriff Dept - Uniform Expense	919 95
233969	1101211101 - 5312101	Administration Sheriff Dept - Uniform Expense	3,676 50
233970	1101211101 - 5312101	Administration Sheriff Dept - Uniform Expense	1,494 00
233972	1101211101 - 5312101	Administration Sheriff Dept - Uniform Expense	2,947 50
233973	1101211101 - 5312101	Administration Sheriff Dept - Uniform Expense	828 35
234589	1101211101 - 5312101	Administration Sheriff Dept - Uniform Expense	1,687 45
234590	1101211101 - 5312101	Administration Sheriff Dept - Uniform Expense	545 00
		Warrant Total:	**12,098.75**
Warrant #:	**VW 00351275**	**Payee Name: A B SIGN SHOP**	
16164	1101121000 - 5310000	Justice Administration - Supplies and Materials	89 35
		Warrant Total:	**89.35**
Warrant #:	**VW 00351276**	**Payee Name: ABL MANAGEMENT INC**	
183295	1101211133 - 5481200	Sheriff-Corrections - Jail Food Service Contract	17,360 10
183296	1101211133 - 5481200	Sheriff-Corrections - Jail Food Service Contract	17,244 42
		Warrant Total:	**34,604.52**
Warrant #:	**VW 00351279**	**Payee Name: ALERT ALARM BURG AND FIRE PROT INC**	
230416	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	47 67
693026	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	10 00
693138	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	50 00
693139	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	50 00
693140	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	50 00
693146	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	50 00
693558	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	155 00
693591	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	155 00
693624	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	130 00
693642	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	130 00

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Invoice Number	Account Info		Amount
693655	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	155 00
693690	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	150 00
693697	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	100 00
693705	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	75 00
693706	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	75 00
693744	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	250 00
693755	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	85 00
693761	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	200 00
693769	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	255 00
693773	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	150 00
693778	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	120 00
693803	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	225 00
693809	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	150 00
693811	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	90 00
693824	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	150 00
693825	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	160 00
693838	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	100 00
693841	1101170100 - 5412094	Facilities Srvs & Maintenance - CareHere Clinic Expenditu	70 00
693846	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	110 00
693858	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	165.00
693895	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	150 00
693899	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	50 00
693905	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	230 00
693909	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	50 00
693943	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	240 00
693972	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	40 00
694004	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	50 00
694042	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	10 00
694112	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	100 00
694257	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	750 00
		Warrant Total:	**5,332.67**
Warrant #: VW 00351280		**Payee Name: ALIHOSSINI, SAM**	
409 BULL RUN DR	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	550 00
		Warrant Total:	**550.00**
Warrant #: VW 00351281		**Payee Name: AMBIT ENERGY LP**	
A2937410	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**100.00**
Warrant #: VW 00351286		**Payee Name: ARTISTIC FRAMING**	
646067	1101121000 - 5310000	Justice Administration - Supplies and Materials	629 80
		Warrant Total:	**629.80**
Warrant #: VW 00351287		**Payee Name: AUDIO VISUAL TECHNOLGIES GROUP INC**	
913106 122011	1101159100 - 5481000	Information Technology - Contract Service	860 00
		Warrant Total:	**860.00**
Warrant #: VW 00351289		**Payee Name: AVT TITLE SERVICES LLC**	
838425	1101000010 - 4414012	General Government - County Clerk Refund of Fees	24 00
		Warrant Total.	**24.00**
Warrant #: VW 00351291		**Payee Name: BAR ASSOCIATION OF THE FIFTH**	

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Invoice Number	Account Info		Amount
1/1/-12/31/12	1101153000 - 5310000	Legal Department - Supplies and Materials	60 00
		Warrant Total:	**60.00**
Warrant #: VW 00351295	**Payee Name: BETTISON DOYLE APFFEL & GUARINO P C.**		
835468	1101000010 - 4414012	General Government - County Clerk Refund of Fees	56 00
		Warrant Total:	**56 00**
Warrant #: VW 00351299	**Payee Name: BOSWORTH PAPERS INC**		
1262024	1101159100 - 5310000	Information Technology - Supplies and Materials	351 06
		Warrant Total:	**351.06**
Warrant #: VW 00351302	**Payee Name: BROADWAY DRUG STORE**		
022461 120511	1101443100 - 5447400	Indigent Care & Medication - Drugs & Medicine	10 64
		Warrant Total:	**10.64**
Warrant #: VW 00351306	**Payee Name: C & A ASSOCIATES INC**		
36639	1101151500 - 5423701	Tax Assessor Collector - Maintenance Contracts	2,080 00
		Warrant Total:	**2,080.00**
Warrant #: VW 00351307	**Payee Name: CADDO MINERALS INC.**		
835525	1101000010 - 4414012	General Government - County Clerk Refund of Fees	5 00
		Warrant Total:	**5.00**
Warrant #: VW 00351309	**Payee Name: CARMONA, FRANK**		
12/5-16/11	1101121000 - 5499302	Justice Administration - Second Admin Dist	5,115 37
		Warrant Total:	**5,115 37**
Warrant #: VW 00351310	**Payee Name: CDW GOVERNMENT INC**		
C113219	1101159100 - 5310000	Information Technology - Supplies and Materials	465 65
C403305	1101159100 - 5310001	Information Technology - Depart Supplies-Non Cap FFE	595 16
		Warrant Total:	**1,060.81**
Warrant #: VW 00351311	**Payee Name: CEDRICK L MUHAMMAD PC**		
11CR2653 122011	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	471 25
		Warrant Total:	**471.25**
Warrant #: VW 00351313	**Payee Name: CENTURY OAKS TITLE**		
818588	1101000010 - 4414012	General Government - County Clerk Refund of Fees	16 00
		Warrant Total:	**16.00**
Warrant #: VW 00351314	**Payee Name: CHAIR TAI CHI**		
BSC21211	1101451110 - 5481000	Senior Citizens - Contract Service	80 00
DSC21211	1101451110 - 5481000	Senior Citizens - Contract Service	80.00
LSC21211	1101451110 - 5481000	Senior Citizens - Contract Service	120.00
		Warrant Total:	**280.00**
Warrant #: VW 00351317	**Payee Name: CITY OF GALVESTON**		
382640 122211	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
550900 120511	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**200.00**
Warrant #: VW 00351318	**Payee Name: CITY OF HITCHCOCK**		

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Invoice Number	Account Info		Amount
11116210 03	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	74 33
		Warrant Total:	**74.33**
Warrant #: VW 00351320	**Payee Name: CITY OF LAMARQUE**		
0030001001005	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	42 34
		Warrant Total:	**42.34**
Warrant #: VW 00351321	**Payee Name: CITY OF LEAGUE CITY**		
2760508824	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	174 12
		Warrant Total:	**174.12**
Warrant #: VW 00351322	**Payee Name: CITY OF TEXAS CITY**		
2221579536	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
2313881767	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**200.00**
Warrant #: VW 00351323	**Payee Name: CLARK, DIANE**		
10CP0099 120911	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	130 00
11CR0212 122011	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	715 00
11CR1530 122011	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1,105 00
317198 121911	1101122200 - 5431222	County Court #2 - Roberts - Defense Atty Co Ct #2	195 00
97FD1359 120911	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	175 50
		Warrant Total:	**2,320.50**
Warrant #: VW 00351324	**Payee Name: CLEMENTS, CLYDE WESLEY**		
10CR3217 100611	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	390 00
		Warrant Total:	**390.00**
Warrant #: VW 00351328	**Payee Name: COBURN SUPPLY COMPANY INC**		
314479269	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	167 04
314482703	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	180 00
314495959	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	101 08
		Warrant Total:	**448.12**
Warrant #: VW 00351330	**Payee Name: COLE, WARREN**		
10FD0296 012011	1101000000 - 2291104	General Fund - DC-Refunds of Fees	3 00
		Warrant Total:	**3.00**
Warrant #. VW 00351332	**Payee Name: COLTZER, ROBERT G**		
11CR1223 112911	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1,079 65
		Warrant Total:	**1,079.65**
Warrant #: VW 00351333	**Payee Name: COMMERCIAL WIRELESS SOLUTIONS LP**		
M26564	1101211171 - 5423000	Communications-Sheriff's Dept - Maint/Repairs Equipment	500 00
		Warrant Total:	**500.00**
Warrant #: VW 00351334	**Payee Name: CRESCENT ENGINEERING COMPANY INC**		
L2998	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	141 86
		Warrant Total:	**141.86**
Warrant #: VW 00351335	**Payee Name: DAHLENBURG, MICHAEL L**		
11CP0015 121511	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	97 50

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Invoice Number	Account Info		Amount
11CP0032 121511	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	97 50
DEC 2011 SRVC	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1,800 00
MH4018 111711	1101122300 - 5431223	Probate Court - Sullivan - Defense Atty Prob/Co Ct	100 00
		Warrant Total:	**2,095.00**
Warrant #: VW 00351337	**Payee Name: DAVISON, AMRI**		
122211 CRT RPTR	1101121000 - 5431121	Justice Administration - Court Reporter Expense	126 64
		Warrant Total:	**126.64**
Warrant #: VW 00351338	**Payee Name: DELL MARKETING LP**		
XFM1X76K8	1101159100 - 5310001	Information Technology - Depart Supplies-Non Cap FFE	5,248 50
		Warrant Total:	**5,248.50**
Warrant #: VW 00351339	**Payee Name: DENKER, WILLIAM**		
3229 TEXAS AVE	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**100.00**
Warrant #: VW 00351340	**Payee Name: DENMORE SERVICES INC**		
830 A 1622ND ST	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**100.00**
Warrant #: VW 00351342	**Payee Name: DICKINSON ARMS APT**		
2002 CHURCH ST 5	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**100.00**
Warrant #: VW 00351343	**Payee Name: DICKINSON ARMS APT**		
3301 HUGHES RD	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**100.00**
Warrant #: VW 00351344	**Payee Name: DICKINSON IND SCHOOL DISTRICT**		
11/21-12/20/11	1101159100 - 5492101	Information Technology - Telephone Expense	436 24
		Warrant Total:	**436.24**
Warrant #: VW 00351345	**Payee Name: DISHER, DAVID A**		
11CR0759 122711	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	604 50
11CR2901 122911	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	403.00
		Warrant Total:	**1,007.50**
Warrant #: VW 00351347	**Payee Name: DUCOTE, JAMES**		
06FD1408 121911	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	308 75
		Warrant Total:	**308.75**
Warrant #: VW 00351349	**Payee Name: EISEN, MYNDE**		
20117990	1101000010 - 4414012	General Government - County Clerk Refund of Fees	30 00
		Warrant Total:	**30.00**
Warrant #: VW 00351351	**Payee Name: FAIRFAX, MICHAEL**		
PR63589	1101000000 - 1404000	General Fund - Due from Soc Srv Guardianship	184 80
		Warrant Total:	**184.80**
Warrant #: VW 00351352	**Payee Name: FAS CLAMPITT CORPORATION**		
216779	1101211133 - 5310000	Sheriff-Corrections - Supplies and Materials	101 56

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Invoice Number	Account Info		Amount
		Warrant Total:	**101.56**
Warrant #: VW 00351353	**Payee Name: FEDEX CORP**		
770528885	1101151400 - 5311140 Professional Services - Postage		24 80
		Warrant Total:	**24.80**
Warrant #: VW 00351354	**Payee Name: FIRST CHOICE POWER**		
655002001088475	1101443100 - 5447200 Indigent Care & Medication - Emergency Assistance		102 56
		Warrant Total:	**102.56**
Warrant #: VW 00351355	**Payee Name: FORECLOSURE SERVICES L.L.C.**		
818441	1101000010 - 4414012 General Government - County Clerk Refund of Fees		7 00
		Warrant Total:	**7 00**
Warrant #: VW 00351356	**Payee Name: FURLEIGH, FRANCIS W**		
SEP 2011 MLG	1101117500 - 5496301 Veteran's Services - Auto Mileage		109 39
		Warrant Total:	**109.39**
Warrant #: VW 00351357	**Payee Name: G NEIL COMPANIES**		
INV0165363	1101211133 - 5310000 Sheriff-Corrections - Supplies and Materials		334 65
		Warrant Total:	**334.65**
Warrant #: VW 00351358	**Payee Name: GALVESTON COUNTY SHERIFF'S DEPT**		
121611 MEAL	1101211132 - 5496153 M H M R -Sheriff - In-State Transport		19 44
		Warrant Total:	**19.44**
Warrant #: VW 00351360	**Payee Name: GAMMA WASTE SYSTEMS**		
29960	1101170100 - 5412094 Facilities Srvs & Maintenance - CareHere Clinic Expenditu		140 00
		Warrant Total:	**140.00**
Warrant #: VW 00351361	**Payee Name: GATES MACHINE SHOP**		
018920	1101522020 - 5424000 Parks Department - Maint & Repairs Buildings		122 00
		Warrant Total:	**122.00**
Warrant #: VW 00351362	**Payee Name: GELB, JEFFREY**		
04FD0521 121911	1101122400 - 5431221 County Court #3 - Dupuy - Defense Atty Co Ct		357 50
		Warrant Total:	**357.50**
Warrant #: VW 00351364	**Payee Name: GEXA CORP**		
13434983	1101443100 - 5447200 Indigent Care & Medication - Emergency Assistance		132 53
		Warrant Total:	**132.53**
Warrant #: VW 00351365	**Payee Name: GHG CORPORATION**		
21922	1101159100 - 5481000 Information Technology - Contract Service		475 00
		Warrant Total:	**475.00**
Warrant #: VW 00351366	**Payee Name: GLASS AND GLAZING INC**		
10380	1101170100 - 5424000 Facilities Srvs & Maintenance - Maint & Repairs Buildings		1,450 00
		Warrant Total:	**1,450.00**
Warrant #. VW 00351367	**Payee Name. GOVDEALS INC**		
918092011	1101000000 - 2295011 General Fund - Due to Website Auctioneer		2,944 61

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Invoice Number	Account Info		Amount
		Warrant Total:	**2,944.61**
Warrant #: VW 00351368	**Payee Name: HARRIS COUNTY TREASURER**		
AH001917	1101121000 - 5431009	Justice Administration - Court of Appeals Expense	50,058 00
		Warrant Total:	**50,058.00**
Warrant #: VW 00351372	**Payee Name: IBRAHIM & ELLIOTT LLP**		
317850 121911	1101122400 - 5431221	County Court #3 - Dupuy - Defense Atty Co Ct	195 00
		Warrant Total:	**195.00**
Warrant #: VW 00351373	**Payee Name: INVESTIGATIVE CONCEPTS UNLIMITED**		
11CR0051 083111	1101121000 - 5416000	Justice Administration - Prof Serv Investigators	1,499 75
		Warrant Total:	**1,499.75**
Warrant #: VW 00351374	**Payee Name: J. PATRICK COULSON**		
20117839	1101000010 - 4414012	General Government - County Clerk Refund of Fees	27 00
		Warrant Total:	**27.00**
Warrant #: VW 00351376	**Payee Name: JALUFKA, GAIL**		
121511 CRT RPTR	1101121000 - 5411102	Justice Administration - Prof Serv Transcripts	39 00
121911 CRT RPTR	1101121000 - 5411102	Justice Administration - Prof Serv Transcripts	1,674 00
		Warrant Total:	**1,713.00**
Warrant #: VW 00351379	**Payee Name: JONES LAW FIRM**		
11CR2470 110111	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	546 00
		Warrant Total:	**546.00**
Warrant #: VW 00351380	**Payee Name: JONES, STACEY LEE**		
JAIL DKT 121611	1101122200 - 5431222	County Court #2 - Roberts - Defense Atty Co Ct #2	950 00
		Warrant Total:	**950.00**
Warrant #: VW 00351382	**Payee Name: JRL SERVICES LLC**		
100634	1101544042 - 5481000	Beach Maintenance-Rd & Bridge - Contract Service	2,050 00
100635	1101544042 - 5481000	Beach Maintenance-Rd & Bridge - Contract Service	2,050 00
100636	1101544042 - 5481000	Beach Maintenance-Rd & Bridge - Contract Service	2,050 00
		Warrant Total:	**6,150.00**
Warrant #: VW 00351383	**Payee Name: KASSBOHRER ALL TERRAIN VEHICLES INC**		
2178625	1101544042 - 5423000	Beach Maintenance-Rd & Bridge - Maint/Repairs Equipment	74 86
		Warrant Total:	**74.86**
Warrant #: VW 00351386	**Payee Name: KLEEN JANITORIAL SUPPLY COMPANY**		
1814	1101522020 - 5310000	Parks Department - Supplies and Materials	612 00
1827	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	116 22
		Warrant Total:	**728.22**
Warrant #: VW 00351387	**Payee Name: KONE INC**		
220777368	1101170100 - 5423701	Facilities Srvs & Maintenance - Maintenance Contracts	1,335 00
		Warrant Total:	**1,335.00**
Warrant #: VW 00351390	**Payee Name: LAW OFFICE OF DANA V DREXLER**		
MH4023 111711	1101122300 - 5431223	Probate Court - Sullivan - Defense Atty Prob/Co Ct	175 00

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Invoice Number	Account Info		Amount
MH4025 111711	1101122300 - 5431223	Probate Court - Sullivan - Defense Atty Prob/Co Ct	175 00
MH4026 111711	1101122300 - 5431223	Probate Court - Sullivan - Defense Atty Prob/Co Ct	175 00
MH4028 112311	1101122300 - 5431223	Probate Court - Sullivan - Defense Atty Prob/Co Ct	175 00
		Warrant Total:	**700.00**
Warrant #: VW 00351392		**Payee Name: LIGGIOS TIRE AND SERVICE CENTER INC**	
180134	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	20 00
180176	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	21 03
180193	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	106 45
180196	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	31 25
180236	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	31 25
180254	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	285 24
180272	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	34 50
180306	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	32 24
180478	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	47 86
180500	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	391 90
180523	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	47 45
180534	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	28 00
180581	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	123 12
180641	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	13 00
180699	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	774 32
180756	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	345 60
180851	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	39 75
180854	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	39 75
180971	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	81 24
180993	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	803 72
181018	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	14 50
181020	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	976 69
181214	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	31 25
181244	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	39 75
181313	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	85 00
181369	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	85 00
181531	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	13 00
181537	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	28 00
181560	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	44 25
181571	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	28 00
181575	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	39 75
181584	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	28 00
181592	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	13 00
181598	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	117 92
181622	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	35 64
181641	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	51 25
181665	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	527 40
181687	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	39 75
181705	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	28 00
		Warrant Total:	**5,523.82**
Warrant #: VW 00351393		**Payee Name: LINEBARGER GOGGAN BLAIR & SAMPSON LLP**	
DEC 11 JP5 FEES	1101000000 - 2291011	General Fund - Due to Collection Agency	1,083 90
		Warrant Total:	**1,083.90**
Warrant #: VW 00351394		**Payee Name: LONE STAR FORENSIC ASSOCIATES INC**	
109 INT FING TRN	1101211131 - 5495100	Identification Division - Education	495 00

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Invoice Number	Account Info		Amount
		Warrant Total:	**495.00**
Warrant #: VW 00351397	**Payee Name: MAILFINANCE INC**		
N2932128	1101159100 - 5426100	Information Technology - Equipment Rental/Lease	3,111 83
		Warrant Total:	**3,111.83**
Warrant #: VW 00351398	**Payee Name: MALONEY & PARKS LLP**		
10CR0438 111811	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	585 00
11CR2579 120811	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	162 50
11CR3405 120311	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	325 00
		Warrant Total:	**1,072.50**
Warrant #: VW 00351399	**Payee Name: MANGLE, CHRISTINE L**		
08CP0075 122011	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	436 88
10CP0116 121511	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	52 00
		Warrant Total:	**488.88**
Warrant #: VW 00351400	**Payee Name: MANGLE, CHRISTINE L**		
07CP0035 122011	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	946 44
		Warrant Total:	**946.44**
Warrant #: VW 00351401	**Payee Name: MARK I PLUMBING INC**		
1002	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	454 50
1004	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	407 00
1008	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	225 00
984	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	717 00
		Warrant Total:	**1,803.50**
Warrant #: VW 00351402	**Payee Name: MASTER WORD SERVICE INC**		
46380	1101121000 - 5431101	Justice Administration - Professional Srv Interpreter	6,528 52
		Warrant Total:	**6,528.52**
Warrant #: VW 00351403	**Payee Name: MATHESON TRI-GAS INC**		
03604266	1101211133 - 5310000	Sheriff-Corrections - Supplies and Materials	496 79
03743856	1101211133 - 5310000	Sheriff-Corrections - Supplies and Materials	18 75
		Warrant Total:	**515.54**
Warrant #: VW 00351404	**Payee Name: MAUZY, BRUCE**		
010P0095 120911	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	331 50
010P0122 091311	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	227 50
10CP0043 111611	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	84 50
10CP0068 120211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	175 50
10CR3643 121211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	253 50
10P0102 120111	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	204 00
11CP0018 091411	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	175 50
11CP0019 091411	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	91 00
11CR1950 121211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	195 00
11CR2001 121211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	314 50
11P0049 112211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	318 50
		Warrant Total:	**2,371.00**
Warrant #: VW 00351406	**Payee Name: MCCUMBER, JUDGE KATHLEEN**		

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Invoice Number	Account Info		Amount
8/10-11/11 RFND	1101000000 - 2291104	General Fund - DC-Refunds of Fees	289 00
		Warrant Total:	**289.00**
Warrant #: VW 00351407	**Payee Name: MCLEOD ALEXANDER POWEL & APFFEL**		
10CP0027 121411	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	461 50
		Warrant Total:	**461.50**
Warrant #: VW 00351409	**Payee Name: MOODY NATIONAL BANK**		
NOV 2011 REMOTE	1101151500 - 5481000	Tax Assessor Collector - Contract Service	93 04
		Warrant Total:	**93.04**
Warrant #: VW 00351410	**Payee Name: MORRISON, RICHARD P.C.**		
837920	1101000010 - 4414012	General Government - County Clerk Refund of Fees	45 00
		Warrant Total:	**45.00**
Warrant #: VW 00351412	**Payee Name: MUELLER, DINAH J**		
11CP0002 121211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	97 50
		Warrant Total:	**97.50**
Warrant #: VW 00351417	**Payee Name: NEOPOST USA INC**		
13589547	1101159100 - 5310000	Information Technology - Supplies and Materials	187 00
		Warrant Total:	**187.00**
Warrant #: VW 00351418	**Payee Name: NORTH STAR TITLE COMPANY**		
838664	1101000010 - 4414012	General Government - County Clerk Refund of Fees	80 00
		Warrant Total:	**80.00**
Warrant #: VW 00351419	**Payee Name: NRG ENERGY INC**		
7302867 2	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	101 93
		Warrant Total:	**101.93**
Warrant #: VW 00351420	**Payee Name: OAKS OF HITCHCOCK**		
7440 HWY 6 509	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**100.00**
Warrant #: VW 00351422	**Payee Name: OTIS ELEVATOR CO CORP**		
TG04457112	1101170100 - 5423701	Facilities Srvs & Maintenance - Maintenance Contracts	2,913 84
		Warrant Total:	**2,913.84**
Warrant #: VW 00351423	**Payee Name: OWEN ELECTRIC SUPPLY**		
3975439579	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	124 80
3975440919	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	94 36
3975441049	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	48 00
3975441054	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	50 10
		Warrant Total:	**317.26**
Warrant #: VW 00351424	**Payee Name: OZARKA NATURAL SPRING WATER**		
01L0123007437	1101291010 - 5310000	Emergency Management - Supplies and Materials	17 00
		Warrant Total:	**17.00**
Warrant #: VW 00351425	**Payee Name: PARKS, TAMRA**		
121911 405TH DC	1101121000 - 5431121	Justice Administration - Court Reporter Expense	253 28

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Invoice Number	Account Info		Amount
		Warrant Total:	**253.28**
Warrant #: VW 00351428	**Payee Name: PENINSULA SANITATION SERVICE INC**		
58337	1101544042 - 5421400	Beach Maintenance-Rd & Bridge - Refuse Disposal	900 00
		Warrant Total:	**900.00**
Warrant #: VW 00351429	**Payee Name: PENINSULA SANITATION SERVICE INC**		
43280	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	75 00
43281	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	75 00
43783	1101544042 - 5421400	Beach Maintenance-Rd & Bridge - Refuse Disposal	85 00
		Warrant Total:	**235.00**
Warrant #: VW 00351430	**Payee Name: PGP TITLE INC.**		
2011064240	1101000010 - 4414012	General Government - County Clerk Refund of Fees	20 00
		Warrant Total:	**20.00**
Warrant #: VW 00351431	**Payee Name: PGP TITLE**		
2011062984	1101000010 - 4414012	General Government - County Clerk Refund of Fees	12 00
2011064014	1101000010 - 4414012	General Government - County Clerk Refund of Fees	8 00
		Warrant Total:	**20.00**
Warrant #: VW 00351432	**Payee Name: PIER SYSTEMS INC**		
3907	1101291010 - 5481000	Emergency Management - Contract Service	1,385 00
		Warrant Total:	**1,385.00**
Warrant #: VW 00351433	**Payee Name: PONTIKAS, MAROULIA LYNN**		
98FD0271 120811	1101000000 - 2291104	General Fund - DC-Refunds of Fees	15 00
		Warrant Total:	**15.00**
Warrant #: VW 00351436	**Payee Name: PORT BOLIVAR VFD EMS**		
OCT-DEC 2011	1101440100 - 5451104	Community Services - Galveston Cnty EMS	12,500 00
		Warrant Total:	**12,500.00**
Warrant #: VW 00351439	**Payee Name: QI CONSULTING INC**		
4220	1101159100 - 5423000	Information Technology - Maint/Repairs Equipment	250 00
		Warrant Total:	**250.00**
Warrant #: VW 00351441	**Payee Name: RIDDLE, MICHAEL C.**		
PR073075	1101000010 - 4414012	General Government - County Clerk Refund of Fees	5 00
		Warrant Total:	**5 00**
Warrant #: VW 00351442	**Payee Name: ROADY, JACK**		
1130-120211 TRVL	1101127100 - 5496301	District Attorney - Auto Mileage	299 70
		Warrant Total:	**299.70**
Warrant #: VW 00351443	**Payee Name: ROBINSON TEXTILES INC**		
106445	1101211133 - 5310000	Sheriff-Corrections - Supplies and Materials	2,080 00
		Warrant Total:	**2,080.00**
Warrant #: VW 00351444	**Payee Name: RUSSELL, ALLEN D.**		
CV0065385	1101000010 - 4414012	General Government - County Clerk Refund of Fees	5 00

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Invoice Number	Account Info		Amount
		Warrant Total:	**5.00**
Warrant #: VW 00351447	**Payee Name: SANTA FE AUTO PARTS INC**		
72577	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	84 77
72749	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	134 90
72833	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	249 56
72839	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	13 38
72890	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	195 55
73411	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	6 93
74063	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	13 95
74634	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	208 21
74717	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	60 34
		Warrant Total:	**967 59**
Warrant #: VW 00351448	**Payee Name: SCOTT, SHELBY**		
11CR1356 122011	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	5,905 50
		Warrant Total:	**5,905.50**
Warrant #: VW 00351449	**Payee Name: SHATTUCK, BOB**		
MH4018 111711	1101122300 - 5431407	Probate Court - Sullivan - Associate Judge-Probate Court	160 00
MH4023 111711	1101122300 - 5431407	Probate Court - Sullivan - Associate Judge-Probate Court	160 00
MH4025 111711	1101122300 - 5431407	Probate Court - Sullivan - Associate Judge-Probate Court	160 00
MH4026 111711	1101122300 - 5431407	Probate Court - Sullivan - Associate Judge-Probate Court	160 00
MH4028 112311	1101122300 - 5431407	Probate Court - Sullivan - Associate Judge-Probate Court	160 00
		Warrant Total:	**800.00**
Warrant #: VW 00351451	**Payee Name: SHERWIN WILLIAMS PAINT CORP**		
29167	1101544042 - 5423000	Beach Maintenance-Rd & Bridge - Maint/Repairs Equipment	106 98
91732	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	18 97
92557	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	49 38
		Warrant Total:	**175.33**
Warrant #: VW 00351452	**Payee Name: SHI GOVT SOLUTIONS**		
GB00047841	1101159100 - 5310001	Information Technology - Depart Supplies-Non Cap FFE	2,280 00
		Warrant Total:	**2,280.00**
Warrant #: VW 00351453	**Payee Name: SHULL, HOLLY D**		
11CV0356 102611	1101000000 - 2291104	General Fund - DC-Refunds of Fees	4 50
		Warrant Total:	**4.50**
Warrant #: VW 00351454	**Payee Name: SIERRA, JACLYN M**		
07CR1130 120111	1101121000 - 5416000	Justice Administration - Prof Serv Investigators	1,500 00
07CR1130 122011	1101121000 - 5416000	Justice Administration - Prof Serv Investigators	500 00
		Warrant Total:	**2,000.00**
Warrant #: VW 00351455	**Payee Name: SOLUTIONS4SURE.COM INC**		
B11126454V1	1101159100 - 5310001	Information Technology - Depart Supplies-Non Cap FFE	844 56
		Warrant Total:	**844 56**
Warrant #: VW 00351461	**Payee Name: STEWART TITLE OF CORPUS CHRISTI**		
2011063123	1101000010 - 4414012	General Government - County Clerk Refund of Fees	8 00
		Warrant Total:	**8.00**

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Invoice Number	Account Info		Amount
Warrant #: VW 00351462	**Payee Name: STREAM ENERGY**		
1163390295	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	94 90
		Warrant Total:	**94.90**
Warrant #: VW 00351467	**Payee Name: SUN COAST RESOURCES INC**		
91098032	1101172111 - 5322010	Fleet Mgmt-Galveston - Auto Fuel Expense	16 49
91130977	1101172111 - 5322010	Fleet Mgmt-Galveston - Auto Fuel Expense	5,968 61
91131086	1101172111 - 5322010	Fleet Mgmt-Galveston - Auto Fuel Expense	-8,746 91
91135570	1101172111 - 5322010	Fleet Mgmt-Galveston - Auto Fuel Expense	2,389 39
91136844	1101172111 - 5322010	Fleet Mgmt-Galveston - Auto Fuel Expense	5,830.71
		Warrant Total:	**5,458 29**
Warrant #: VW 00351468	**Payee Name: SUNGARD PUBLIC SECTOR INC**		
35807	1101159100 - 5423500	Information Technology - Maintenance of Software	8,630 18
35810	1101159100 - 5423500	Information Technology - Maintenance of Software	8,630 18
37500	1101159100 - 5423500	Information Technology - Maintenance of Software	8,630 18
38623	1101159100 - 5423500	Information Technology - Maintenance of Software	8,630 18
39521	1101159100 - 5423500	Information Technology - Maintenance of Software	8,630 18
41098	1101159100 - 5423500	Information Technology - Maintenance of Software	8,630 18
42275	1101159100 - 5423500	Information Technology - Maintenance of Software	8,630 18
43150	1101159100 - 5423500	Information Technology - Maintenance of Software	8,630 18
44349	1101159100 - 5423500	Information Technology - Maintenance of Software	8,630 18
		Warrant Total:	**77,671.62**
Warrant #: VW 00351472	**Payee Name: TEXAS ASSOCIATION OF COUNTIES**		
24401	1101110000 - 5498000	General Government - Membership And Dues	200.00
		Warrant Total:	**200.00**
Warrant #: VW 00351473	**Payee Name: TEXAS DISTRICT AND COUNTY ATTORNEY'S**		
32407	1101127100 - 5317000	District Attorney - Books & Periodicals	289 00
		Warrant Total:	**289.00**
Warrant #: VW 00351474	**Payee Name: TEXAS LAW & PSYCHIATRY PLLC**		
08CR3773 121611	1101121000 - 5412115	Justice Administration - Psychological Exam	1,200 00
11CR2362 121611	1101121000 - 5412115	Justice Administration - Psychological Exam	1,200 00
11CR2938 121411	1101121000 - 5412115	Justice Administration - Psychological Exam	1,200 00
11CR3126 120611	1101121000 - 5412115	Justice Administration - Psychological Exam	1,200 00
		Warrant Total:	**4,800.00**
Warrant #: VW 00351477	**Payee Name: TILLINGER, CHRISTINA S**		
01FD1984 050911	1101000000 - 2291104	General Fund - DC-Refunds of Fees	13 00
		Warrant Total:	**13.00**
Warrant #: VW 00351478	**Payee Name: TXU ENERGY RETAIL COMPANY LP**		
100006055256	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
900005116790	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	60 85
		Warrant Total:	**160.85**
Warrant #: VW 00351480	**Payee Name: U.S. ENERGY SAVINGS CORP.**		
6674600	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**100.00**

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List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Invoice Number	Account Info		Amount
Warrant #: VW 00351481	**Payee Name: UNITED PARCEL SERVICE**		
000014217W501	1101159100 - 5481000	Information Technology - Contract Service	35 33
		Warrant Total:	**35.33**
Warrant #: VW 00351482	**Payee Name: UNITED POWER AND BATTERY CORP**		
111552	1101159100 - 5423000	Information Technology - Maint/Repairs Equipment	24,400 00
		Warrant Total:	**24,400.00**
Warrant #: VW 00351487	**Payee Name: WEST PUBLISHING CORPORATION**		
824093808	1101151400 - 5317000	Professional Services - Books & Periodicals	105 00
		Warrant Total:	**105.00**
Warrant #: VW 00351489	**Payee Name: XEROX CORPORATION**		
117371671	1101159100 - 5310000	Information Technology - Supplies and Materials	620 40
		Warrant Total:	**620.40**
		FUND 1101 TOTAL:	**329,464.10**

FUND: 2131 DA Seized Funds Afte Aft 10/89

Warrant #: VW 00351442	**Payee Name: ROADY, JACK**		
1130-120211 TRVL	2131127132 - 5495112	DA Seized Funds Afte Aft 10/89 - Training	102 00
121611 MEALS	2131127132 - 5310000	DA Seized Funds Afte Aft 10/89 - Supplies and Materials	37 99
		Warrant Total:	**139.99**
Warrant #: VW 00351460	**Payee Name: STEWART TITLE CO**		
201132672	2131127132 - 5310000	DA Seized Funds Afte Aft 10/89 - Supplies and Materials	162.38
		Warrant Total:	**162.38**
		FUND 2131 TOTAL:	**302.37**

FUND: 2212 Mediation Services Prog Fund

Warrant #: VW 00351285	**Payee Name: AMERSON, RODGER DAN**		
11FD1813 121911	2212125300 - 5432011	Mediation Services - Mediation Services	200 00
		Warrant Total:	**200.00**
Warrant #: VW 00351385	**Payee Name: KILGORE, JEFFREY A**		
011CP0082 121911	2212125300 - 5432011	Mediation Services - Mediation Services	400 00
011CP0083 122111	2212125300 - 5432011	Mediation Services - Mediation Services	250 00
011CP0084 122111	2212125300 - 5432011	Mediation Services - Mediation Services	260 00
11FD1797 121411	2212125300 - 5432011	Mediation Services - Mediation Services	400 00
		Warrant Total:	**1,310.00**
Warrant #: VW 00351445	**Payee Name: SALINSKY LAW OFFICES**		
11FD2488 121911	2212125300 - 5432011	Mediation Services - Mediation Services	350 00
		Warrant Total:	**350.00**
		FUND 2212 TOTAL:	**1,860.00**

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Invoice Number	Account Info		Amount
FUND: 2220 Adult Probation Fund			
Warrant #: VW 00351293	**Payee Name: BELL, PAULA**		
DEC 2011 MLG	2220255100 - 5496100	Adult Probation - Travel	40 80
		Warrant Total:	**40.80**
Warrant #: VW 00351301	**Payee Name: BOZEMAN, KELLY**		
DEC 2011 MLG	2220255100 - 5496100	Adult Probation - Travel	42 33
		Warrant Total:	**42.33**
Warrant #: VW 00351446	**Payee Name: SAM HOUSTON STATE UNIVERSITY**		
12 MITA OLALEKAN	2220255100 - 5495112	Adult Probation - Training	395 00
		Warrant Total:	**395.00**
		FUND 2220 TOTAL:	**478.13**
FUND: 2230 Juvenile Justice Fund			
Warrant #: VW 00351276	**Payee Name: ABL MANAGEMENT INC**		
188323	2230256118 - 5314301	Detention - Kitchen Supplies	100 80
188323	2230256118 - 5481199	Detention - Food Service Contract	2,356 70
188323	2230256119 - 5481199	Post Program - Food Service Contract	592 75
188323	2230256155 - 5481199	Juv Justice Alt Ed Program - Food Service Contract	140 12
188324	2230256118 - 5481199	Detention - Food Service Contract	1,943 80
188324	2230256119 - 5481199	Post Program - Food Service Contract	530 77
		Warrant Total:	**5,664.94**
Warrant #: VW 00351298	**Payee Name: BOB BARKER CO INC**		
WEB000199066	2230256118 - 5313100	Detention - Cleaning & Household Supplies	131 49
		Warrant Total:	**131.49**
Warrant #: VW 00351300	**Payee Name: BOYD PHD, JENINE COLLINS**		
12212011	2230256100 - 5412114	Juvenile Justice - Psychological Evaluations/Cert	1,500 00
		Warrant Total:	**1,500.00**
Warrant #: VW 00351367	**Payee Name: GOVDEALS INC**		
918092011	2230000000 - 2295011	Juvenile Justice Fund - Due to Website Auctioneer	177 00
		Warrant Total:	**177.00**
Warrant #: VW 00351386	**Payee Name: KLEEN JANITORIAL SUPPLY COMPANY**		
1826	2230256118 - 5313100	Detention - Cleaning & Household Supplies	1,152 90
		Warrant Total:	**1,152.90**
Warrant #: VW 00351402	**Payee Name: MASTER WORD SERVICE INC**		
46381	2230256130 - 5431101	Court - Professional Srv Interpreter	202 72
		Warrant Total:	**202.72**
Warrant #: VW 00351443	**Payee Name: ROBINSON TEXTILES INC**		
106694	2230256118 - 5312100	Detention - Clothing Expense	448 20
		Warrant Total:	**448.20**

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Invoice Number	Account Info		Amount
Warrant #: VW 00351484	**Payee Name: VENSO, NORMA**		
201101 REISSUE	2230256130 - 5431403	Court - Relief Masters Referee	250 00
		Warrant Total:	**250.00**
Warrant #: VW 00351487	**Payee Name: WEST PUBLISHING CORPORATION**		
6076745640	2230256105 - 5317000	Juv Justice - Administration - Books & Periodicals	190.00
		Warrant Total:	**190.00**
		FUND 2230 TOTAL:	**9,717.25**

FUND: 2242 Sheriff's Seizure Aft 10/89

Warrant #: VW 00351327	**Payee Name: COBHAM TRACKING & LOCATING**		
0000205513	2242211124 - 5423000	Sheriff's Seizure Aft 10/89 - Maint/Repairs Equipment	2,910 00
		Warrant Total:	**2,910.00**
Warrant #. VW 00351358	**Payee Name: GALVESTON COUNTY SHERIFF'S DEPT**		
RCT 329424	2242211124 - 5600500	Sheriff's Seizure Aft 10/89 - Petty Cash	100 00
		Warrant Total:	**100.00**
Warrant #: VW 00351411	**Payee Name: MOTOROLA SOLUTIONS INC**		
90845034	2242211124 - 5423000	Sheriff's Seizure Aft 10/89 - Maint/Repairs Equipment	1,433 95
		Warrant Total:	**1,433.95**
		FUND 2242 TOTAL:	**4,443.95**

FUND: 2250 Law Enforcement Education Fund

Warrant #: VW 00351476	**Payee Name: TEXAS STATE UNIVERSITY SAN MARCOS**		
4/29-5/2/12 BROW	2250211510 - 5502203	Contin Education-State Alloc - Const Pct 3 Cont Ed Exp	100 00
4/29-5/2/12 RUBE	2250211510 - 5502203	Contin Education-State Alloc - Const Pct 3 Cont Ed Exp	100 00
		Warrant Total:	**200.00**
		FUND 2250 TOTAL:	**200.00**

FUND: 2260 Emergency Management Fund

Warrant #: VW 00351479	**Payee Name: U S ARMY CORPS OF ENGINEERS**		
HMGP WILMINGTON2260291044 - 5481000		Corps of Engineers Feasib Stdy - Contract Service	90,093 44
		Warrant Total:	**90,093.44**
		FUND 2260 TOTAL:	**90,093.44**

FUND: 2301 Road & Bridge Fund

Warrant #: VW 00000329	**Payee Name: KEYWORTHS HARDWARE INC**		
00014694 111711	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	22 99
00015671 112311	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	4 30
00019314	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	15 98

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Invoice Number	Account Info		Amount
		Warrant Total:	**43.27**
Warrant #: VW 00351292	**Payee Name: BAYGAS INC**		
9291	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	72 90
		Warrant Total:	**72.90**
Warrant #: VW 00351325	**Payee Name: CLEVELAND ASPHALT PRODUCTS INC**		
10103	2301312120 - 5353011	FM & Lateral Road - Road Oils & Emulsions	10,724 89
		Warrant Total:	**10,724.89**
Warrant #: VW 00351341	**Payee Name: DIAMOND HYDRAULICS INC**		
08102	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	1,460 21
33256	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	1,415 97
G45990	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	270 55
		Warrant Total:	**3,146.73**
Warrant #: VW 00351350	**Payee Name: ELECTRONIC SUPPLY COMPANY INC**		
104007	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	138 01
		Warrant Total:	**138 01**
Warrant #: VW 00351367	**Payee Name: GOVDEALS INC**		
918092011	2301000000 - 2295011	Road and Bridge Fund - Due to Website Auctioneer	2,832 08
		Warrant Total:	**2,832.08**
Warrant #: VW 00351371	**Payee Name: HOME DEPOT**		
7053303	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	72 00
		Warrant Total:	**72.00**
Warrant #: VW 00351386	**Payee Name: KLEEN JANITORIAL SUPPLY COMPANY**		
1817	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	72 96
		Warrant Total:	**72.96**
Warrant #: VW 00351389	**Payee Name. LANSDOWNE MOODY CO LP**		
IW67781	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	266 47
		Warrant Total:	**266.47**
Warrant #: VW 00351392	**Payee Name: LIGGIOS TIRE AND SERVICE CENTER INC**		
181618	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	39 75
		Warrant Total:	**39.75**
Warrant #: VW 00351413	**Payee Name: MUNRO'S UNIFORM SERVICES LTD**		
69043	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	67 00
69832	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	59 00
70098	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	6 50
70099	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	56 00
70100	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	32 55
70101	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	37 00
70103	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	67 00
70908	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	59 00
70910	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	6 54
71166	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	32 50
71167	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	6 50

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Invoice Number	Account Info		Amount
71168	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	56 00
71169	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	32 55
71170	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	37 00
71171	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	51 75
71172	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	67 00
71943	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	59 00
71945	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	6 50
72202	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	32 50
72203	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	6 50
72204	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	56 00
72205	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	32 55
72206	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	37 00
72207	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	51 75
72208	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	67 00
73019	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	59 00
73021	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	6 50
		Warrant Total:	**1,088.19**
Warrant #: VW 00351414	**Payee Name: MUSTANG RENTAL SERVICES INC**		
01104515	2301312120 - 5426100	FM & Lateral Road - Equipment Rental/Lease	1,988 23
		Warrant Total.	**1,988.23**
Warrant #: VW 00351415	**Payee Name: MUSTANG TRACTOR & EQUIPMENT CO**		
PART3114558	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	71 27
		Warrant Total:	**71.27**
Warrant #: VW 00351423	**Payee Name: OWEN ELECTRIC SUPPLY**		
3975441218	2301312110 - 5424000	Administration - Maint & Repairs Buildings	144 00
		Warrant Total:	**144.00**
Warrant #: VW 00351424	**Payee Name: OZARKA NATURAL SPRING WATER**		
01LO122815046	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	52 73
		Warrant Total:	**52.73**
Warrant #: VW 00351426	**Payee Name: PAT'S**		
00028408	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	39 00
		Warrant Total:	**39 00**
Warrant #: VW 00351429	**Payee Name: PENINSULA SANITATION SERVICE INC**		
43784	2301312120 - 5421411	FM & Lateral Road - Garbage/Landfill Services	75 00
		Warrant Total.	**75.00**
Warrant #: VW 00351437	**Payee Name: PROLINE MATERIALS INC**		
4222	2301312120 - 5353015	FM & Lateral Road - Materials Asphalt Surface	5,702 75
		Warrant Total:	**5,702.75**
Warrant #: VW 00351440	**Payee Name: R B EVERETT & CO**		
SI41817	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	147 34
VI015436	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	687 25
		Warrant Total:	**834.59**
Warrant #: VW 00351447	**Payee Name: SANTA FE AUTO PARTS INC**		

Invoice Number	Account Info		Amount
74772	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	917 35
75318	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	88 25
75779	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	51 80
		Warrant Total:	**1,057.40**
Warrant #: VW 00351451	**Payee Name: SHERWIN WILLIAMS PAINT CORP**		
28057	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	9 99
		Warrant Total:	**9.99**
Warrant #: VW 00351456	**Payee Name: SOUTHEAST TEXAS ASSOCIATION OF PUBLIC**		
2012 SOWA RNWL	2301312110 - 5496100	Administration - Travel	40 00
		Warrant Total:	**40.00**
Warrant #: VW 00351458	**Payee Name: SOUTHWEST GALVANIZING INC**		
287066	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	809 89
		Warrant Total:	**809.89**
Warrant #. VW 00351459	**Payee Name: SOUTHWEST T & I INC**		
1946144	2301312110 - 5481000	Administration - Contract Service	243 60
		Warrant Total·	**243.60**
Warrant #· VW 00351467	**Payee Name: SUN COAST RESOURCES INC**		
91133087	2301312120 - 5315010	FM & Lateral Road - Oils and Lubricants	1,685 75
91135569	2301312120 - 5322010	FM & Lateral Road - Auto Fuel Expense	4,401 51
91137624	2301312120 - 5322010	FM & Lateral Road - Auto Fuel Expense	10,546 65
91139283	2301312120 - 5322010	FM & Lateral Road - Auto Fuel Expense	10,459 60
		Warrant Total:	**27,093.51**
Warrant #: VW 00351471	**Payee Name: TEXAS AGRILIFE EXTENSION**		
012012 GALV R&B	2301312110 - 5496100	Administration - Travel	245 00
		Warrant Total:	**245.00**
Warrant #: VW 00351485	**Payee Name: VULCAN CONSTRUCTION MATERIALS LP**		
218443	2301312120 - 5353015	FM & Lateral Road - Materials Asphalt Surface	3,386 90
		Warrant Total.	**3,386.90**
		FUND 2301 TOTAL:	**60,291.11**

FUND: 2370 Flood Control Fund

Warrant #: VW 00000329	**Payee Name: KEYWORTHS HARDWARE INC**		
00018971	2370296121 - 5310000	Seawall Maintenance - Supplies and Materials	18 77
		Warrant Total:	**18.77**
Warrant #· VW 00351292	**Payee Name: BAYGAS INC**		
069201	2370296121 - 5310000	Seawall Maintenance - Supplies and Materials	433 45
		Warrant Total:	**433.45**
Warrant #: VW 00351303	**Payee Name: BROOKSIDE EQUIP SALES INC**		
IL27463	2370296100 - 5310001	Flood Control - Depart Supplies-Non Cap FFE	12,976 83
		Warrant Total:	**12,976.83**

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Invoice Number	Account Info		Amount
Warrant #: VW 00351315	**Payee Name: CHERRY CRUSHED CONCRETE**		
143635	2370296100 - 5353013	Flood Control - Materials Culverts/Bridges	354 98
		Warrant Total:	**354.98**
Warrant #: VW 00351326	**Payee Name: CMC STEEL FABRICATORS INC**		
410769	2370296121 - 5425801	Seawall Maintenance - Galv Seawall Sidewalk Maint	41 85
		Warrant Total:	**41.85**
Warrant #: VW 00351334	**Payee Name: CRESCENT ENGINEERING COMPANY INC**		
L3008	2370296121 - 5481000	Seawall Maintenance - Contract Service	148 54
		Warrant Total:	**148.54**
Warrant #: VW 00351423	**Payee Name: OWEN ELECTRIC SUPPLY**		
3975441224	2370296121 - 5423401	Seawall Maintenance - Maint/Repairs Pumps & Gates	69 26
		Warrant Total:	**69.26**
Warrant #: VW 00351424	**Payee Name: OZARKA NATURAL SPRING WATER**		
01L0122815095	2370296121 - 5310000	Seawall Maintenance - Supplies and Materials	44 75
		Warrant Total:	**44.75**
Warrant #. VW 00351457	**Payee Name: SOUTHERN CRUSHED CONCRETE LLC**		
201121343	2370296100 - 5353013	Flood Control - Materials Culverts/Bridges	8,386 84
		Warrant Total:	**8,386.84**
Warrant #: VW 00351486	**Payee Name: WEIMAR INDUSTRIES INC**		
3946	2370296121 - 5423401	Seawall Maintenance - Maint/Repairs Pumps & Gates	365 00
		Warrant Total:	**365.00**
		FUND 2370 TOTAL:	**22,840.27**

FUND: 2410 Mosquito Control District Fund

Warrant #: VW 00000329	**Payee Name: KEYWORTHS HARDWARE INC**		
000110870	2410411100 - 5424000	Mosquito Control District - Maint & Repairs Buildings	18 32
		Warrant Total:	**18.32**
Warrant #: VW 00351284	**Payee Name: AMERICAN MOSQUITO CONTROL**		
2/26-3/1/12	2410411100 - 5496100	Mosquito Control District - Travel	250 00
		Warrant Total.	**250.00**
Warrant # VW 00351288	**Payee Name: AUTOZONE INC**		
1579568590	2410411100 - 5310000	Mosquito Control District - Supplies and Materials	42 27
157957174001	2410411100 - 5310000	Mosquito Control District - Supplies and Materials	137 74
157957224208	2410411100 - 5310000	Mosquito Control District - Supplies and Materials	5 99
1579581019	2410411100 - 5310000	Mosquito Control District - Supplies and Materials	41 45
		Warrant Total:	**227.45**
Warrant #: VW 00351316	**Payee Name: CITY OF DICKINSON**		
12/31/12 RENEWAL	2410411100 - 5481000	Mosquito Control District - Contract Service	20 00
		Warrant Total:	**20.00**

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Invoice Number	Account Info		Amount
Warrant #. VW 00351377	**Payee Name: JOHNSON AUTOMOTIVE SUPPLY AND PAINT**		
274447	2410411100 - 5310000	Mosquito Control District - Supplies and Materials	210 34
		Warrant Total·	**210.34**
Warrant #: VW 00351470	**Payee Name: TEX AIR PARTS INC**		
727997	2410411100 - 5310000	Mosquito Control District - Supplies and Materials	554 04
		Warrant Total:	**554.04**
		FUND 2410 TOTAL:	**1,280.15**

FUND: 2601 Beach & Parks Fund

Warrant #· VW 00351413	**Payee Name: MUNRO'S UNIFORM SERVICES LTD**		
70906	2601522042 - 5312101	Beach Maintenance - Uniform Expense	4 25
		Warrant Total:	**4 25**
Warrant #· VW 00351416	**Payee Name: NB GRAPHICS LLC**		
21235	2601522042 - 5310000	Beach Maintenance - Supplies and Materials	40 00
		Warrant Total:	**40.00**
		FUND 2601 TOTAL:	**44.25**

FUND: 2824 Adult Probation Community

Warrant #: VW 00351277	**Payee Name: ADULT PSYCHIATRIC CLINIC**		
NOV 2011	2824255136 - 5481000	Sex Offender Supervision - Contract Service	3,540 00
		Warrant Total:	**3,540.00**
Warrant #: VW 00351408	**Payee Name: MILLER, JARVIS**		
NOV 2011 MLG	2824255110 - 5496301	Special Substance Abuse - Auto Mileage	97 92
		Warrant Total:	**97.92**
		FUND 2824 TOTAL:	**3,637.92**

FUND: 2841 Juvenile Probation-State Aid

Warrant #: VW 00351297	**Payee Name: BLOW, ADRIENNE M**		
DEC 2011 MLG	2841256110 - 5496301	State Aid Grant A - Auto Mileage	92 13
		Warrant Total:	**92 13**
Warrant #: VW 00351381	**Payee Name: JOSEPH, JUNE**		
DEC 2011 MLG	2841256124 - 5496301	Co Cash Match - St Aid A - Auto Mileage	168 17
		Warrant Total:	**168.17**
		FUND 2841 TOTAL:	**260.30**

FUND: 2848 Juv Jst Alt Education Program

Warrant #: VW 00351331 **Payee Name: COLLEGE OF THE MAINLAND**

Invoice Number	Account Info		Amount
000521216	2848256144 - 5495095	Commitment Reduction Program C - Educational Programs	1,083 33
		Warrant Total:	**1,083.33**
		FUND 2848 TOTAL:	**1,083.33**

FUND: 2864 Auto Crimes Task Force Grant

Warrant #: VW 00351367 **Payee Name: GOVDEALS INC**

918092011	2864000000 - 2295011	Galv Co Auto Crimes Task Force - Due to Website Auctionee	527 63
		Warrant Total:	**527.63**
		FUND 2864 TOTAL:	**527.63**

FUND: 2894 EECBG - Program

Warrant #. VW 00351370 **Payee Name: HOFFMAN ENGINEERING GROUP INC**

2011GCA2	2894170103 - 5410000	EECBG - Program - Professional Services	2,600 00
		Warrant Total:	**2,600.00**
		FUND 2894 TOTAL:	**2,600.00**

FUND: 2914 CDBG Housing Program

Warrant #: VW 00351282 **Payee Name: AMERICAN HOME BUILDERS INC.**

IA1265701	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,740 89
IA1265701	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	37,408 93
JE1187101	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,215 91
JE1187101	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	42,159.12
MCC1238301	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,430 89
MCC1238301	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	34,308 93
MJ1286901	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,401 20
MJ1286901	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	34,012 00
PS1247301	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,740 89
PS1247301	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	37,408 93
RE1286502	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,739 03
RE1286502	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	37,390 33
		Warrant Total.	**200,419.43**

Warrant #. VW 00351283 **Payee Name: AMERICAN HOMESTAR CORPORATION**

1056	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-16,348 30
1056	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	130,595 00
1056	2914152514 - 5519010	Ownr-Occupied Elevation - Contractor - Construction	32,888 00
1061	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-12,542 60
1061	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	102,310 00
1061	2914152514 - 5519010	Ownr-Occupied Elevation - Contractor - Construction	23,116 00
1063	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-11,928 30
1063	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	119,283 00
		Warrant Total:	**367,372.80**

Warrant #: VW 00351290 **Payee Name: B&MS CONSTRUCTION INC**

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Invoice Number	Account Info		Amount
BMSHCGC16	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-5,961 08
BMSHCGC16	2914152511 - 5519010	Ownr-Occupied Rehab - Contractor - Construction	59,610 76
		Warrant Total:	**53,649.68**
Warrant #: VW 00351304		**Payee Name: BURGHLI HOMES PROMENADE HOMES JV**	
1228566	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,594 53
1228566	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	35,945 27
1243366	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,538 99
1243366	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	45,389 94
1283666	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-7,958 46
1283666	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	79,584 59
		Warrant Total:	**144,827.82**
Warrant #: VW 00351305		**Payee Name: BYRDSON SERVICES LLC**	
345F	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,496 17
345F	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	34,961 66
35066	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,560 29
35066	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	35,602 86
352F	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-2,385 31
352F	2914152511 - 5519010	Ownr-Occupied Rehab - Contractor - Construction	23,853 05
353F	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-2,417 69
353F	2914152511 - 5519010	Ownr-Occupied Rehab - Contractor - Construction	24,176 95
355F	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-2,277 49
355F	2914152511 - 5519010	Ownr-Occupied Rehab - Contractor - Construction	22,774 95
		Warrant Total:	**127,232.52**
Warrant #: VW 00351346		**Payee Name: DSW HOMES LLC**	
111314	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,144 85
111314	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	41,448 53
112262	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-5,691 15
112262	2914152511 - 5519010	Ownr-Occupied Rehab - Contractor - Construction	56,911 50
112378	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,110 99
112378	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	41,109 87
112858	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,394 85
112858	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	43,948 53
112934	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,379 85
112934	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	33,798 45
211537	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-5,240 15
211537	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	52,401 53
212378	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,110 99
212378	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	41,109 87
212854	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,171 29
212854	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	41,712 90
310650	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,244 52
310650	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	22,345 20
310650	2914152514 - 5519010	Ownr-Occupied Elevation - Contractor - Construction	20,100 00
410839	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	18,765 06
412324	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	12,803 90
412498	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	10,434 99
412742	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	12,044 40
		Warrant Total	**409,446 09**
Warrant #: VW 00351375		**Payee Name: JAHN-GALVESTON INSURANCE AGENCY INC**	

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Invoice Number	Account Info		Amount
22735 121611	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	5,110 92
22857 122711	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,442 00
22858 122011	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,064 00
22864 122711	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,100 01
22868 122811	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,002 00
22869 122211	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,318 00
22873 121911	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,008 00
22881 122711	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,090 00
22882 121911	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,095 00
22883 122211	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,008 00
22884 122011	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,165 00
22889 122811	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	577 01
22896 122711	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,897 00
22898 122711	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,557 01
22902 122711	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,068 00
22903 122211	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,184 00
22904 122911	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	903 00
22905 122211	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,123 00
22906 122211	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,461 00
22907 122711	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,154 01
22909 122711	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,063 00
22926 122911	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,079 00
		Warrant Total:	**29,468.96**
Warrant #: VW 00351463		**Payee Name: SULLIVAN LAND SERVICES LTD**	
2011803	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	10,084 85
2011858	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-10,516 75
2011858	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	88,060 34
2011858	2914152514 - 5519010	Ownr-Occupied Elevation - Contractor - Construction	17,107 20
2011859	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-7,855 98
2011859	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	78,559 84
2011860	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-6,111 42
2011860	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	51,254 23
2011860	2914152514 - 5519010	Ownr-Occupied Elevation - Contractor - Construction	9,860 00
2011880	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-7,214 35
2011880	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	72,143 45
2011884	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-7,744 48
2011884	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	77,444 83
2011885	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-5,546 51
2011885	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	46,652 29
2011885	2914152514 - 5519010	Ownr-Occupied Elevation - Contractor - Construction	8,812 80
		Warrant Total.	**414,990.34**
Warrant #: VW 00351469		**Payee Name: TEGRITY HOMES, LLC**	
12400 FINAL	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-6,857 36
12400 FINAL	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	68,573.63
		Warrant Total:	**61,716.27**
Warrant #: VW 00351488		**Payee Name: WESTMORELAND INSURANCE**	
2561	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	807 00
		Warrant Total:	**807.00**

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Invoice Number	Account Info		Amount
		FUND 2914 TOTAL:	**1,809,930.91**

FUND: 2921 Senior Citizens Grant Prog

Warrant #: VW 00351483 **Payee Name: VALLEY SERVICES INC**

IVC157395	2921451156 - 5448116	Title IIIC - Raw Food/Home Delivered	2,778 23
IVC157395	2921451156 - 5448117	Title IIIC - Raw Food/Congregate	1,745 80
IVC157397	2921451156 - 5448116	Title IIIC - Raw Food/Home Delivered	4,707 45
IVC157712	2921451156 - 5448116	Title IIIC - Raw Food/Home Delivered	3,246 84
IVC157712	2921451156 - 5448117	Title IIIC - Raw Food/Congregate	1,657 63
IVC157713	2921451156 - 5448116	Title IIIC - Raw Food/Home Delivered	4,916 67
IVC157949	2921451156 - 5448116	Title IIIC - Raw Food/Home Delivered	3,590 93
IVC157949	2921451156 - 5448117	Title IIIC - Raw Food/Congregate	1,721 72
IVC157950	2921451156 - 5448116	Title IIIC - Raw Food/Home Delivered	5,068 83
IVC158211	2921451156 - 5448116	Title IIIC - Raw Food/Home Delivered	2,224 39
IVC158211	2921451156 - 5448117	Title IIIC - Raw Food/Congregate	1,264 20
IVC158212	2921451156 - 5448116	Title IIIC - Raw Food/Home Delivered	3,024 18
IVC158668	2921451156 - 5448116	Title IIIC - Raw Food/Home Delivered	2,212 35
IVC158668	2921451156 - 5448117	Title IIIC - Raw Food/Congregate	1,167 88
IVC158670	2921451156 - 5448116	Title IIIC - Raw Food/Home Delivered	3,303 14
		Warrant Total:	**42,630.24**
		FUND 2921 TOTAL:	**42,630.24**

FUND: 3100 County Capital Projects Fund

Warrant # VW 00351348 **Payee Name: EDOCUMENT RESOURCES LLC**

502763	3100159126 - 5754095	IT Capital Projects - Imaging	6,670 00
		Warrant Total:	**6,670.00**
		FUND 3100 TOTAL:	**6,670.00**

FUND: 3120 Limited Tax Cnty Bldg Bds Sr09

Warrant #: VW 00351336 **Payee Name: DATAVOX INC.**

DS142451	3120179135 - 5746010	Mid-County Annex - Capitalized Furn,Fix,& Equip	87,808 89
		Warrant Total:	**87,808.89**
		FUND 3120 TOTAL:	**87,808.89**

FUND: 3312 Unltd Tax Road Bonds Sr 2009

Warrant #: VW 00351395 **Payee Name: LTRA**

HENG09106H341	3312312112 - 5731138	County Road - Lawrence Rd	8,112 50
		Warrant Total:	**8,112.50**

Warrant #. VW 00351427 **Payee Name: PATE ENGINEERS INC**

0118715	3312312111 - 5731125	Non-County Roads - Hanson Road	315 70
0118724	3312312111 - 5731126	Non-County Roads - Owens Drive	23,350 48

Invoice Number	Account Info		Amount
		Warrant Total:	**23,666.18**
Warrant #: VW 00351450	**Payee Name: SHELMARK ENGINEERING L.L.C.**		
4681	3312312111 - 5731165 Non-County Roads - Caroline		3,690 81
		Warrant Total:	**3,690.81**
		FUND 3312 TOTAL:	**35,469.49**

FUND: 3315 Galv Causeway RR Bridge Proj

Warrant #: VW 00351438	**Payee Name: Q C LABORATORIES INC**		
1139182	3315313200 - 5722903 Causeway Railroad Bridge Prj - Owners Contingency		324 00
		Warrant Total:	**324.00**
		FUND 3315 TOTAL:	**324.00**

FUND: 6123 Group,Wrks'Comp,Unemplmnt Ins

Warrant #: VW 00351308	**Payee Name: CAREHERE LLC**		
6677	6123155021 - 5417208 Group Insurance - CareHere Supplemental Fee		27,632 84
6678	6123155021 - 5417208 Group Insurance - CareHere Supplemental Fee		20,996 40
		Warrant Total:	**48,629.24**
		FUND 6123 TOTAL:	**48,629.24**

FUND: 6130 Self Insurance Reserve Fund

Warrant #: VW 00351312	**Payee Name: CENTERPOINT ENERGY**		
101510 DAMAGE	6130151431 - 5491503 General Self Insurance - Claims Liability		5,860 11
		Warrant Total:	**5,860.11**
		FUND 6130 TOTAL:	**5,860.11**

FUND: 7605 Escrow Fund

Warrant #: VW 00351294	**Payee Name: BETTISON DOYLE APFFEL & GUARINO PC**		
RESALES 31 91111	7605000000 - 2490696 Escrow Fund - Resale 07TX0367		233 99
		Warrant Total:	**233.99**
Warrant #: VW 00351296	**Payee Name: BIRR INC**		
308275 REST	7605000000 - 2473030 Escrow Fund - CO Crt Restit-Due to Victims		765 00
		Warrant Total:	**765.00**
Warrant #: VW 00351319	**Payee Name: CITY OF LA MARQUE**		
RESALES 32 91111	7605000000 - 2490699 Escrow Fund - Resale 05TX0945		2,000 00
		Warrant Total:	**2,000.00**
Warrant #: VW 00351329	**Payee Name: COCHRAN, WINSTON E JR**		
RESALES 31 91111	7605000000 - 2490694 Escrow Fund - Resale 05TX0589		437 74

Galveston County, Texas

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Invoice Number	Account Info		Amount
		Warrant Total:	**437.74**
Warrant #: VW 00351359	**Payee Name: GALVESTON COUNTY**		
RESALES 32 91111	7605000000 - 2490698	Escrow Fund - Resale 03TX0279	1,500 00
RESALES 32 91111	7605000000 - 2490701	Escrow Fund - Resale 07TX0256	1,500 00
		Warrant Total:	**3,000 00**
Warrant #: VW 00351363	**Payee Name: GELB, JEFFREY**		
RESALES 31 91111	7605000000 - 2490695	Escrow Fund - Resale 05TX0687	423 12
		Warrant Total:	**423.12**
Warrant #: VW 00351369	**Payee Name: HINDMAN, MARGARET**		
RESALES 32 91111	7605000000 - 2490702	Escrow Fund - Resale 08TX0662	500 00
		Warrant Total:	**500.00**
Warrant #: VW 00351378	**Payee Name: JOHNSON, CHERYL**		
RESALES 30 91111	7605000000 - 2490687	Escrow Fund - Resale 89TX0433	1,561 10
RESALES 30 91111	7605000000 - 2490688	Escrow Fund - Resale 04TX0411	12,848 59
RESALES 30 91111	7605000000 - 2490689	Escrow Fund - Resale 06TX1037	4,795 92
RESALES 30 91111	7605000000 - 2490690	Escrow Fund - Resale 09TX0314	105 66
RESALES 30 91111	7605000000 - 2490692	Escrow Fund - Resale 09TX0356	13,511 80
RESALES 31 91111	7605000000 - 2490697	Escrow Fund - Resale 09TX0481	1,625 48
RESALES 32 91111	7605000000 - 2490700	Escrow Fund - Resale 06TX0641	3,415 44
RESALES 32 91111	7605000000 - 2490702	Escrow Fund - Resale 08TX0662	390 10
		Warrant Total:	**38,254.09**
Warrant #: VW 00351384	**Payee Name: KELLY, MARK**		
RESALE 30 91111	7605000000 - 2490690	Escrow Fund - Resale 09TX0314	500 00
		Warrant Total:	**500.00**
Warrant #: VW 00351388	**Payee Name: KOVACEVICH, KIMBERLY**		
99710	7605000000 - 2473030	Escrow Fund - CO Crt Restit-Due to Victims	200 00
		Warrant Total:	**200.00**
Warrant #: VW 00351396	**Payee Name: LYN WINGERT & ASSOCIATES**		
RESALES 30 91111	7605000000 - 2490688	Escrow Fund - Resale 04TX0411	250 00
RESALES 30 91111	7605000000 - 2490689	Escrow Fund - Resale 06TX1037	250 00
RESALES 30 91111	7605000000 - 2490690	Escrow Fund - Resale 09TX0314	250 00
RESALES 30 91111	7605000000 - 2490691	Escrow Fund - Resale 09TX0332	139 63
RESALES 30 91111	7605000000 - 2490692	Escrow Fund - Resale 09TX0356	250 00
RESALES 32 91111	7605000000 - 2490700	Escrow Fund - Resale 06TX0641	250 00
RESALES 32 91111	7605000000 - 2490702	Escrow Fund - Resale 08TX0662	250 00
		Warrant Total.	**1,639 63**
Warrant #: VW 00351405	**Payee Name: MCCARNES, LOIS**		
RESALES 30 91111	7605000000 - 2490688	Escrow Fund - Resale 04TX0411	500 00
RESALES 30 91111	7605000000 - 2490689	Escrow Fund - Resale 06TX1037	500 00
RESALES 30 91111	7605000000 - 2490691	Escrow Fund - Resale 09TX0332	279 25
		Warrant Total:	**1,279.25**
Warrant #: VW 00351421	**Payee Name: OMNI BASE SERVICES INC**		
OCT-DEC 11 JP5	7605000000 - 2472050	Escrow Fund - Omnibase Ser Liability	846 00

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Invoice Number	Account Info			Amount
			Warrant Total:	**846.00**
Warrant #. VW 00351434		**Payee Name: POOR, SHERIFF FREDDIE**		
RESALES 31 9-11	7605000000 - 2490694	Escrow Fund - Resale 05TX0589		318 68
RESALES 31 9-11	7605000000 - 2490695	Escrow Fund - Resale 05TX0687		475 51
RESALES 31 9-11	7605000000 - 2490696	Escrow Fund - Resale 07TX0367		339 82
RESALES 31 9-11	7605000000 - 2490697	Escrow Fund - Resale 09TX0481		688 52
			Warrant Total:	**1,822.53**
Warrant #: VW 00351435		**Payee Name: POOR, SHERIFF FREDDIE**		
RESALES 30 9-11	7605000000 - 2490687	Escrow Fund - Resale 89TX0433		207 90
RESALES 30 9-11	7605000000 - 2490688	Escrow Fund - Resale 04TX0411		1,795 41
RESALES 30 9-11	7605000000 - 2490689	Escrow Fund - Resale 06TX1037		627 08
RESALES 30 9-11	7605000000 - 2490690	Escrow Fund - Resale 09TX0314		583 34
RESALES 30 9-11	7605000000 - 2490691	Escrow Fund - Resale 09TX0332		384 55
RESALES 30 9-11	7605000000 - 2490692	Escrow Fund - Resale 09TX0356		576 20
			Warrant Total:	**4,174.48**
Warrant #: VW 00351464		**Payee Name: SULLIVAN, DWIGHT D**		
RESALES 32 9-11	7605000000 - 2490700	Escrow Fund - Resale 06TX0641		20 00
RESALES 32 9-11	7605000000 - 2490702	Escrow Fund - Resale 08TX0662		20 00
			Warrant Total:	**40.00**
Warrant #: VW 00351465		**Payee Name: SULLIVAN, DWIGHT D**		
RESALES 31 9-11	7605000000 - 2490694	Escrow Fund - Resale 05TX0589		20 00
RESALES 31 9-11	7605000000 - 2490695	Escrow Fund - Resale 05TX0687		20 00
RESALES 31 9-11	7605000000 - 2490696	Escrow Fund - Resale 07TX0367		20 00
RESALES 31 9-11	7605000000 - 2490697	Escrow Fund - Resale 09TX0481		20 00
			Warrant Total:	**80.00**
Warrant #: VW 00351466		**Payee Name: SULLIVAN, DWIGHT D**		
RESALES 30 9-11	7605000000 - 2490687	Escrow Fund - Resale 89TX0433		20 00
RESALES 30 9-11	7605000000 - 2490688	Escrow Fund - Resale 04TX0411		20 00
RESALES 30 9-11	7605000000 - 2490689	Escrow Fund - Resale 06TX1037		20 00
RESALES 30 9-11	7605000000 - 2490690	Escrow Fund - Resale 09TX0314		20 00
RESALES 30 9-11	7605000000 - 2490691	Escrow Fund - Resale 09TX0332		20 00
RESALES 30 9-11	7605000000 - 2490692	Escrow Fund - Resale 09TX0356		20 00
			Warrant Total:	**120.00**
Warrant #: VW 00351475		**Payee Name: TEXAS PARKS AND WILDLIFE DEPT**		
DEC 11 JP5 FEES	7605000000 - 2476007	Escrow Fund - Tx Parks & Wildlife Fines 85%		526 15
			Warrant Total.	**526.15**
			FUND 7605 TOTAL:	**56,841.98**

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Summary of All Funds

Fund		Amount
1101	General Fund	329,464 10
2131	DA Seized Funds Afte Aft 10/89	302 37
2212	Mediation Services Prog Fund	1,860 00
2220	Adult Probation Fund	478 13
2230	Juvenile Justice Fund	9,717 25
2242	Sheriff's Seizure Aft 10/89	4,443 95
2250	Law Enforcement Education Fund	200 00
2260	Emergency Management Fund	90,093 44
2301	Road & Bridge Fund	60,291 11
2370	Flood Control Fund	22,840 27
2410	Mosquito Control District Fund	1,280 15
2601	Beach & Parks Fund	44 25
2824	Adult Probation Community	3,637 92
2841	Juvenile Probation-State Aid	260 30
2848	Juv Jst Alt Education Program	1,083 33
2864	Auto Crimes Task Force Grant	527 63
2894	EECBG - Program	2,600 00
2914	CDBG Housing Program	1,809,930 91
2921	Senior Citizens Grant Prog	42,630 24
3100	County Capital Projects Fund	6,670 00
3120	Limited Tax Cnty Bldg Bds Sr09	87,808 89
3312	Unltd Tax Road Bonds Sr 2009	35,469 49
3315	Galv Causeway RR Bridge Proj	324 00
6123	Group,Wrks'Comp,Unemplmnt Ins	48,629 24
6130	Self Insurance Reserve Fund	5,860 11
7605	Escrow Fund	56,841.98
	Grand Total:	**2,623,289.06**

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/03/2012

Approved Order to pay by Commissioners Court this day January 10, 2012

Cliff Billingsley

Cliff Billingsley, County Auditor

absent

Mark A. Henry, Galveston County Judge

Patrick Doyle, Galveston County Commissioner, Pct 1

Kevin D. O'Brien, Galveston County Commissioner, Pct 2

Stephen D. Holmes, Galveston County Commissioner, Pct 3

Kenneth Clark, Galveston County Commissioner, Pct 4

ATTEST:

Dwight D. Sullivan, County Clerk

By: Brandy Chapman Deputy

Brandy Chapman

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351275	711149	A B SIGN SHOP	01/03/12	89 35	MW	OH		
A200351276	702471	ABL MANAGEMENT INC	01/03/12	40,269 46	MW	OH		
A200351277	432263	ADULT PSYCHIATRIC CLINIC	01/03/12	3 540 00	MW	OH		
A200351278	VOID CONTINU	Void - Continued Stub	01/03/12	0 00	VM	OH		Void
A200351279	013524	ALERT ALARM BURG AND FIRE PRO	01/03/12	5,332 67	MW	OH		
A200351280	410317	ALIHOSSINI SAM	01/03/12	550 00	MW	OH		
A200351281	709623	AMBIT ENERGY LP	01/03/12	100 00	MW	OH		
A200351282	711832	AMERICAN HOME BUILDERS INC	01/03/12	200 419 43	MW	OH		
A200351283	711548	AMERICAN HOMESTAR CORPOPATION	01/03/12	367,372 80	MW	OH		
A200351284	703048	AMERICAN MOSQUITO CONTROL ASS	01/03/12	250 00	MW	OH		
A200351285	702478	AMERSON RODGER DAN	01/03/12	200 00	MW	OH	B7	
A200351286	708317	ARTISTIC FRAMING	01/03/12	629 80	MW	OH		
A200351287	704822	AUDIO VISUAL TECHNOLGIES GROU	01/03/12	860 00	MW	OH		
A200351288	712485	AUTOZONE INC	01/03/12	227 45	MW	OH		
A200351289	713283	AVT TITLE SERVICES LLC	01/03/12	24 00	MW	OH		
A200351290	712112	B&MS CONSTRUCTION INC	01/03/12	53,649 68	MW	OH		
A200351291	404746	BAR ASSOCIATION OF THE FIFTH	01/03/12	60 00	MW	OH		
A200351292	026047	BAYGAS INC	01/03/12	506 35	MW	OH		
A200351293	712019	BELL, PAULA	01/03/12	40 80	MW	OH		
A200351294	704994	BETTISON DOYLE APFFEL & GUARI	01/03/12	233 99	MW	OH		
A200351295	711266	BETTISON DOYLE APFFEL & GUARI	01/03/12	56 00	MW	OH		
A200351296	714150	BIRR INC	01/03/12	765 00	MW	OH		
A200351297	700014	BLOW, ADRIENNE M	01/03/12	92 13	MW	OH		
A200351298	021303	BOB BARKER CO INC	01/03/12	131 49	MW	OH		
A200351299	401759	BOSWORTH PAPERS INC	01/03/12	351 06	MW	OH		
A200351300	710439	BOYD PHD JENINE COLLINS	01/03/12	1,500 00	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351301	432192	BOZEMAN, KELLY	01/03/12	42 33	MW	OH		
A200351302	024091	BROADWAY DRUG STORE	01/03/12	10 64	MW	OH		
A200351303	024240	BROOKSIDE EQUIP SALES INC	01/03/12	12,976 83	MW	OH		
A200351304	712308	BURGHLI HOMES PROMENADE HOMES	01/03/12	144,827 82	MW	OH		
A200351305	711146	BYRDSON SERVICES LLC	01/03/12	127,232 52	MW	OH		
A200351306	714187	C & A ASSOCIATES INC	01/03/12	2 080 00	MW	OH		
A200351307	714163	CADDO MINERALS INC	01/03/12	5 00	MW	OH		
A200351308	708822	CAREHERE LLC	01/03/12	48,629 24	MW	OH		
A200351309	031047	CARMONA FRANK	01/03/12	5,115 37	MW	OH	B7	
A200351310	701478	CDW GOVERNMENT INC	01/03/12	1,060 81	MW	OH		
A200351311	706933	CEDRICK L MUHAMMAD PC	01/03/12	471 25	MW	OH	B7	
A200351312	407782	CENTERPOINT ENERGY	01/03/12	5,860 11	MW	OH		
A200351313	714180	CENTURY OAKS TITLE	01/03/12	16 00	MW	OH		
A200351314	702429	CHAIR TAI CHI	01/03/12	280 00	MW	OH		
A200351315	712596	CHERRY CRUSHED CONCRETE	01/03/12	354 98	MW	OH		
A200351316	406676	CITY OF DICKINSON	01/03/12	20 00	MW	OH		
A200351317	033985	CITY OF GALVESTON	01/03/12	200 00	MW	OH		
A200351318	033027	CITY OF HITCHCOCK	01/03/12	74 33	MW	OH		
A200351319	033209	CITY OF LA MARQUE	01/03/12	2,000 00	MW	OH		
A200351320	700433	CITY OF LAMARQUE	01/03/12	42 34	MW	OH		
A200351321	033241	CITY OF LEAGUE CITY	01/03/12	174 12	MW	OH		
A200351322	403085	CITY OF TEXAS CITY	01/03/12	200 00	MW	OH		
A200351323	033290	CLARK, DIANE	01/03/12	2,320 50	MW	OH	B7	
A200351324	712273	CLEMENTS, CLYDE WESLEY	01/03/12	390 00	MW	OH	B7	
A200351325	710180	CLEVELAND ASPHALT PRODUCTS IN	01/03/12	10 724 89	MW	OH		
A200351326	705546	CMC STEEL FABRICATORS INC	01/03/12	41 85	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351327	711054	COBHAM TRACKING & LOCATING	01/03/12	2,510 00	MW	OH		
A200351328	709399	COBURN SUPPLY COMPANY INC	01/03/12	448 12	MW	OH		
A200351329	702713	COCHRAN WINSTON E JR	01/03/12	437 74	MW	OH	B7	
A200351330	714022	COLE WARREN	01/03/12	3 00	MW	OH		
A200351331	034785	COLLEGE OF THE MAINLAND	01/03/12	1 083 33	MW	OH		
A200351332	034223	COLTZER ROBERT G	01/03/12	1,079 65	MW	OH	B7	
A200351333	709565	COMMERCIAL WIRELESS SOLUTIONS	01/03/12	500 00	MW	OH		
A200351334	709896	CRESCENT ENGINEERING COMPANY	01/03/12	290 40	MW	OH		
A200351335	704992	DAHLENBURG, MICHAEL L	01/03/12	2,095 00	MW	OH	B7	
A200351336	700678	DATAVOX INC	01/03/12	87 808 89	MW	OH		
A200351337	710679	DAVISON, AMRI	01/03/12	126 64	MW	OH	B7	
A200351338	406388	DELL MARKETING LP	01/03/12	5,248 50	MW	OH		
A200351339	714155	DENKER, WILLIAM	01/03/12	100 00	MW	OH		
A200351340	711152	DENMORE SERVICES INC	01/03/12	100 00	MW	OH		
A200351341	700546	DIAMOND HYDRAULICS INC	01/03/12	3 146 73	MW	OH		
A200351342	043489	DICKINSON ARMS APT	01/03/12	100 00	MW	OH	RE	
A200351343	043489	DICKINSON ARMS APT	01/03/12	100 00	MW	OH		
A200351344	043216	DICKINSON IND SCHOOL DISTRICT	01/03/12	436 24	MW	OH		
A200351345	043473	DISHER DAVID A	01/03/12	1,007 50	MW	OH	B7	
A200351346	711931	DSW HOMES LLC	01/03/12	409,446 09	MW	OH		
A200351347	045286	DUCOTE JAMES	01/03/12	308 75	MW	OH	B7	
A200351348	712652	EDOCUMENT RESOURCES LLC	01/03/12	6,670 00	MW	OH		
A200351349	713923	EISEN, MYNDE	01/03/12	30 00	MW	OH		
A200351350	053066	ELECTRONIC SUPPLY COMPANY INC	01/03/12	138 01	MW	OH		
A200351351	714157	FAIRFAX, MICHAEL	01/03/12	184 80	MW	OH		
A200351352	409663	FAS CLAMPITT CORPORATION	01/03/12	101 56	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351353	062067	FEDEX CORP	01/03/12	24 80	MW	OH		
A200351354	703810	FIRST CHOICE POWER	01/03/12	102 56	MW	OH		
A200351355	714164	FORECLOSURE SERVICES L L C	01/03/12	7 00	MW	OH		
A200351356	709287	FURLEIGH, FRANCIS W	01/03/12	109 39	MW	OH		
A200351357	402654	G NEIL COMPANIES	01/03/12	334 65	MW	OH		
A200351358	405195	GALVESTON COUNTY SHERIFF'S DE	01/03/12	119 44	MW	OH		
A200351359	071282	GALVESTON COUNTY	01/03/12	3,000 00	MW	OH		
A200351360	708789	GAMMA WASTE SYSTEMS	01/03/12	140 00	MW	OH		
A200351361	071233	GATES MACHINE SHOP	01/03/12	122 00	MW	OH		
A200351362	701571	GELB, JEFFREY	01/03/12	357 50	MW	OH	B7	
A200351363	701571	GELB, JEFFREY	01/03/12	423 12	MW	OH	B7	
A200351364	705936	CEXA CORP	01/03/12	132 53	MW	OH		
A200351365	705919	CHG CORPORATION	01/03/12	475 00	MW	OH		
A200351366	073940	GLASS AND GLAZING INC	01/03/12	1 450 00	MW	OH		
A200351367	708833	GOVDEALS INC	01/03/12	6,481 32	MW	OH		
A200351368	401127	HARRIS COUNTY TREASURER	01/03/12	50 058 00	MW	OH		
A200351369	083501	HINDMAN MARGARET	01/03/12	500 00	MW	OH	B7	
A200351370	712957	HOFFMAN ENGINEERING GROUP INC	01/03/12	2,600 00	MW	OH		
A200351371	409105	HOME DEPOT	01/03/12	72 00	MW	OH		
A200351372	707488	IBRAHIM & ELLIOTT LLP	01/03/12	195 00	MW	OH	B7	
A200351373	714185	INVESTIGATIVE CONCEPTS UNLIMI	01/03/12	1 499 75	MW	OH	B7	
A200351374	714161	J PATRICK COULSON	01/03/12	27 00	MW	OH		
A200351375	409049	JAHN-GALVESTON INSURANCE AGEN	01/03/12	29 468 96	MW	OH		
A200351376	408547	JALUFKA, GAIL	01/03/12	1,713 00	MW	OH	B7	
A200351377	404661	JOHNSON AUTOMOTIVE SUPPLY AND	01/03/12	210 34	MW	OH		
A200351378	707570	JOHNSON, CHERYL	01/03/12	38 254 09	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351379	701979	JONES LAW FIRM	01/03/12	546 00	MW	OH	B7	
A200351380	701243	JONES, STACEY LEE	01/03/12	950 00	MW	OH	B7	
A200351381	400520	JOSEPH, JUNE	01/03/12	168 17	MW	OH		
A200351382	708663	JRL SERVICES LLC	01/03/12	6,150 00	MW	OH		
A200351383	705333	KASSBOHRER ALL TERRAIN VEHIC_	01/03/12	74 86	MW	OH		
A200351384	112110	KELLY MARK	01/03/12	500 00	MW	OH	B7	
A200351385	700067	KILGORE, JEFFREY A	01/03/12	1,310 00	MW	OH	B7	
A200351386	402386	KLEEN JANITORIAL SUPPLY COMPA	01/03/12	1,954 08	MW	OH		
A200351387	713306	KONE INC	01/03/12	1,335 00	MW	OH		
A200351388	714159	KOVACEVICH KIMBERLY	01/03/12	200 00	MW	OH		
A200351389	121053	LANSDOWNE MOODY CO LP	01/03/12	266 47	MW	OH		
A200351390	711359	LAW OFFICE OF DANA V DREXLER	01/03/12	700 00	MW	OH	B7	
A200351391	VOID CONTINU	Void - Continued Stub	01/03/12	0 00	VM	OH		Void
A200351392	123026	LIGGIOS TIRE AND SERVICE CENT	01/03/12	5 563 57	MW	OH		
A200351393	707090	LINEBARGER GOGGAN BLAIR & SAM	01/03/12	1,083 90	MW	OH		
A200351394	713898	LONE STAR FORENSIC ASSOCIATES	01/03/12	495 00	MW	OH		
A200351395	711535	LTRA	01/03/12	8 112 50	MW	OH		
A200351396	709842	LYN WINGERT & ASSOCIATES	01/03/12	1 639 63	MW	OH		
A200351397	713989	MAILFINANCE INC	01/03/12	3,111 83	MW	OH		
A200351398	709125	MALONEY & PARKS LLP	01/03/12	1,072 50	MW	OH	B7	
A200351399	406588	MANGLE CHRISTINE L	01/03/12	488 88	MW	OH	B7	
A200351400	406588	MANGLE, CHRISTINE L	01/03/12	946 44	MW	OH	B7	
A200351401	409430	MARK 1 PLUMBING INC	01/03/12	1,803 50	MW	OH		
A200351402	705424	MASTER WORD SERVICE INC	01/03/12	6,731 24	MW	OH		
A200351403	407317	MATHESON TRI-GAS INC	01/03/12	515 54	MW	OH		
A200351404	705185	MAUZY, BRUCE	01/03/12	2,371 00	MW	OH	B7	

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351405	404930	MCCARNES LOIS	01/03/12	1,279 25	MW	OH	B7	
A200351406	704809	MCCUMBER, JUDGE KATHLEEN	01/03/12	289 00	MW	OH		
A200351407	136689	MCLEOD ALEXANDER POWEL & APFF	01/03/12	461 50	MW	OH	B7	
A200351408	705354	MILLER, JARVIS	01/03/12	97 92	MW	OH		
A200351409	401421	MOODY NATIONAL BANK	01/03/12	93 04	MW	OH		
A200351410	714162	MORRISON, RICHARD P C	01/03/12	45 00	MW	OH		
A200351411	134056	MOTOROLA SOLUTIONS INC	01/03/12	1,433 95	MW	OH		
A200351412	405987	MUELLER, DINAH J	01/03/12	97 50	MW	OH	B7	
A200351413	710385	MUNRO'S UNIFORM SERVICES LTD	01/03/12	1,092 44	MW	OH		
A200351414	406192	MUSTANG RENTAL SERVICES INC	01/03/12	1 988 23	MW	OH		
A200351415	404669	MUSTANG TRACTOR & EQUIPMENT C	01/03/12	71 27	MW	OH		
A200351416	713123	NB GRAPHICS LLC	01/03/12	40 00	MW	OH		
A200351417	410387	NEOPOST USA INC	01/03/12	187 00	MW	OH		
A200351418	714179	NORTH STAR TITLE COMPANY	01/03/12	80 00	MW	OH		
A200351419	711213	NRG ENERGY INC	01/03/12	101 93	MW	OH		
A200351420	704283	OAKS OF HITCHCOCK	01/03/12	100 00	MW	OH		
A200351421	703084	OMNI BASE SERVICES INC	01/03/12	846 00	MW	OH		
A200351422	401873	OTIS ELEVATOR CO CORP	01/03/12	2,913 84	MW	OH		
A200351423	400105	OWEN ELECTRIC SUPPLY	01/03/12	530 52	MW	OH		
A200351424	155036	OZARKA NATURAL SPRING WATER	01/03/12	114 48	MW	OH		
A200351425	711293	PARKS, TAMRA	01/03/12	253 28	MW	OH	B7	
A200351426	409788	PAT'S	01/03/12	39 00	MW	OH		
A200351427	702817	PATE ENGINEERS INC	01/03/12	23 666 18	MW	OH		
A200351428	705136	PENINSULA SANITATION SERVICE	01/03/12	900 00	MW	OH		
A200351429	705136	PENINSULA SANITATION SERVICE	01/03/12	310 00	MW	OH		
A200351430	714177	PGP TITLE INC	01/03/12	20 00	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351431	713921	PGP TITLE	01/03/12	20 00	MW	OH		
A200351432	712071	PIER SYSTEMS INC	01/03/12	1,385 00	MW	OH		
A200351433	714084	PONTIKAS, MAROULIA LYNN	01/03/12	15 00	MW	OH		
A200351434	406092	POOR, SHERIFF FREDDIE	01/03/12	1,822 53	MW	OH		
A200351435	406092	POOR, SHERIFF FREDDIE	01/03/12	4 174 48	MW	OH		
A200351436	164046	PORT BOLIVAR VFD EMS	01/03/12	12 500 00	MW	OH		
A200351437	706618	PROLINE MATERIALS INC	01/03/12	5 702 75	MW	OH		
A200351438	712275	Q C LABORATORIES INC	01/03/12	324 00	MW	OH		
A200351439	714189	QI CONSULTING INC	01/03/12	250 00	MW	OH		
A200351440	055012	R B EVERETT & CO	01/03/12	834 59	MW	OH		
A200351441	714178	RIDDLE, MICHAEL C	01/03/12	5 00	MW	OH		
A200351442	712991	ROADY, JACK	01/03/12	439 69	MW	OH		
A200351443	184358	ROBINSON TEXTILES INC	01/03/12	2,528 20	MW	OH		
A200351444	714181	RUSSELL, ALLEN D	01/03/12	5 00	MW	OH		
A200351445	711244	SALINSKY LAW OFFICES	01/03/12	350 00	MW	OH	B7	
A200351446	409033	SAM HOUSTON STATE UNIVERSITY	01/03/12	395 00	MW	OH		
A200351447	191023	SANTA FE AUTO PARTS INC	01/03/12	2,024 99	MW	OH		
A200351448	701888	SCOTT, SHELBY	01/03/12	5 905 50	MW	OH	B7	
A200351449	192161	SHATTUCK, BOB	01/03/12	800 00	MW	OH	B7	
A200351450	711193	SHELMARK ENGINEERING L L C	01/03/12	3,690 61	MW	OH		
A200351451	400542	SHERWIN WILLIAMS PAINT CORP	01/03/12	185 32	MW	OH		
A200351452	703308	SHI GOVT SOLUTIONS	01/03/12	2,280 00	MW	OH		
A200351453	714167	SHULL, HOLLY D	01/03/12	4 50	MW	OH		
A200351454	714176	SIERRA, JACLYN M	01/03/12	2 000 00	MW	OH	B7	
A200351455	704289	SOLUTIONS4SURE COM INC	01/03/12	844 56	MW	OH		
A200351456	703586	SOUTHEAST TEXAS ASSOCIATION O	01/03/12	40 00	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351457	408831	SOUTHERN CRUSHED CONCRETE LLC	01/03/12	8,386 84	MW	OH		
A200351458	713405	SOUTHWEST GALVANIZING INC	01/03/12	809 89	MW	OH		
A200351459	713129	SOUTHWEST T & I INC	01/03/12	243 60	MW	OH		
A200351460	404628	STEWART TITLE CO	01/03/12	162 38	MW	OH		
A200351461	714160	STEWART TITLE OF CORPUS CHRIS	01/03/12	8 00	MW	OH		
A200351462	708715	STREAM ENERGY	01/03/12	94 90	MW	OH		
A200351463	711234	SULLIVAN LAND SERVICES LTD	01/03/12	414 990 34	MW	OH		
A200351464	713192	SULLIVAN DWIGHT D	01/03/12	40 00	MW	OH		
A200351465	713192	SULLIVAN, DWIGHT D	01/03/12	80 00	MW	OH		
A200351466	713192	SULLIVAN, DWIGHT D	01/03/12	120 00	MW	OH		
A200351467	405722	SUN COAST RESOURCES INC	01/03/12	32 551 80	MW	OH		
A200351468	707408	SUNGARD PUBLIC SECTOR INC	01/03/12	77,671 62	MW	OH		
A200351469	711926	TEGRITY HOMES, LLC	01/03/12	61 716 27	MW	OH		
A200351470	404533	TEX AIR PARTS INC	01/03/12	554 04	MW	OH		
A200351471	405881	TEXAS AGRILIFE EXTENSION	01/03/12	245 00	MW	OH		
A200351472	202671	TEXAS ASSOCIATION OF COUNTIES	01/03/12	200 00	MW	OH		
A200351473	202325	TEXAS DISTRICT AND COUNTY ATT	01/03/12	289 00	MW	OH		
A200351474	708583	TEXAS LAW & PSYCHIATRY PLLC	01/03/12	4,800 00	MW	OH		
A200351475	202267	TEXAS PARKS AND WILDLIFE DEPT	01/03/12	526 15	MW	OH		
A200351476	406578	TEXAS STATE UNIVERSITY SAN MA	01/03/12	200 00	MW	OH		
A200351477	714166	TILLINGER, CHRISTINA S	01/03/12	13 00	MW	OH		
A200351478	703929	TXU ENERGY RETAIL COMPANY LP	01/03/12	160 85	MW	OH		
A200351479	709493	U S ARMY CORPS OF ENGINEERS	01/03/12	90 093 44	MW	OH		
A200351480	710003	U S ENERGY SAVINGS CORP	01/03/12	100 00	MW	OH		
A200351481	701538	UNITED PARCEL SERVICE	01/03/12	35 33	MW	OH		
A200351482	711203	UNITED POWER AND BATTERY CORP	01/03/12	24 400 00	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351483	703768	VALLEY SERVICES INC	01/03/12	42 630 24	MW	OH		
A200351484	709512	VENSO NORMA	01/03/12	250 00	MW	OH		
A200351485	400131	VULCAN CONSTRUCTION MATERIALS	01/03/12	3,386 90	MW	OH		
A200351486	711090	WEIMAR INDUSTRIES INC	01/03/12	365 00	MW	OH		
A200351487	701533	WEST PUBLISHING CORPORATION	01/03/12	295 00	MW	OH		
A200351488	714192	WESTMORELAND INSURANCE	01/03/12	807 00	MW	OH		
A200351489	242016	XEROX CORPORATION	01/03/12	620 40	MW	OH		

S U B T O T A L S

Total Void Machine Written	0 00	Number of Checks Processed	2
Total Void Hand Written	0 00	Number of Checks Processed	0
Total Machine Written	2604 696 14	Number of Checks Processed	213
Total Hand Written	0 00	Number of Checks Processed	0
Total Reversals	0 00	Number of Checks Processed	0
Total Cancelled	0 00	Number of Checks Processed	0
S U B T O T A L	2604 696 14		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
F600000328	161059	BOB PAGAN FORD INC	01/03/12	6,413 81	CX	OH		
F600000329	403006	KEYWORTHS HARDWARE INC	01/03/12	80 36	CX	OH		
F600000330	705097	LONE STAR UNIFORMS INC	01/03/12	12,098 75	CX	OH		

S U B T O T A L S

Total Void Machine Written	0 00	Number of Checks Processed	0
Total Void Hand Written	0 00	Number of Checks Processed	0
Total Machine Written	0 00	Number of Checks Processed	0
Total Hand Written	0 00	Number of Checks Processed	0
Total Reversals	0 00	Number of Checks Processed	0
Total Cancelled	18,592 92	Number of Checks Processed	3

S U B T O T A L 18 592 92

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note

G R A N D T O T A L S

Total Void Machine Written	0 00	Number of Checks Processed	2
Total Void Hand Written	0 00	Number of Checks Processed	0
Total Machine Written	2604 69o 14	Number of Checks Processed	213
Total Hand Written	0 00	Number of Checks Processed	0
Total Reversals	0 00	Number of Checks Processed	0
Total Cancelled	18,592 92	Number of Checks Processed	3
G R A N D T O T A L	2623,289 06		

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Info		Amount
FUND: 1101	**General Fund**		
Warrant #: VW 00000331	**Payee Name: BOB PAGAN FORD INC**		
230088	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	2,635 90
230377	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	568 56
230410	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	592 59
230593	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	296 50
230607	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	90 85
230608	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	1,177 43
230609	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	600 88
230612	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	64 11
230681	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	58 37
230682	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	49 37
230686	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	49 97
230701	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	42 49
230732	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	244 23
230741	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	39 75
		Warrant Total:	**6,511.00**
Warrant #: VW 00000333	**Payee Name: GALVESTON NEWSPAPERS INC**		
0109527 123111	1101111000 - 5310000	County Judge - Supplies and Materials	70 50
13105364 123111	1101110000 - 5493102	General Government - Advertising Costs-Sheriff Sale	13,995 00
18109957	1101110000 - 5493102	General Government - Advertising Costs-Sheriff Sale	658 76
		Warrant Total:	**14,724.26**
Warrant #: VW 00000336	**Payee Name: SCHWAB-RADCLIFFE, SUZANNE**		
12/01-31/2011	1101121000 - 5431301	Justice Administration - Relief Associate Judge	3,218 17
		Warrant Total:	**3,218.17**
Warrant #: VW 00351490	**Payee Name: ABL MANAGEMENT INC**		
183297	1101211133 - 5481200	Sheriff-Corrections - Jail Food Service Contract	16,818 82
		Warrant Total:	**16,818 82**
Warrant #: VW 00351491	**Payee Name: ALERT ALARM BURG AND FIRE PROT INC**		
694033	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	10 00
		Warrant Total:	**10.00**
Warrant #: VW 00351501	**Payee Name: BAY COLONY APARTMENTS**		
901FM517 219	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**100 00**
Warrant #: VW 00351502	**Payee Name: BENNETT, JAMES M**		
11CR1612 121911	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	731 25
		Warrant Total.	**731.25**
Warrant #: VW 00351503	**Payee Name: BERARDINELLI CORREIA, SHAUNA L**		
11CR0530 010312	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	715 00
		Warrant Total:	**715.00**
Warrant #: VW 00351504	**Payee Name. BFI WASTE SERVICES OF TEXAS LP**		
0855000482770	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	1 12
0855000483048	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	0 92

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Info		Amount
0855000483393	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	3 16
		Warrant Total:	**5 20**
Warrant #: VW 00351506	**Payee Name: BOSWORTH PAPERS INC**		
1256361	1101159100 - 5310000	Information Technology - Supplies and Materials	445 00
		Warrant Total:	**445.00**
Warrant #. VW 00351507	**Payee Name: BOUNCE ENERGY INC**		
1198555	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	65 21
		Warrant Total:	**65.21**
Warrant #: VW 00351508	**Payee Name: BRIGGS, LYNETTE**		
DEC 2011 SRVC	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1,800 00
		Warrant Total:	**1,800.00**
Warrant #: VW 00351509	**Payee Name: BROADWAY DRUG STORE**		
022461 CARROLL	1101443100 - 5447400	Indigent Care & Medication - Drugs & Medicine	14 58
022461 WARREN	1101443100 - 5447400	Indigent Care & Medication - Drugs & Medicine	46 60
		Warrant Total:	**61.18**
Warrant #: VW 00351512	**Payee Name: CDW GOVERNMENT INC**		
C593854	1101159100 - 5310000	Information Technology - Supplies and Materials	321 96
C616239	1101159100 - 5310000	Information Technology - Supplies and Materials	57 72
		Warrant Total:	**379.68**
Warrant #: VW 00351513	**Payee Name: CEASER, KENDRIC**		
11CR2729 121411	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	212 50
		Warrant Total	**212.50**
Warrant # VW 00351514	**Payee Name: CENTERPOINT ENERGY**		
51350429	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
7961142 2	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	64 65
		Warrant Total:	**164.65**
Warrant #: VW 00351516	**Payee Name: CITY OF GALVESTON**		
362490	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
380331	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	96 39
		Warrant Total:	**196.39**
Warrant #: VW 00351517	**Payee Name: CITY OF GALVESTON**		
S0016147	1101172111 - 5322010	Fleet Mgmt-Galveston - Auto Fuel Expense	28,521 00
		Warrant Total:	**28,521.00**
Warrant #: VW 00351520	**Payee Name: CITY OF TEXAS CITY**		
1064450444	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**100.00**
Warrant #: VW 00351521	**Payee Name: CLEMENTS, CLYDE WESLEY**		
11CR2039 102511	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	357 50
		Warrant Total:	**357.50**
Warrant #: VW 00351524	**Payee Name COLTZER, ROBERT G**		

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Info		Amount
10CR2663 100611	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	4,424 80
11CR2920 122811	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	482 30
320720 010312	1101122200 - 5431222	County Court #2 - Roberts - Defense Atty Co Ct #2	531 05
JAIL DKT 122711	1101122400 - 5431221	County Court #3 - Dupuy - Defense Atty Co Ct	950 00
		Warrant Total:	**6,388.15**
Warrant #: VW 00351525	**Payee Name: COMMERCIAL WIRELESS SOLUTIONS LP**		
B00051	1101159100 - 5423000	Information Technology - Maint/Repairs Equipment	1,490 00
		Warrant Total:	**1,490.00**
Warrant #. VW 00351526	**Payee Name: CONZ, GLORIA**		
DEC 2011	1101451110 - 5481000	Senior Citizens - Contract Service	450 00
		Warrant Total:	**450.00**
Warrant #: VW 00351527	**Payee Name: CPI FOODS INC.**		
131241	1101451110 - 5503021	Senior Citizens - Food Cost Title III Supplemt	2,110 00
		Warrant Total:	**2,110 00**
Warrant #: VW 00351535	**Payee Name: DAVIS III, NEAL**		
10CR2403 122211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	357 50
		Warrant Total:	**357.50**
Warrant #: VW 00351537	**Payee Name: DIAZ, MARK A**		
10CR3132 010312	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	650 00
		Warrant Total:	**650.00**
Warrant #: VW 00351543	**Payee Name: FAUS, SALVADOR**		
11JV0300 122111	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	130 00
311171 122911	1101122200 - 5431222	County Court #2 - Roberts - Defense Atty Co Ct #2	97 50
		Warrant Total:	**227 50**
Warrant #: VW 00351544	**Payee Name: FLEETCOR TECHNOLOGIES DBA CHEVRON**		
32563448	1101172111 - 5322010	Fleet Mgmt-Galveston - Auto Fuel Expense	480 59
		Warrant Total:	**480.59**
Warrant #: VW 00351546	**Payee Name: FORT PC, M. BRUCE**		
11CR0911 122911	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	513 50
		Warrant Total:	**513.50**
Warrant #: VW 00351547	**Payee Name: FOXHOVEN INC**		
302636	1101159100 - 5481000	Information Technology - Contract Service	50,000 00
		Warrant Total.	**50,000.00**
Warrant #: VW 00351548	**Payee Name: FULK, GEORGE BYRON**		
11CR1176 010212	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1,105 00
		Warrant Total:	**1,105.00**
Warrant #: VW 00351551	**Payee Name GALVESTON COUNTY SHERIFF'S DEPT**		
122211 MEALS	1101211132 - 5496153	M H M R -Sheriff - In-State Transport	13 81
		Warrant Total.	**13.81**
Warrant #: VW 00351552	**Payee Name: GALVESTON COUNTY WCID #1**		

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List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Info		Amount
140060019 121911	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	47 34
		Warrant Total:	**47.34**
Warrant #: VW 00351553	**Payee Name: GARDLINE COMMUNICATIONS INC**		
14544	1101159100 - 5423000	Information Technology - Maint/Repairs Equipment	2,295 01
		Warrant Total:	**2,295.01**
Warrant #: VW 00351554	**Payee Name: GARRETT LAW FIRM,THE**		
11CR2373 122711	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	378 95
		Warrant Total:	**378.95**
Warrant #: VW 00351556	**Payee Name: GELB, JEFFREY**		
11CR2254 122211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	617 50
11CR3523 122211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	373 75
		Warrant Total:	**991 25**
Warrant #: VW 00351557	**Payee Name: GETTY, CARLTON A**		
837996	1101000010 - 4414012	General Government - County Clerk Refund of Fees	10 00
		Warrant Total:	**10.00**
Warrant #: VW 00351558	**Payee Name: GHOGOMU, WILLIAM T**		
315479 010312	1101122200 - 5431222	County Court #2 - Roberts - Defense Atty Co Ct #2	325 00
317126 123011	1101122200 - 5431222	County Court #2 - Roberts - Defense Atty Co Ct #2	162 50
		Warrant Total:	**487.50**
Warrant #: VW 00351560	**Payee Name: GOLDSBERRY & ASSOCIATES PLLC**		
00FD2631 010412	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	162 50
11CP0084 122811	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	195 00
		Warrant Total:	**357.50**
Warrant #: VW 00351561	**Payee Name: GOTTLOB,JEFFREY**		
11/16-12/20/11 R	1101117500 - 5496301	Veteran's Services - Auto Mileage	65 49
		Warrant Total.	**65 49**
Warrant #: VW 00351562	**Payee Name: GRAHAM, CARMEN A**		
09FD1634 010412	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	260 00
11CP0071 010512	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	195 00
11CP0085 010412	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	195 00
		Warrant Total:	**650.00**
Warrant #: VW 00351563	**Payee Name: GULF COAST CENTURY**		
1368	1101211133 - 5310000	Sheriff-Corrections - Supplies and Materials	960 00
1369	1101211150 - 5310000	Warrants-Sheriff's Department - Supplies and Materials	130 00
		Warrant Total:	**1,090 00**
Warrant #: VW 00351564	**Payee Name: GULF COAST COMPLETE MARINE SERVICE INC**		
822	1101211143 - 5423104	Patrol Division - Maint/Repairs Boat	789 97
		Warrant Total:	**789 97**
Warrant #: VW 00351565	**Payee Name: GULF COAST MARKET INC**		
112079	1101000000 - 1142009	General Fund - Undist Fees JP 6 (prev #9)	69 25
		Warrant Total.	**69.25**

Galveston County, Texas

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Invoice Number	Account Info		Amount
Warrant #: VW 00351566	**Payee Name: GULFSIDE OVERHEAD DOOR COMPANY**		
1791	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	410 00
		Warrant Total:	**410.00**
Warrant # VW 00351569	**Payee Name: H R M SUPPLY**		
1045	1101522020 - 5310000	Parks Department - Supplies and Materials	375 90
		Warrant Total:	**375.90**
Warrant #: VW 00351570	**Payee Name: HAYNES, BRENT**		
12/5-6/11 MLG	1101127100 - 5496301	District Attorney - Auto Mileage	183 15
		Warrant Total.	**183.15**
Warrant # VW 00351571	**Payee Name: HEAT TRANSFER SOLUTIONS INC**		
59242	1101170100 - 5424000	Facilities Srvs & Maintenance - Maint & Repairs Buildings	532 50
		Warrant Total:	**532.50**
Warrant #· VW 00351575	**Payee Name: HERNANDEZ, SUSAN**		
DEC 2011 MLG	1101211101 - 5496301	Administration Sheriff Dept - Auto Mileage	26 64
		Warrant Total:	**26.64**
Warrant #· VW 00351577	**Payee Name· HESSE, DAVID C**		
11CR1951 122911	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	747 50
11JV0173 123011	1101122100 - 5431221	County Court #1 - Grady - Defense Atty Co Ct	520 00
		Warrant Total:	**1,267.50**
Warrant #: VW 00351578	**Payee Name: HOGAN, DWANETTE**		
DEC 2011 MLG	1101443100 - 5496301	Indigent Care & Medication - Auto Mileage	485 63
		Warrant Total:	**485.63**
Warrant #: VW 00351582	**Payee Name: HULL & ASSOCIATES P.C.**		
20117984CC	1101000010 - 4414012	General Government - County Clerk Refund of Fees	5 00
		Warrant Total:	**5.00**
Warrant #: VW 00351583	**Payee Name: INFOSAT COMMUNICATIONS**		
72028	1101159100 - 5492101	Information Technology - Telephone Expense	43 28
		Warrant Total·	**43.28**
Warrant #: VW 00351585	**Payee Name: JACKSON, ERIN LARENA**		
11CR3207 122811	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	487 00
		Warrant Total:	**487.00**
Warrant #: VW 00351588	**Payee Name: JAMES CROWDER FUNERAL HOME INC**		
NOV 2011 SRVC	1101440100 - 5496170	Community Services - Transporation-Medical Examiner	6,123 00
		Warrant Total:	**6,123.00**
Warrant #: VW 00351589	**Payee Name: JAROTH INC**		
325215	1101159100 - 5423500	Information Technology - Maintenance of Software	78 00
		Warrant Total:	**78.00**
Warrant #. VW 00351593	**Payee Name: JONES LAW FIRM**		
316444 122211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	422 50

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Info		Amount
		Warrant Total:	**422.50**
Warrant #: VW 00351595	**Payee Name: JONES, STACEY LEE**		
11CR0347 122011	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1,608 75
		Warrant Total:	**1,608 75**
Warrant #: VW 00351596	**Payee Name: KEMAH HARDWARE AND SUPPLY**		
489262	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	325 70
489263	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	559 20
		Warrant Total:	**884.90**
Warrant #: VW 00351599	**Payee Name: KLEEN JANITORIAL SUPPLY COMPANY**		
1830	1101211133 - 5310000	Sheriff-Corrections - Supplies and Materials	818 03
1842	1101211133 - 5310000	Sheriff-Corrections - Supplies and Materials	1,195 85
1846	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	2,682 44
1849	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	726 70
1850	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	1,850 00
1862	1101211133 - 5310000	Sheriff-Corrections - Supplies and Materials	890 96
		Warrant Total:	**8,163.98**
Warrant #: VW 00351600	**Payee Name: KLEEN KUT LANDSCAPE SERVICE**		
202	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	5,750 00
		Warrant Total:	**5,750.00**
Warrant #: VW 00351604	**Payee Name. LAW OFFICE OF CS HALL PLLC**		
11CR0806 010312	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	292.50
		Warrant Total:	**292.50**
Warrant #: VW 00351605	**Payee Name: LAW OFFICE OF LANELLE O'CONNELL**		
316175 010412	1101122200 - 5431222	County Court #2 - Roberts - Defense Atty Co Ct #2	97 50
		Warrant Total:	**97.50**
Warrant #: VW 00351606	**Payee Name: LAW OFFICE OF LINDSAY R LOPEZ, THE**		
314676 121611	1101122400 - 5431221	County Court #3 - Dupuy - Defense Atty Co Ct	471 25
315985 120211	1101122100 - 5431221	County Court #1 - Grady - Defense Atty Co Ct	130 00
		Warrant Total:	**601.25**
Warrant #: VW 00351607	**Payee Name: LAW OFFICE OF PAUL B KENNEDY**		
11CR00044 110111	1101121000 - 5310000	Justice Administration - Supplies and Materials	9 00
11CR00044 110111	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	851 50
		Warrant Total:	**860.50**
Warrant #: VW 00351608	**Payee Name: LCR-M LIMITED PARTNERSHIP**		
1098953	1101522020 - 5424000	Parks Department - Maint & Repairs Buildings	63 98
		Warrant Total:	**63.98**
Warrant #: VW 00351609	**Payee Name: LEATHERS, BILL**		
11CR3520 121211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	162 50
		Warrant Total.	**162.50**
Warrant #: VW 00351610	**Payee Name: LEAVITT, CHRISTOPHER J.**		
REFUND FEES	1101000000 - 2291104	General Fund - DC-Refunds of Fees	854 00

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Info		Amount
		Warrant Total:	**854.00**
Warrant #: VW 00351611	**Payee Name: LEE, DALE W**		
010412 CRT RPTR	1101121000 - 5411102	Justice Administration - Prof Serv Transcripts	1,032 00
		Warrant Total:	**1,032.00**
Warrant #: VW 00351612	**Payee Name: LEWIS, ANDREW A.**		
20117986CC	1101000010 - 4414012	General Government - County Clerk Refund of Fees	5 00
		Warrant Total:	**5.00**
Warrant #: VW 00351614	**Payee Name: LIGGIOS TIRE AND SERVICE CENTER INC**		
180714	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	1,642 65
180899	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	604 53
180998	1101522020 - 5423000	Parks Department - Maint/Repairs Equipment	363 44
181525	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	293 87
181544	1101172111 - 5423110	Fleet Mgmt-Galveston - Auto Maintenance	85 00
181753	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	41 00
181784	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	13 00
181799	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	28 00
181802	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	28 00
181835	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	85 00
181866	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	92 62
181895	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	89 15
		Warrant Total:	**3,366.26**
Warrant #: VW 00351615	**Payee Name: LINEBARGER GOGGAN BLAIR & SAMPSON LLP**		
DEC 11 JP1 FEES	1101000000 - 2291011	General Fund - Due to Collection Agency	342 68
		Warrant Total:	**342.68**
Warrant #: VW 00351616	**Payee Name: LINEBARGER GOGGAN BLAIR & SAMPSON LLP**		
DEC 11 JP2 FEES	1101000000 - 2291011	General Fund - Due to Collection Agency	71 40
		Warrant Total.	**71 40**
Warrant #: VW 00351619	**Payee Name: LOVE, PAUL**		
11CR1215 010212	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	552 50
		Warrant Total:	**552.50**
Warrant #: VW 00351620	**Payee Name: LSI TITLE AGENCY, INC.**		
837847	1101000010 - 4414012	General Government - County Clerk Refund of Fees	8 00
		Warrant Total:	**8.00**
Warrant #: VW 00351622	**Payee Name: MABES HAULING**		
34387	1101522020 - 5428000	Parks Department - Grounds Maintenance	88 00
34388	1101522020 - 5428000	Parks Department - Grounds Maintenance	88 00
34389	1101522020 - 5428000	Parks Department - Grounds Maintenance	88 00
34410	1101522020 - 5428000	Parks Department - Grounds Maintenance	88 00
34411	1101522020 - 5428000	Parks Department - Grounds Maintenance	88 00
		Warrant Total:	**440.00**
Warrant #: VW 00351623	**Payee Name. MAILFINANCE INC**		
N2997854	1101159100 - 5426100	Information Technology - Equipment Rental/Lease	3,111 83
		Warrant Total:	**3,111.83**

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Info		Amount
Warrant #: VW 00351624	**Payee Name: MAILROOM FINANCE INC**		
88504105 120111	1101159100 - 5311140	Information Technology - Postage	22,098 77
		Warrant Total:	**22,098 77**
Warrant #: VW 00351625	**Payee Name: MAINLAND PHARMACY**		
022702 CANO	1101443100 - 5447400	Indigent Care & Medication - Drugs & Medicine	272 19
022999 GUZMAN	1101443100 - 5447400	Indigent Care & Medication - Drugs & Medicine	178 59
		Warrant Total:	**450.78**
Warrant #: VW 00351626	**Payee Name: MALONEY & PARKS LLP**		
08CR0785 122211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	260 00
08CR1441 101311	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	975 00
11CR0192 122211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	747 50
11CR1726 121611	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	520 00
11CR1757 010212	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	480 00
		Warrant Total:	**2,982.50**
Warrant #: VW 00351628	**Payee Name: MASTER WORD SERVICE INC**		
46705	1101121000 - 5431101	Justice Administration - Professional Srv Interpreter	3,508 26
		Warrant Total:	**3,508.26**
Warrant #. VW 00351629	**Payee Name: MAUZY, BRUCE**		
06CR0938A 121211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	195 00
10CR1355 121211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	650 00
11CR2224 121211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	240 50
11CR2420 121211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	169 00
11CR2677 121211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	247 00
		Warrant Total:	**1,501.50**
Warrant #: VW 00351634	**Payee Name: MILLER, ROBERT DAVID**		
11CR0801 122711	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1,007 50
		Warrant Total:	**1,007.50**
Warrant #: VW 00351638	**Payee Name: MUELLER, DINAH J**		
10CP0043 010312	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	292 50
		Warrant Total:	**292.50**
Warrant #: VW 00351639	**Payee Name: MUNRO'S UNIFORM SERVICES LTD**		
69036	1101522020 - 5312101	Parks Department - Uniform Expense	41 50
69044	1101522020 - 5312101	Parks Department - Uniform Expense	66 75
70096	1101522020 - 5312101	Parks Department - Uniform Expense	41 50
70104	1101522020 - 5312101	Parks Department - Uniform Expense	58 50
70907	1101522020 - 5312101	Parks Department - Uniform Expense	6 00
70909	1101522020 - 5312101	Parks Department - Uniform Expense	9 46
71165	1101522020 - 5312101	Parks Department - Uniform Expense	41 50
71173	1101522020 - 5312101	Parks Department - Uniform Expense	58 50
71174	1101522020 - 5312101	Parks Department - Uniform Expense	12 75
S72572	1101522020 - 5312101	Parks Department - Uniform Expense	48 00
		Warrant Total:	**384.46**
Warrant #: VW 00351644	**Payee Name: NAJER, MAURICE**		
08CR2166 122911	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	617 50

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Invoice Number	Account Info		Amount
11CR1338 122111	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1,072 50
		Warrant Total:	**1,690.00**
Warrant #: VW 00351645	**Payee Name: NEOPOST USA INC**		
13591249	1101159100 - 5310000	Information Technology - Supplies and Materials	143 99
		Warrant Total:	**143.99**
Warrant #: VW 00351648	**Payee Name: NRG ENERGY INC**		
17555228 010612	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	193 84
17763616 010612	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
26367904	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
5859582	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
701259178	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	80 52
		Warrant Total:	**574.36**
Warrant #: VW 00351652	**Payee Name: ONEOK INC**		
165339436 121611	1101170100 - 5421300	Facilities Srvs & Maintenance - Gas	1,553 36
9101252041143722	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	44 59
		Warrant Total:	**1,597.95**
Warrant #: VW 00351653	**Payee Name: OWEN ELECTRIC SUPPLY**		
2645421533	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	450 00
2645421690	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	189 00
2645421769	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	307 50
2645421821	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	9 08
2645421887	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	574 80
2645421894	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	247 50
2645421914	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	204 00
2645421940	1101170100 - 5310000	Facilities Srvs & Maintenance - Supplies and Materials	149 50
		Warrant Total.	**2,131 38**
Warrant #: VW 00351655	**Payee Name: PALMER, MICHAEL**		
11CR3505 122211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	260 00
		Warrant Total:	**260.00**
Warrant #: VW 00351658	**Payee Name: PESTMASTER SERVICES INC**		
9520	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	125 50
9521	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	175 25
9522	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	34 71
9523	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	39 83
9524	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	55 19
9525	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	39 83
9526	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	50 07
9527	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	175 25
9528	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	110 39
9529	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	39 83
9530	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	39 83
9531	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	75 11
9532	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	34 71
9533	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	30 16
9576	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	75 00
9588	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	39 83
9589	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	200 29

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Invoice Number	Account Info		Amount
9609	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	59 75
9616	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	839 84
9617	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	165 01
9627	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	55 19
9628	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	195 17
9638	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	34 71
9649	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	44 95
9650	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	44 95
9651	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	39 83
9652	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	34 71
9653	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	175 25
9654	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	34 71
9655	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	250 36
9656	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	85 00
9659	1101170100 - 5481000	Facilities Srvs & Maintenance - Contract Service	64 87
		Warrant Total:	**3,465.08**
Warrant #: VW 00351662		**Payee Name: QUINTANILLA, DONNIE**	
CS#M10111459	1101000000 - 1142001	General Fund - Undist Fees JP 1	467 00
		Warrant Total:	**467.00**
Warrant #: VW 00351666		**Payee Name: RIOS, ROBIN A**	
121611 CC#3	1101121000 - 5431121	Justice Administration - Court Reporter Expense	506 56
		Warrant Total:	**506.56**
Warrant #: VW 00351667		**Payee Name: RUSSELL, GREG**	
11CR3391 010312	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	276 25
11CR3568 122711	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	195 00
		Warrant Total:	**471 25**
Warrant #: VW 00351668		**Payee Name: SAENZ, ALVIN N**	
11CR0841 010212	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	812 50
11CR3146 121511	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	390 00
		Warrant Total:	**1,202.50**
Warrant #: VW 00351671		**Payee Name: SANTA FE SENIOR CITIZENS COUNCIL**	
DEC 11	1101451110 - 5503021	Senior Citizens - Food Cost Title III Supplemt	500 00
		Warrant Total	**500.00**
Warrant #: VW 00351673		**Payee Name: SCOTT, SHELBY**	
JAIL DKT 122311	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	950 00
		Warrant Total:	**950.00**
Warrant #: VW 00351674		**Payee Name. SEARS & BENNETT LLP**	
11CR1933 122211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1,397 50
11CR2875 122911	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	536 25
		Warrant Total	**1,933.75**
Warrant #: VW 00351676		**Payee Name: SHEARN MOODY PLAZA CORP**	
123111 4TH FLR	1101110000 - 5426250	General Government - Rental Office Space	24,514 23
123111 5TH FLR	1101110000 - 5426250	General Government - Rental Office Space	28,568 10
		Warrant Total:	**53,082.33**

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Invoice Number	Account Info		Amount
Warrant #: VW 00351679	**Payee Name: SMITH IRRIGATION EQUIPMENT**		
490	1101522020 - 5428000	Parks Department - Grounds Maintenance	623 00
		Warrant Total:	**623.00**
Warrant #: VW 00351680	**Payee Name: SMITH, JAMES DENNIS**		
11CR2649 010212	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	390 00
		Warrant Total:	**390.00**
Warrant #: VW 00351683	**Payee Name: SOUTHEAST TEXAS ASSOCIATION OF PUBLIC**		
2012 RNWL PURCHA	1101151800 - 5498000	Purchasing Agent - Membership And Dues	200 00
		Warrant Total:	**200.00**
Warrant #: VW 00351687	**Payee Name: STEVE'S WAREHOUSE TIRES**		
235	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	15 00
70240	1101211101 - 5423110	Administration Sheriff Dept - Auto Maintenance	15 00
		Warrant Total:	**30.00**
Warrant #: VW 00351689	**Payee Name: STEVENS, MARK W**		
11CR1246 122011	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	65 00
11CR1579 122711	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	266 50
11CR2741 122211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	143 00
		Warrant Total:	**474.50**
Warrant #: VW 00351691	**Payee Name: STICKLER, TOMMY JAMES**		
11CR2304 122211	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	487 50
		Warrant Total:	**487.50**
Warrant #: VW 00351692	**Payee Name: STREAM ENERGY**		
1188495795	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	77 52
1193763506	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**177.52**
Warrant #: VW 00351695	**Payee Name: SUN COAST RESOURCES INC**		
91142672	1101172111 - 5322010	Fleet Mgmt-Galveston - Auto Fuel Expense	4,943 14
		Warrant Total:	**4,943.14**
Warrant #: VW 00351696	**Payee Name: SUNGARD AVAILABILITY SERVICES LP**		
152319957	1101159100 - 5423500	Information Technology - Maintenance of Software	11,350 00
		Warrant Total.	**11,350 00**
Warrant #: VW 00351697	**Payee Name: TAYLOR, ANGELA M**		
11CR1479 010212	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1 105 00
		Warrant Total:	**1,105.00**
Warrant #: VW 00351700	**Payee Name: TEXAS JUSTICE COURT**		
2012 JDG S JAMES	1101123300 - 5496100	Justice Court Pct #3 - Travel	75 00
		Warrant Total:	**75 00**
Warrant #: VW 00351701	**Payee Name: TEXAS LAW & PSYCHIATRY PLLC**		
11CR1930 122811	1101121000 - 5412115	Justice Administration - Psychological Exam	1 200 00
11CR2100 121011	1101121000 - 5412115	Justice Administration - Psychological Exam	1,200 00

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Invoice Number	Account Info		Amount
		Warrant Total:	**2,400.00**
Warrant #. VW 00351705	**Payee Name· TEXAS STATE UNIVERSITY SAN MARCOS**		
2/1-3/12 K SHAFE	1101123400 - 5495100	Justice Court Pct #4 - Education	100 00
2/1-3/12 MCCORMI	1101123400 - 5495100	Justice Court Pct #4 - Education	100 00
2/1-3/12 MILLSAP	1101123400 - 5495100	Justice Court Pct #4 - Education	100 00
2/1-3/12 MITCHEL	1101123400 - 5495100	Justice Court Pct #4 - Education	100 00
2/1-3/12 S SHAFE	1101123400 - 5495100	Justice Court Pct #4 - Education	100 00
		Warrant Total:	**500.00**
Warrant #· VW 00351707	**Payee Name: TPM INC**		
APT 5	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	100 00
		Warrant Total:	**100 00**
Warrant #: VW 00351708	**Payee Name: TREE-MENDUS**		
120111 FT PARK	1101522020 - 5428010	Parks Department - Forestry Services	1,400 00
		Warrant Total:	**1,400.00**
Warrant #: VW 00351710	**Payee Name: TRUE ELECTRIC LLC**		
004797	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	197 27
		Warrant Total:	**197.27**
Warrant #: VW 00351711	**Payee Name: U.S. ENERGY SAVINGS CORP.**		
4586295 122711	1101443100 - 5447200	Indigent Care & Medication - Emergency Assistance	94 35
		Warrant Total:	**94.35**
Warrant #: VW 00351712	**Payee Name: UNITED PARCEL SERVICE**		
0000142162511	1101159100 - 5481000	Information Technology - Contract Service	14 63
		Warrant Total:	**14 63**
Warrant #: VW 00351713	**Payee Name. UNITED STATES POSTAL SERVICE**		
BX#1169 12/11	1101159100 - 5311140	Information Technology - Postage	1,050 00
		Warrant Total:	**1,050.00**
Warrant #: VW 00351714	**Payee Name: UTMB**		
708X24012043	1101121000 - 5412115	Justice Administration - Psychological Exam	600 00
		Warrant Total:	**600 00**
Warrant #: VW 00351716	**Payee Name: VICKERY, KAY**		
DEC 2011 MLG	1101211101 - 5496301	Administration Sheriff Dept - Auto Mileage	40 52
		Warrant Total·	**40.52**
Warrant #: VW 00351717	**Payee Name: VOICE4NET.C0M**		
3149	1101159100 - 5481000	Information Technology - Contract Service	50 00
		Warrant Total:	**50 00**
Warrant #: VW 00351718	**Payee Name. WALMART**		
01542	1101451110 - 5310000	Senior Citizens - Supplies and Materials	87 43
01762	1101451110 - 5310000	Senior Citizens - Supplies and Materials	117 98
03793	1101451110 - 5310000	Senior Citizens - Supplies and Materials	171 47
05733	1101451110 - 5310000	Senior Citizens - Supplies and Materials	97 64
		Warrant Total:	**474.52**

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Invoice Number	Account Info		Amount
Warrant #: VW 00351719	**Payee Name: WATKINS, GENE ANTONE**		
DEC 2011	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1,800 00
		Warrant Total:	**1,800.00**
Warrant #: VW 00351720	**Payee Name: WEBER, WINIFRED B**		
319701 120811	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	195 00
		Warrant Total:	**195.00**
Warrant #. VW 00351721	**Payee Name: WELLNESS HEALTH LETTER AND ASSOCIATES**		
2012 SIMMONS	1101610200 - 5310000	County Extension - Supplies and Materials	28 00
		Warrant Total·	**28.00**
Warrant #· VW 00351723	**Payee Name: WEST PUBLISHING CORPORATION**		
823994690	1101126100 - 5317000	District Clerk - Books & Periodicals	68 00
824091081	1101151300 - 5317000	County Auditor - Books & Periodicals	210 00
824092585	1101123700 - 5310000	Justice Court Pct #7 - Supplies and Materials	94 00
		Warrant Total:	**372.00**
Warrant #: VW 00351725	**Payee Name· WILSON, JOCELYN**		
DEC 2011 MLG	1101443100 - 5496301	Indigent Care & Medication - Auto Mileage	636 03
		Warrant Total:	**636.03**
Warrant #: VW 00351726	**Payee Name: WOOTEN, THOMAS J**		
11CR1588 010312	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	520 00
DEC 2011	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	1,800 00
		Warrant Total:	**2,320.00**
Warrant #: VW 00351728	**Payee Name: ZENDEH DEL AND ASSOCIATES PLLC**		
JAIL DKT 123011	1101122100 - 5431221	County Court #1 - Grady - Defense Atty Co Ct	950 00
		Warrant Total:	**950.00**
		FUND 1101 TOTAL:	**319,145.15**

FUND: 2131 DA Seized Funds Afte Aft 10/89

Warrant #: VW 00351570	**Payee Name: HAYNES, BRENT**		
12/5-6/11 MLG	2131127132 - 5495112	DA Seized Funds Afte Aft 10/89 - Training	68 00
		Warrant Total:	**68.00**
Warrant #: VW 00351618	**Payee Name: LOUNDS, DONALD**		
12/5-9/11 MEALS	2131127132 - 5495112	DA Seized Funds Afte Aft 10/89 - Training	225 00
		Warrant Total.	**225.00**
		FUND 2131 TOTAL:	**293.00**

FUND: 2211 Law Library

Warrant #: VW 00351594	**Payee Name: JONES MC CLURE PUBLISHING INC**		
100246488	2211129100 - 5317000	Law Library - Books & Periodicals	86 00
		Warrant Total:	**86.00**

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Invoice Number	Account Info		Amount
Warrant #: VW 00351686	**Payee Name: STATE BAR OF TEXAS**		
SALE241545	2211129100 - 5317000	Law Library - Books & Periodicals	125 00
		Warrant Total:	**125.00**
Warrant #: VW 00351723	**Payee Name: WEST PUBLISHING CORPORATION**		
8233557351	2211129100 - 5317000	Law Library - Books & Periodicals	382 27
8235404191	2211129100 - 5317000	Law Library - Books & Periodicals	382 35
8239058941	2211129100 - 5317000	Law Library - Books & Periodicals	382 35
		Warrant Total:	**1,146.97**
		FUND 2211 TOTAL:	**1,357.97**

FUND: 2212 Mediation Services Prog Fund

Warrant #: VW 00351496	**Payee Name: AMERSON, RODGER DAN**		
10FD0992 121911	2212125300 - 5432011	Mediation Services - Mediation Services	200 00
11CP0085 122811	2212125300 - 5432011	Mediation Services - Mediation Services	250 00
11CP0087 010212	2212125300 - 5432011	Mediation Services - Mediation Services	250 00
		Warrant Total:	**700.00**
Warrant #: VW 00351533	**Payee Name: DAHLENBURG, MICHAEL L**		
11FD1393 010412	2212125300 - 5432011	Mediation Services - Mediation Services	150 00
		Warrant Total:	**150.00**
Warrant #: VW 00351597	**Payee Name: KILGORE, JEFFREY A**		
08FD3042 010312	2212125300 - 5432011	Mediation Services - Mediation Services	300 00
11FD2415 123011	2212125300 - 5432011	Mediation Services - Mediation Services	280 00
		Warrant Total:	**580.00**
		FUND 2212 TOTAL:	**1,430.00**

FUND: 2230 Juvenile Justice Fund

Warrant #: VW 00351532	**Payee Name: CURRENT USA INC**		
W186962001016	2230256100 - 5310000	Juvenile Justice - Supplies and Materials	133 63
		Warrant Total:	**133 63**
Warrant #: VW 00351538	**Payee Name: DUNNAHOO, CHRISTOPHER**		
NOV 2011 MLG	2230256100 - 5496301	Juvenile Justice - Auto Mileage	81 03
		Warrant Total:	**81.03**
Warrant #: VW 00351545	**Payee Name. FOLEY, KERRI**		
201101	2230256130 - 5431402	Court - Masters Referee Juvenile Matrs	2,700 00
		Warrant Total:	**2,700.00**
Warrant #: VW 00351574	**Payee Name: HERNANDEZ, CARLOS**		
DEC 2011 MLG	2230256100 - 5496301	Juvenile Justice - Auto Mileage	122 10
		Warrant Total:	**122.10**
Warrant #: VW 00351576	**Payee Name: HERRING JR, MATTHEW**		

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Invoice Number	Account Info		Amount
DEC 2011 MLG	2230256100 - 5496301	Juvenile Justice - Auto Mileage	78 26
		Warrant Total:	**78.26**
Warrant #: VW 00351628	**Payee Name: MASTER WORD SERVICE INC**		
46706	2230256130 - 5431101	Court - Professional Srv Interpreter	233 20
		Warrant Total:	**233 20**
Warrant #: VW 00351630	**Payee Name: MAXWELL, BONITA G**		
DEC 2011 MLG	2230256105 - 5496301	Juv Justice - Administration - Auto Mileage	189 81
		Warrant Total:	**189.81**
Warrant #: VW 00351665	**Payee Name: RAMIREZ, VICTORIA**		
DEC 2011 MLG	2230256100 - 5496301	Juvenile Justice - Auto Mileage	170 39
		Warrant Total:	**170.39**
Warrant #. VW 00351669	**Payee Name: SANDERS, EARNESTINE LYNCH**		
DEC 2011 MLG	2230256100 - 5496301	Juvenile Justice - Auto Mileage	60 50
		Warrant Total:	**60.50**
Warrant #: VW 00351672	**Payee Name: SCHULTZ, MARILYN**		
121511 SRVC	2230256100 - 5412114	Juvenile Justice - Psychological Evaluations/Cert	350 00
		Warrant Total:	**350.00**
Warrant #: VW 00351690	**Payee Name: STEWART, DELLA L**		
DEC 2011 MLG	2230256100 - 5496301	Juvenile Justice - Auto Mileage	39 41
		Warrant Total:	**39.41**
Warrant #. VW 00351706	**Payee Name: TORRES, JUAN**		
RFD PROB FEES	2230000020 - 4342101	Public Safety - Probation Supervisory Fees	474 00
		Warrant Total:	**474.00**
Warrant #: VW 00351718	**Payee Name: WALMART**		
09150	2230256118 - 5316011	Detention - Pharmaceuticals Supplies	8 00
		Warrant Total:	**8.00**
		FUND 2230 TOTAL:	**4,640.33**

FUND: 2242 Sheriff's Seizure Aft 10/89

Warrant #: VW 00000335	**Payee Name: LONE STAR UNIFORMS INC**		
226590	2242211124 - 5310001	Sheriff's Seizure Aft 10/89 - Depart Supplies-Non Cap FFE	13,075 00
226648	2242211124 - 5310001	Sheriff's Seizure Aft 10/89 - Depart Supplies-Non Cap FFE	12,570 00
		Warrant Total:	**25,645.00**
Warrant #: VW 00351551	**Payee Name: GALVESTON COUNTY SHERIFF'S DEPT**		
329427	2242211124 - 5600500	Sheriff's Seizure Aft 10/89 - Petty Cash	200 00
		Warrant Total:	**200.00**
Warrant #: VW 00351564	**Payee Name: GULF COAST COMPLETE MARINE SERVICE INC**		
821	2242211124 - 5310001	Sheriff's Seizure Aft 10/89 - Depart Supplies-Non Cap FFE	2,142 50
826	2242211124 - 5423000	Sheriff's Seizure Aft 10/89 - Maint/Repairs Equipment	4,112 89

Invoice Number	Account Info		Amount
		Warrant Total:	**6,255.39**
Warrant #: VW 00351727	**Payee Name: XANALYS LTD**		
111062	2242211124 - 5481000	Sheriff's Seizure Aft 10/89 - Contract Service	800 00
		Warrant Total:	**800.00**
		FUND 2242 TOTAL:	**32,900.39**

FUND: 2301 Road & Bridge Fund

Warrant #: VW 00000334	**Payee Name: KEYWORTHS HARDWARE INC**		
0001110868	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	8 58
000111240 122911	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	62 72
00019855	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	21 99
		Warrant Total:	**93.29**
Warrant #: VW 00351492	**Payee Name: ALWAYS SAFETY AND 1ST AID INC**		
28173	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	179 70
		Warrant Total:	**179.70**
Warrant #: VW 00351500	**Payee Name: BACLIFF BUILDERS SUPPLY INC.**		
09947	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	202 40
		Warrant Total:	**202.40**
Warrant #: VW 00351510	**Payee Name: BROOKSIDE EQUIP SALES INC**		
IL28079	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	140 70
IL28089	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	70 26
IL28168	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	69 13
		Warrant Total:	**280.09**
Warrant #: VW 00351515	**Payee Name: CHERRY CRUSHED CONCRETE**		
144625	2301312120 - 5353014	FM & Lateral Road - Materials Flexible Base	1,316 62
144677	2301312120 - 5353014	FM & Lateral Road - Materials Flexible Base	2,677 28
144829	2301312120 - 5353014	FM & Lateral Road - Materials Flexible Base	2,865 72
		Warrant Total:	**6,859.62**
Warrant #: VW 00351522	**Payee Name: CLEVELAND ASPHALT PRODUCTS INC**		
10123	2301312120 - 5353011	FM & Lateral Road - Road Oils & Emulsions	6,085 70
		Warrant Total:	**6,085.70**
Warrant #: VW 00351536	**Payee Name. DIAMOND HYDRAULICS INC**		
086413	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	57 31
		Warrant Total:	**57 31**
Warrant #: VW 00351549	**Payee Name: G & K SERVICES**		
1030753375	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	206 37
		Warrant Total:	**206.37**
Warrant #: VW 00351550	**Payee Name: G & K SERVICES**		
1030759283	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	165 13
		Warrant Total:	**165.13**

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Invoice Number	Account Info		Amount
Warrant #: VW 00351568	**Payee Name: GUSTAFSON, TERRI**		
DEC 2011 MLG	2301312110 - 5496100	Administration - Travel	80 65
		Warrant Total:	**80.65**
Warrant #: VW 00351573	**Payee Name. HERITAGE-CRYSTAL CLEAN LLC**		
11919867	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	1,229 30
11925919	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	272 75
		Warrant Total:	**1,502.05**
Warrant #: VW 00351579	**Payee Name: HOME DEPOT**		
7020171	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	145 04
7020189	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	83 84
		Warrant Total:	**228.88**
Warrant #: VW 00351580	**Payee Name: HOUSTON 2 WAY RADIO INC**		
0039175IN	2301312110 - 5310000	Administration - Supplies and Materials	64 00
		Warrant Total:	**64.00**
Warrant #: VW 00351614	**Payee Name: LIGGIOS TIRE AND SERVICE CENTER INC**		
181673	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	14 50
181761	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	14 50
181765	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	39 75
181801	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	14 50
181815	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	17 00
		Warrant Total:	**100.25**
Warrant #: VW 00351627	**Payee Name MARTIN RESOURCE MANAGEMENT**		
291537	2301312120 - 5353011	FM & Lateral Road - Road Oils & Emulsions	3,229 80
291538	2301312120 - 5353011	FM & Lateral Road - Road Oils & Emulsions	3,956 40
291539	2301312120 - 5353011	FM & Lateral Road - Road Oils & Emulsions	3,397 80
292241	2301312120 - 5353011	FM & Lateral Road - Road Oils & Emulsions	3,087 00
292242	2301312120 - 5353011	FM & Lateral Road - Road Oils & Emulsions	3,924 90
292408	2301312120 - 5353011	FM & Lateral Road - Road Oils & Emulsions	2,259 60
292432	2301312120 - 5353011	FM & Lateral Road - Road Oils & Emulsions	3,047 10
		Warrant Total:	**22,902 60**
Warrant # VW 00351631	**Payee Name: MCREE FORD INC**		
356428	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	13 20
		Warrant Total:	**13 20**
Warrant #: VW 00351635	**Payee Name: MILT'S SEAFOOD PLANT INC**		
3820	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	36 00
		Warrant Total:	**36.00**
Warrant #: VW 00351639	**Payee Name: MUNRO'S UNIFORM SERVICES LTD**		
64830	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	32 50
64831	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	6 50
64832	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	45 00
64833	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	32 55
64834	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	37 00
64835	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	45 50
64836	2301312120 - 5312101	FM & Lateral Road - Uniform Expense	73 25

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Invoice Number	Account Info		Amount
		Warrant Total.	**272.30**
Warrant #: VW 00351670	**Payee Name. SANTA FE AUTO PARTS INC**		
76291	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	10 62
76903	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	135 45
		Warrant Total:	**146.07**
Warrant #: VW 00351675	**Payee Name· SEASIDE ENTERPRISES INC**		
192530	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	21 16
192919	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	27 75
		Warrant Total:	**48.91**
Warrant #: VW 00351684	**Payee Name: SOUTHWEST T & I INC**		
1945942	2301312110 - 5481000	Administration - Contract Service	203 00
		Warrant Total:	**203.00**
Warrant #. VW 00351688	**Payee Name: STEVEN-SHARON CORPORATION**		
396488000	2301312120 - 5310000	FM & Lateral Road - Supplies and Materials	111 59
		Warrant Total:	**111 59**
Warrant #: VW 00351709	**Payee Name: TRUCK PARTS & SPECIALISTS INC**		
519696	2301312120 - 5423000	FM & Lateral Road - Maint/Repairs Equipment	141 10
		Warrant Total:	**141 10**
Warrant #. VW 00351718	**Payee Name: WALMART**		
04033	2301312110 - 5310000	Administration - Supplies and Materials	294 76
		Warrant Total:	**294.76**
		FUND 2301 TOTAL:	**40,274.97**

FUND: 2303 Farm to Market Lateral Road

Warrant #: VW 00351659	**Payee Name: PICTOMETRY INTERNATIONAL CORP**		
122111GALVTX	2303314300 - 5310000	Real Estate Services - Supplies and Materials	2,220 35
		Warrant Total.	**2,220.35**
		FUND 2303 TOTAL:	**2,220.35**

FUND: 2370 Flood Control Fund

Warrant #· VW 00000334	**Payee Name. KEYWORTHS HARDWARE INC**		
000112100	2370296121 - 5310000	Seawall Maintenance - Supplies and Materials	30 77
000112196	2370296121 - 5310000	Seawall Maintenance - Supplies and Materials	6 57
		Warrant Total:	**37.34**
Warrant #: VW 00351653	**Payee Name: OWEN ELECTRIC SUPPLY**		
3975441225	2370296121 - 5423401	Seawall Maintenance - Maint/Repairs Pumps & Gates	75 75
		Warrant Total.	**75.75**
Warrant #: VW 00351670	**Payee Name· SANTA FE AUTO PARTS INC**		
76381	2370296121 - 5423000	Seawall Maintenance - Maint/Repairs Equipment	457 59

Invoice Number	Account Info		Amount
		Warrant Total:	**457.59**
Warrant #: VW 00351722	**Payee Name WELSH, MATTHEW SEAN**		
DEC 2011 MLG	2370296110 - 5496301	Building Inspector - Auto Mileage	706 52
		Warrant Total:	**706.52**
		FUND 2370 TOTAL:	**1,277.20**

FUND: 2410 Mosquito Control District Fund

Warrant #. VW 00000334	**Payee Name: KEYWORTHS HARDWARE INC**		
000111458	2410411100 - 5424000	Mosquito Control District - Maint & Repairs Buildings	6 49
000112030	2410411100 - 5424000	Mosquito Control District - Maint & Repairs Buildings	32 01
000112200	2410411100 - 5424000	Mosquito Control District - Maint & Repairs Buildings	22 46
		Warrant Total:	**60.96**
Warrant #: VW 00351591	**Payee Name: JOHNSON AUTOMOTIVE SUPPLY AND PAINT**		
275209	2410411100 - 5310000	Mosquito Control District - Supplies and Materials	308 55
275257	2410411100 - 5310000	Mosquito Control District - Supplies and Materials	37 71
		Warrant Total:	**346.26**
Warrant #: VW 00351598	**Payee Name. KLD LABS INC**		
DC4298	2410411100 - 5310000	Mosquito Control District - Supplies and Materials	3,484 22
		Warrant Total:	**3,484.22**
Warrant #: VW 00351699	**Payee Name: TEXAS FLIGHT LINE LC**		
331	2410411100 - 5423101	Mosquito Control District - Maint/Repairs Aircraft	2,798 01
		Warrant Total:	**2,798.01**
		FUND 2410 TOTAL:	**6,689.45**

FUND: 2841 Juvenile Probation-State Aid

Warrant #. VW 00351498	**Payee Name: ASTIN, JULIE A**		
DEC 2011 MLG	2841256124 - 5496301	Co Cash Match - St Aid A - Auto Mileage	47 18
		Warrant Total:	**47.18**
Warrant #: VW 00351539	**Payee Name: EFFINGER, ERIKA**		
DEC 2011 MLG	2841256124 - 5496301	Co Cash Match - St Aid A - Auto Mileage	84 36
		Warrant Total:	**84.36**
Warrant #. VW 00351603	**Payee Name: LARSON, FAITH**		
DEC 2011 MLG	2841256124 - 5496301	Co Cash Match - St Aid A - Auto Mileage	126 54
		Warrant Total:	**126.54**
Warrant #: VW 00351613	**Payee Name: LEWIS, SIRDON**		
DEC 2011	2841256124 - 5496301	Co Cash Match - St Aid A - Auto Mileage	225 33
		Warrant Total:	**225.33**
Warrant #: VW 00351637	**Payee Name: MORGAN, LE'NARD D.**		
DEC 2011 MLG	2841256124 - 5496301	Co Cash Match - St Aid A - Auto Mileage	136 53

Invoice Number	Account Info		Amount
		Warrant Total:	**136.53**
Warrant #: VW 00351656	**Payee Name. PARISH, ERVIN R**		
DEC 2011 MLG	2841256110 - 5496301	State Aid Grant A - Auto Mileage	110 45
		Warrant Total:	**110.45**
Warrant #: VW 00351657	**Payee Name: PEGASUS SCHOOLS INC**		
9121	2841256110 - 5441101	State Aid Grant A - Residential Services	18,819 79
		Warrant Total.	**18,819.79**
Warrant #: VW 00351678	**Payee Name: SHELTERING HARBOUR**		
DEC 2011	2841256110 - 5441101	State Aid Grant A - Residential Services	10,368 75
WASHINGTON RMB	2841256110 - 5312100	State Aid Grant A - Clothing Expense	199 95
		Warrant Total:	**10,568.70**
		FUND 2841 TOTAL:	**30,118.88**

FUND: 2848 Juv Jst Alt Education Program

Warrant #· VW 00351555	**Payee Name: GEARING, MERRICK**		
NOV-DEC 11 SRVC	2848256144 - 5495095	Commitment Reduction Program C - Educational Programs	950 00
		Warrant Total:	**950.00**
		FUND 2848 TOTAL:	**950.00**

FUND: 2864 Auto Crimes Task Force Grant

Warrant #. VW 00351493	**Payee Name: AMERICAN FENCE AND SUPPLY CO**		
000146007	2864211126 - 5310001	Auto Crime Task Force - Depart Supplies-Non Cap FFE	63 78
		Warrant Total:	**63 78**
Warrant #· VW 00351499	**Payee Name: AT&T MOBILITY**		
01052012	2864211126 - 5492100	Auto Crime Task Force - Wireless MCT Service	56 21
		Warrant Total.	**56.21**
Warrant #: VW 00351518	**Payee Name: CITY OF GALVESTON**		
NOV11 BLACKWELL	2864211126 - 5100000	Auto Crime Task Force - Salaries	9,814 00
NOV11 BLACKWELL	2864211126 - 5130000	Auto Crime Task Force - Overtime	764 46
		Warrant Total:	**10,578.46**
Warrant #· VW 00351519	**Payee Name: CITY OF LA MARQUE**		
OCT/NOV11SANDERS	2864211126 - 5100000	Auto Crime Task Force - Salaries	8,454 01
OCT/NOV11SANDERS	2864211126 - 5130000	Auto Crime Task Force - Overtime	982 73
		Warrant Total.	**9,436.74**
Warrant #: VW 00351540	**Payee Name: EXXON CREDIT CARD CENTER**		
28067404	2864211126 - 5322010	Auto Crime Task Force - Auto Fuel Expense	46 99
		Warrant Total:	**46.99**
Warrant #: VW 00351544	**Payee Name: FLEETCOR TECHNOLOGIES DBA CHEVRON**		
32578124	2864211126 - 5322010	Auto Crime Task Force - Auto Fuel Expense	86 37

Invoice Number	Account Info		Amount
		Warrant Total:	**86.37**
Warrant #: VW 00351647	**Payee Name: NEXTEL OF TEXAS INC**		
990957730069	2864211126 - 5492111	Auto Crime Task Force - Telephone Cellular	866 82
		Warrant Total:	**866.82**
Warrant #: VW 00351685	**Payee Name: SPRINT SPECTRUM LP**		
692298810049	2864211126 - 5492100	Auto Crime Task Force - Wireless MCT Service	435 91
		Warrant Total:	**435.91**
Warrant #: VW 00351715	**Payee Name: VERIZON**		
6671382111	2864211126 - 5492100	Auto Crime Task Force - Wireless MCT Service	320 38
		Warrant Total:	**320.38**
		FUND 2864 TOTAL:	**21,891.66**

FUND: 2914 CDBG Housing Program

Warrant #: VW 00000332	**Payee Name. DSW HOMES LLC**		
211071	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	3,130 54
211073	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	4,802 39
212286	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	1,996 20
212554	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	4,579 52
312457	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,888 68
312457	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	38,886 86
312471	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,846 48
312471	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	28,364 86
312471	2914152514 - 5519010	Ownr-Occupied Elevation - Contractor - Construction	20,100 00
312748	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,960 92
312748	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	23,109 24
312748	2914152514 - 5519010	Ownr-Occupied Elevation - Contractor - Construction	16,500 00
		Warrant Total:	**128,773 53**
Warrant #: VW 00351494	**Payee Name: AMERICAN HOME BUILDERS INC.**		
CB12735RET	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	10,912 68
CG12688 RET	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	11,664 90
IA1265702	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,740 89
IA1265702	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	37 408 93
JE1187102	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,215 91
JE1187102	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	42,159 12
JH12466RET	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	12,552 68
MCC1238302	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,430 89
MCC1238302	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	34,308 93
MF1295902	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,392 37
MF1295902	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	33,923 67
MJ1286902	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3 401 20
MJ1286902	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	34,012 00
MS1162203	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-5,058 07
MS1162203	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	50,580 75
MW10816RET	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	13,477 59
NH11469RET	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	9,352 80
PS1247302	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,740 89

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Invoice Number	Account Info		Amount
PS1247302	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	37,408 93
RJ12098303	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,532 29
RJ12098303	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	35,322 94
SS1296901	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,159 03
SS1296901	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	31,590 33
TMCL10680RET	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	11,889 50
		Warrant Total:	**372,894 21**

Warrant #: VW 00351495 **Payee Name: AMERICAN HOMESTAR CORPORATION**

1047B	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	17,513 18
1053B	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	11,007.30
1055B	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	12,734 60
1058	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-6,349 20
1058	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	63,492 00
		Warrant Total.	**98,397.88**

Warrant #: VW 00351505 **Payee Name: BGB INTERESTS LP**

113173	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,963 82
113173	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	39,638 25
113913	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-2,907 67
113913	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	29,076 75
114073	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-2,998 74
114073	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	29,987 43
115293	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3 646 14
115293	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	36,461 43
119943	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,291 54
119943	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	32,915 40
		Warrant Total:	**151,271.35**

Warrant #: VW 00351511 **Payee Name: BURGHLI HOMES PROMENADE HOMES JV**

1116610R	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	11,096 63
		Warrant Total:	**11,096.63**

Warrant #. VW 00351587 **Payee Name: JAHN-GALVESTON INSURANCE AGENCY INC**

22839 010312	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,833 00
22901 010412	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,502 01
22908 122211	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,190 00
22923 123011	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,002 00
22930 010512	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,681 00
22943 010412	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,054 00
22945 010312	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,518 00
22948 010612	2914152512 - 5519020	Ownr-Occupied Reconstruction - Vendor - 1st Yr Ins Cst	1,233 00
		Warrant Total:	**11,013.01**

Warrant #: VW 00351677 **Payee Name: SHELMARK ENGINEERING L.L.C.**

4814	2914152500 - 5481000	Administration - Contract Service	7,775 00
		Warrant Total:	**7,775.00**

Warrant #: VW 00351694 **Payee Name: SULLIVAN LAND SERVICES LTD**

2011778	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,022 60
2011778	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	40,226 09
2011780	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-4,029 44
2011780	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	40,294 37

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Invoice Number	Account Info		Amount
2011781	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-3,208 03
2011781	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	32,080 25
2011857	2914000000 - 2070001	CDBG Housing Program - Contract Payable Retainage	-6,975 95
2011857	2914152512 - 5519010	Ownr-Occupied Reconstruction - Contractor - Construction	69,759 48
		Warrant Total	**164,124.17**
		FUND 2914 TOTAL:	**945,345.78**

FUND: 2915 CDBG Infrastructure Program

Warrant #: VW 00351601 **Payee Name: KLOTZ ASSOC INC**

1211063	2915291016 - 5481000	County Wide Drainage - Contract Service	67,700 62
		Warrant Total:	**67,700.62**
		FUND 2915 TOTAL:	**67,700.62**

FUND: 2994 Disaster Recovery - Ike

Warrant #: VW 00351531 **Payee Name: CROWDER GULF JOINT VENTURE INC**

BOL0826090054	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-62 00
BOL0826090054	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	620 00
BOLPPDESWK292	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-172 00
BOLPPDESWK292	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,720 00
BOLPPDR00023A	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-30 00
BOLPPDR00023A	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	300 00
BOLPPDR00057A	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-10 00
BOLPPDR00057A	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	100 00
BOLPPDR00114R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-28 91
BOLPPDR00114R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	289 10
BOLPPDR00138R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-60 80
BOLPPDR00138R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	608 00
BOLPPDR00139R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-81 20
BOLPPDR00139R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	812 00
BOLPPDR00155R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-36 23
BOLPPDR00155R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	362 25
BOLPPDR00160A	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-35 00
BOLPPDR00160A	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	350 00
BOLPPDR00252	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-362 46
BOLPPDR00252	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	3,624 60
BOLPPDRE20013	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-17 36
BOLPPDRE20013	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	173 60
BOLPPDRE20074A	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-35 00
BOLPPDRE20074A	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	350 00
BOLPPDRE20145	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-16 80
BOLPPDRE20145	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	168 00
BOLPPDRE20201	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-239 47
BOLPPDRE20201	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	2,394 70
BOLPPDRE20228A	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-5 00
BOLPPDRE20228A	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	50 00
BOLPPDRE20229A	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-5 00
BOLPPDRE20229A	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	50 00
BOLPPDRE20231A	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-5 00

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Invoice Number	Account Info		Amount
BOLPPDRE20231A	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	50 00
BOLPPDRE20340R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-518 70
BOLPPDRE20340R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	5,187 00
BOLPPDRE20393	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-110 34
BOLPPDRE20393	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,103 38
BOLPPDRE20417R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-361 64
BOLPPDRE20417R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	3,616 38
BOLPPDRE20871	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-372 63
BOLPPDRE20871	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	3,726 25
BOLPPDRE20901	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-47 88
BOLPPDRE20901	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	478 80
BOLPPDRE20995	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-48 00
BOLPPDRE20995	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	480 00
BOLPPDRE21006	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-195 46
BOLPPDRE21006	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,954 60
BOLPPDRE21013	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-431 20
BOLPPDRE21013	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	4,312 00
BOLPPDRE21017	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-61 74
BOLPPDRE21017	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	617 40
BOLPPDRE21098	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-21 25
BOLPPDRE21098	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	212 52
BOLPPDRE2225	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-180 34
BOLPPDRE2225	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,803 38
BOLPPDRE22257	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-364 00
BOLPPDRE22257	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	3,640 00
BOLPPDRE2243R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-199 50
BOLPPDRE2243R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,995 00
BOLPPDRE2254	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-250 60
BOLPPDRE2254	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	2,506 00
BOLPPDRE2255	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-260 09
BOLPPDRE2255	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	2,600 85
BOLPPDRSWK211	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-32 00
BOLPPDRSWK211	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	320 00
BOLPPDRSWK212R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-929 63
BOLPPDRSWK212R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	9,296 25
BOLPPDRSWK213	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-605 38
BOLPPDRSWK213	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	6,053 75
BOLPPDRSWK243R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-1,811 38
BOLPPDRSWK243R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	18,113 75
BOLPPDRSWK246	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-100 00
BOLPPDRSWK246	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,000 00
BOLPPDRSWK247	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-112 00
BOLPPDRSWK247	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,120 00
BOLPPDRSWK248	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-248 38
BOLPPDRSWK248	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	2,483 75
BOLPPDRSWK249	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-328 00
BOLPPDRSWK249	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	3,280 00
BOLPPDRSWK250	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-327 25
BOLPPDRSWK250	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	3,272 50
BOLPPDRSWK251	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-194 37
BOLPPDRSWK251	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,943 70
BOLPPDRSWK289	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-30 00
BOLPPDRSWK289	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	300 00
BOLPPDRSWK290	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-30 00

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Invoice Number	Account Into		Amount
BOLPPDRSWK290	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	300 00
BOLPPDRSWK291	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-96 08
BOLPPDRSWK291	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	960 80
BOLPPDRSWK293R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-427 74
BOLPPDRSWK293R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	4,277 43
BOLPPDRSWK294	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-273 38
BOLPPDRSWK294	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	2,733 75
BOLPPDRSWK295R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-105 00
BOLPPDRSWK295R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,050 00
BOLPPDRSWK296	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-1,725 94
BOLPPDRSWK296	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	17 259 38
BOLPPDRSWK297R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-2,218 77
BOLPPDRSWK297R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	22,187 65
BOLPPDRSWK298	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-333 86
BOLPPDRSWK298	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	3,338 60
BOLPPDRSWK299	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-98 50
BOLPPDRSWK299	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	985 00
BOLPPDRSWK300	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-76 00
BOLPPDRSWK300	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	760 00
BOLPPDRSWK301	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-399 81
BOLPPDRSWK301	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	3,998 13
BOLPPDRSWK303R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-664 31
BOLPPDRSWK303R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	6,643 12
BOLPPDRSWK304	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-46 00
BOLPPDRSWK304	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	460 00
BOLPPDRSWK305R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-252 70
BOLPPDRSWK305R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	2,527 00
BOLPPDRSWK306	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-94 26
BOLPPDRSWK306	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	942 60
BOLPPDRSWK3071	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-861 40
BOLPPDRSWK3071	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	8,614 00
BOLPPDRSWK308	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-486 34
BOLPPDRSWK308	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	4,863 35
BOLPPDRSWK309	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-198 16
BOLPPDRSWK309	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,981 58
BOLPPDRSWK310	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-550 75
BOLPPDRSWK310	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	5,507 50
BOLPPDRSWK311	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-291 87
BOLPPDRSWK311	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	2,918 68
BOLPPDRSWK313	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-639 87
BOLPPDRSWK313	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	6,398 68
BOLPPDRSWK314R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-181 06
BOLPPDRSWK314R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,810 63
BOLPPDRSWK315	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-1,093 94
BOLPPDRSWK315	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	10,939 38
BOLPPDRSWK316	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-1,595 08
BOLPPDRSWK316	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	15,950 75
BOLPPDRSWK318	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-375 80
BOLPPDRSWK318	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	3,757 98
BOLPPDRSWK319R	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-1,876 07
BOLPPDRSWK319R	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	18,760 65
BOLPPDRSWK320	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-248 53
BOLPPDRSWK320	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	2,485 30
BOLPPDRSWK321	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-2,037 50

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Invoice Number	Account Into		Amount
BOLPPDRSWK321	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	20,375 00
BOLPPDRSWK322	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-533 75
BOLPPDRSWK322	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	5,337 50
BOLPPDRSWK323	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-84 00
BOLPPDRSWK323	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	840 00
BOLPPDRSWK324	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-1,667 06
BOLPPDRSWK324	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	16,670 63
BOLPPDRSWK325	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-274 13
BOLPPDRSWK325	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	2,741 25
BOLPPDRSWK326	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-43 00
BOLPPDRSWK326	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	430 00
BOLPPDRSWK327	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-521 56
BOLPPDRSWK327	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	5,215 63
BOLPPDRSWK328	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-631 88
BOLPPDRSWK328	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	6,318 75
BOLPPDRSWK329	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-1,885 19
BOLPPDRSWK329	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	18,851 88
BOLPPDRSWK330	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-896 69
BOLPPDRSWK330	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	8,966 90
BOLPPDRSWK331	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-251 86
BOLPPDRSWK331	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	2 518 60
BOLPPDRSWK332	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-746 81
BOLPPDRSWK332	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	7,468 05
BOLPPDRSWK333	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-158 57
BOLPPDRSWK333	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,585 70
BOLPPDRSWK334	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-849 88
BOLPPDRSWK334	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	8,498 75
BOLPPDRSWK335	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-107 00
BOLPPDRSWK335	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,070 00
BOLPPDRW20547	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-398 72
BOLPPDRW20547	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	3,987 20
BOLPPDSWK302	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-124 00
BOLPPDSWK302	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	1,240 00
GCA032009003	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-267 24
GCA032009003	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	2,672 35
GCA032009004	2994000000 - 2070001	Disaster Recovery - Ike - Contract Payable Retainage	-20 39
GCA032009004	2994299161 - 5481000	TMF200 Priv Prop Debris Rmvl - Contract Service	203 87
		Warrant Total:	**324,759.07**

Warrant #. VW 00351654 **Payee Name: PADGETT SHORELINE CONST INC**

54	2994299734 - 5481000	Bacliff Pier, Ramp & Erosion - Contract Service	9,500 00
		Warrant Total:	**9,500.00**

FUND 2994 TOTAL: 334,259.07

FUND: 3100 County Capital Projects Fund

Warrant #: VW 00351698 **Payee Name: TEXAS CONFERENCE OF URBAN COUNTIES**

6179	3100159126 - 5754100	IT Capital Projects - IFAS 7i Conversion	182,682 00
		Warrant Total:	**182,682.00**

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Invoice Number	Account Into		Amount
		FUND 3100 TOTAL:	**182,682.00**

FUND: 3120 Limited Tax Cnty Bldg Bds Sr09

Warrant #: VW 00351497 **Payee Name: ARDENT CONSTRUCTION LLC**

10 123111	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-1,420 98
10 123111	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	28,419 60
		Warrant Total.	**26,998 62**

Warrant #: VW 00351528 **Payee Name: CRESCENT ENGINEERING COMPANY INC**

14 121811	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contiact Payable Retaina	-14,705 94
14 121811	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	294,118 70
		Warrant Total:	**279,412.76**

Warrant #: VW 00351534 **Payee Name: DATAVOX INC.**

DS142506	3120179135 - 5746010	Mid-County Annex - Capitalized Furn,Fix,& Equip	5,298 40
		Warrant Total:	**5,298.40**

Warrant #: VW 00351559 **Payee Name: GOLDEN WEST ENTERPRISES INC**

7 123111	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-831 32
7 123111	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	16,626 49
		Warrant Total:	**15,795.17**

Warrant #: VW 00351567 **Payee Name. GURRY MECHANICAL L.P.**

13 123111	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-253 25
13 123111	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	5,065 00
		Warrant Total:	**4,811.75**

Warrant #: VW 00351572 **Payee Name: HENRY SCHEIN INC**

0526006901	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	52,198 66
		Warrant Total·	**52,198 66**

Warrant # VW 00351581 **Payee Name· HUGH PATRICK CONSTRUCTORS**

18 123111	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	77,167 75
		Warrant Total:	**77,167.75**

Warrant #: VW 00351584 **Payee Name: J W KELSO COMPANY INC**

205005A	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-3,872 15
205005A	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	77,443 00
205006E	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-65 90
205006E	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	1,318 00
205008C 123111	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-2,334 50
205008C 123111	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	46,690 00
205011D	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-6,659 96
205011D	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	133,199 19
		Warrant Total:	**245,717 68**

Warrant # VW 00351586 **Payee Name: JACOBS ENGINEERING GROUP INC**

F8W91603121211	3120179135 - 5728121	Mid-County Annex - Capital Const-Architect Fees	4,200 00
		Warrant Total:	**4,200.00**

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Invoice Number	Account Info		Amount
Warrant #: VW 00351590	**Payee Name. JOE AGUIRRE TILE INC**		
8 123111	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-2,329 84
8 123111	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	46,596 71
		Warrant Total.	**44,266 87**
Warrant #: VW 00351633	**Payee Name: MILAM AND COMPANY PAINTING INC**		
8 122511	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-1,698 65
8 122511	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	33,973 00
		Warrant Total:	**32,274.35**
Warrant #· VW 00351636	**Payee Name: MITCHELL CHUOKE PLUMBING CO**		
5 123011	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-1,400 00
5 123011	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	28,000 00
		Warrant Total.	**26,600.00**
Warrant #: VW 00351646	**Payee Name: NETWORK CABLING SERVICES INC**		
5 113011	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-494 52
5 113011	3120179135 - 5740002	Mid-County Annex - Special Equipment	9,890 30
		Warrant Total.	**9,395.78**
Warrant #· VW 00351664	**Payee Name: R W LUCAS CONSTRUCTION LLC**		
5 121911	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-1,376 67
5 121911	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	27,533 40
		Warrant Total:	**26,156.73**
Warrant #. VW 00351682	**Payee Name: SOUTHEAST FIRE PROTECTION LP**		
8 122011	3120000000 - 2070001	Limited Tax Cnty Bldg Bds Sr09 - Contract Payable Retaina	-855 00
8 122011	3120179135 - 5722000	Mid-County Annex - Construction Bldg Capital Outl	17,100 00
		Warrant Total:	**16,245.00**
		FUND 3120 TOTAL:	**866,539.52**

FUND: 3307 Unltd Tax Road Bonds Sr 2003B

Warrant #· VW 00351663	**Payee Name: R W LUCAS CONSTRUCTION LLC**		
5 122811 FT TRAV	3307000000 - 2070001	Unltd Tx Road Bonds Sr 2003B - Contract Payable Retainage	-2,120 58
5 122811 FT TRAV	3307312200 - 5731010	Fort Travis Park - Construction & Improv Roads	42,411 60
		Warrant Total.	**40,291.02**
		FUND 3307 TOTAL:	**40,291.02**

FUND: 3312 Unltd Tax Road Bonds Sr 2009

Warrant # VW 00351523	**Payee Name: COBB FENDLEY & ASSOCIATES**		
235811	3312312111 - 5731127	Non-County Roads - Hughes Road	1,076 10
236151	3312312111 - 5731127	Non-County Roads - Hughes Road	11,977 70
		Warrant Total:	**13,053 80**
Warrant # VW 00351601	**Payee Name· KLOTZ ASSOC INC**		
1111117	3312312111 - 5731128	Non-County Roads - Melody Lane	9,509 28

Invoice Number	Account Info		Amount
1211042	3312312111 - 5731128	Non-County Roads - Melody Lane	8,474 67
		Warrant Total	**17,983.95**
Warrant #: VW 00351602	**Payee Name: LAMAR, VIRGINIA L**		
148	3312000000 - 2295020	Unltd Tax Road Bonds Sr 2009 - ROW Acquisition for State	4 968 00
		Warrant Total:	**4,968.00**
Warrant #: VW 00351632	**Payee Name: METRO CITY CONSTRUCTION LP**		
2425	3312000000 - 2070001	Unltd Tax Road Bonds Sr 2009 - Contract Payable Retainage	-13,584 81
2425	3312312111 - 5731126	Non-County Roads - Owens Drive	271,696 28
		Warrant Total:	**258,111.47**
Warrant #: VW 00351663	**Payee Name: R W LUCAS CONSTRUCTION LLC**		
8 121911 LAWRENC	3312000000 - 2070001	Unltd Tax Road Bonds Sr 2009 - Contract Payable Retainage	-11,291 10
8 121911 LAWRENC	3312312112 - 5731138	County Road - Lawrence Rd	225,821 94
		Warrant Total.	**214,530.84**
Warrant #: VW 00351664	**Payee Name: R W LUCAS CONSTRUCTION LLC**		
4 113011 6TH TC	3312000000 - 2070001	Unltd Tax Road Bonds Sr 2009 - Contract Payable Retainage	-3,869 21
4 113011 6TH TC	3312312111 - 5731173	Non-County Roads - 6th Street	77,384 20
		Warrant Total.	**73,514.99**
Warrant #: VW 00351681	**Payee Name: SOUTH LAND TITLE LLC**		
577	3312000000 - 2295020	Unltd Tax Road Bonds Sr 2009 - ROW Acquisition for State	256 00
		Warrant Total.	**256.00**
		FUND 3312 TOTAL:	**582,419.05**

FUND: 7605 Escrow Fund

Warrant #: VW 00351541	**Payee Name: EZ - TAN**		
99644	7605000000 - 2473030	Escrow Fund - CO Crt Restit-Due to Victims	300 00
		Warrant Total:	**300 00**
Warrant #: VW 00351542	**Payee Name: FARIS, BASAM**		
99975	7605000000 - 2473030	Escrow Fund - CO Crt Restit-Due to Victims	35 00
		Warrant Total:	**35 00**
Warrant #: VW 00351592	**Payee Name: JOHNSON, CHERYL**		
SHRF SL 120611	7605000000 - 2495835	Escrow Fund - TX SL 04TX0361	11,184 00
SHRF SL 120611	7605000000 - 2495836	Escrow Fund - TX SL 05TX0140	5,854 32
SHRF SL 120611	7605000000 - 2495838	Escrow Fund - TX SL 08TX0528	3,757 88
SHRF SL 120611	7605000000 - 2495839	Escrow Fund - TX SL 09TX0455	989 18
SHRF SL 120611	7605000000 - 2495841	Escrow Fund - TX SL 10TX0122	10,427 95
SHRF SL 120611	7605000000 - 2495844	Escrow Fund - TX SL 10TX0398	5,261 00
SHRF SL 120611	7605000000 - 2495845	Escrow Fund - TX SL 10TX0521	9,146 60
SHRF SL 120611	7605000000 - 2495847	Escrow Fund - TX SL 10TX0723	8,623 21
		Warrant Total:	**55,244.14**
Warrant #: VW 00351617	**Payee Name: LOPEZ, LINDA**		
99816	7605000000 - 2473030	Escrow Fund - CO Crt Restit-Due to Victims	297 60

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Info			Amount
			Warrant Total:	**297 60**
Warrant #: VW 00351621	**Payee Name: LYN WINGERT & ASSOCIATES**			
RESALES 31 91111	7605000000 - 2490694	Escrow Fund - Resale 05TX0589		218 87
RESALES 31 91111	7605000000 - 2490695	Escrow Fund - Resale 05TX0687		211 56
RESALES 31 91111	7605000000 - 2490696	Escrow Fund - Resale 07TX0367		117 00
RESALES 31 91111	7605000000 - 2490697	Escrow Fund - Resale 09TX0481		250 00
SHRF SL 120611	7605000000 - 2495835	Escrow Fund - TX SL 04TX0361		250 00
SHRF SL 120611	7605000000 - 2495836	Escrow Fund - TX SL 05TX0140		250 00
SHRF SL 120611	7605000000 - 2495838	Escrow Fund - TX SL 08TX0528		250 00
SHRF SL 120611	7605000000 - 2495839	Escrow Fund - TX SL 09TX0455		250 00
SHRF SL 120611	7605000000 - 2495841	Escrow Fund - TX SL 10TX0122		250 00
SHRF SL 120611	7605000000 - 2495844	Escrow Fund - TX SL 10TX0398		250 00
SHRF SL 120611	7605000000 - 2495845	Escrow Fund - TX SL 10TX0521		250 00
SHRF SL 120611	7605000000 - 2495847	Escrow Fund - TX SL 10TX0723		250 00
			Warrant Total:	**2,797.43**
Warrant #: VW 00351640	**Payee Name. MURRAY, JASON**			
CT CST SS 120611	7605000000 - 2495835	Escrow Fund - TX SL 04TX0361		391 00
CT CST SS 120611	7605000000 - 2495836	Escrow Fund - TX SL 05TX0140		577 00
CT CST SS 120611	7605000000 - 2495838	Escrow Fund - TX SL 08TX0528		349 00
CT CST SS 120611	7605000000 - 2495839	Escrow Fund - TX SL 09TX0455		712 00
CT CST SS 120611	7605000000 - 2495841	Escrow Fund - TX SL 10TX0122		547 00
CT CST SS 120611	7605000000 - 2495844	Escrow Fund - TX SL 10TX0398		589 00
CT CST SS 120611	7605000000 - 2495845	Escrow Fund - TX SL 10TX0521		730 00
CT CST SS 120611	7605000000 - 2495847	Escrow Fund - TX SL 10TX0723		1,090 00
			Warrant Total:	**4,985.00**
Warrant #: VW 00351641	**Payee Name: MURRAY, JASON**			
EX FDS 120611	7605000000 - 2495836	Escrow Fund - TX SL 05TX0140		10,143 68
EX FDS 120611	7605000000 - 2495838	Escrow Fund - TX SL 08TX0528		24,968 12
EX FDS 120611	7605000000 - 2495839	Escrow Fund - TX SL 09TX0455		0 82
EX FDS 120611	7605000000 - 2495841	Escrow Fund - TX SL 10TX0122		16,600 05
EX FDS 120611	7605000000 - 2495845	Escrow Fund - TX SL 10TX0521		0 40
EX FDS 120611	7605000000 - 2495847	Escrow Fund - TX SL 10TX0723		0 79
			Warrant Total:	**51,713.86**
Warrant #: VW 00351642	**Payee Name: MURRAY, JASON**			
EX FDS SS 120611	7605000000 - 2495840	Escrow Fund - TX SL 10TX0029		5,324 67
EX FDS SS 120611	7605000000 - 2495842	Escrow Fund - TX SL 10TX0138		5,587 29
EX FDS SS 120611	7605000000 - 2495843	Escrow Fund - TX SL 10TX0175		8,882 32
EX FDS SS 120611	7605000000 - 2495846	Escrow Fund - TX SL 10TX0642		8,119 19
EX FDS SS 120611	7605000000 - 2495847	Escrow Fund - TX SL 10TX0723		14,782 70
			Warrant Total	**42,696.17**
Warrant #: VW 00351643	**Payee Name: MURRAY, JASON**			
RSL#31 091111	7605000000 - 2490694	Escrow Fund - Resale 05TX0589		504 71
RSL#31 091111	7605000000 - 2490695	Escrow Fund - Resale 05TX0687		369 81
RSL#31 091111	7605000000 - 2490696	Escrow Fund - Resale 07TX0367		304 19
RSL#31 091111	7605000000 - 2490697	Escrow Fund - Resale 09TX0481		416 00
			Warrant Total:	**1,594.71**
Warrant #: VW 00351649	**Payee Name: OMNI BASE SERVICES INC**			

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Info		Amount
OCT-DEC 11 JP1	7605000000 - 2472050	Escrow Fund - Omnibase Ser Liability	192 00
		Warrant Total.	**192.00**
Warrant #: VW 00351650	**Payee Name: OMNI BASE SERVICES INC**		
OCT-DEC 11 JP2	7605000000 - 2472050	Escrow Fund - Omnibase Ser Liability	112 00
		Warrant Total:	**112 00**
Warrant #: VW 00351651	**Payee Name: OMNI BASE SERVICES INC**		
OCT-DEC 11 JP3	7605000000 - 2472050	Escrow Fund - Omnibase Ser Liability	1,054 92
		Warrant Total.	**1,054.92**
Warrant #: VW 00351660	**Payee Name: POOR, SHERIFF FREDDIE**		
SHRF SL 120611	7605000000 - 2495835	Escrow Fund - TX SL 04TX0361	675 00
SHRF SL 120611	7605000000 - 2495836	Escrow Fund - TX SL 05TX0140	675 00
SHRF SL 120611	7605000000 - 2495838	Escrow Fund - TX SL 08TX0528	675 00
SHRF SL 120611	7605000000 - 2495839	Escrow Fund - TX SL 09TX0455	675 00
SHRF SL 120611	7605000000 - 2495841	Escrow Fund - TX SL 10TX0122	675 00
SHRF SL 120611	7605000000 - 2495844	Escrow Fund - TX SL 10TX0398	900 00
SHRF SL 120611	7605000000 - 2495845	Escrow Fund - TX SL 10TX0521	900 00
SHRF SL 120611	7605000000 - 2495847	Escrow Fund - TX SL 10TX0723	900 00
		Warrant Total:	**6,075.00**
Warrant #: VW 00351661	**Payee Name: PUTONTI & ESCOVER PC**		
CV0059408	7605000000 - 2295016	Escrow Fund - Proceed Held for Owner	3 00
		Warrant Total.	**3.00**
Warrant #: VW 00351693	**Payee Name: STUCKER, WILLIAM**		
175888 122811	7605000000 - 2473030	Escrow Fund - CO Crt Restit-Due to Victims	10 00
		Warrant Total:	**10.00**
Warrant #: VW 00351702	**Payee Name: TEXAS PARKS AND WILDLIFE DEPT**		
NOV 11 JP6 FEES	7605000000 - 2476007	Escrow Fund - Tx Parks & Wildlife Fines 85%	963 90
		Warrant Total:	**963.90**
Warrant #: VW 00351703	**Payee Name: TEXAS PARKS AND WILDLIFE DEPT**		
DEC 11 JP1 FEES	7605000000 - 2476007	Escrow Fund - Tx Parks & Wildlife Fines 85%	6,929 26
		Warrant Total:	**6,929 26**
Warrant #: VW 00351704	**Payee Name: TEXAS PARKS AND WILDLIFE DEPT**		
DEC 11 JP2 FEES	7605000000 - 2476007	Escrow Fund - Tx Parks & Wildlife Fines 85%	1,103 01
		Warrant Total:	**1,103.01**
Warrant #: VW 00351724	**Payee Name: WILLIAMS JR, BILLY A**		
09TX0455 AD LITE	7605000000 - 2495839	Escrow Fund - TX SL 09TX0455	500 00
		Warrant Total:	**500.00**
		FUND 7605 TOTAL:	**176,607.00**

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Summary of All Funds

Fund		Amount
1101	General Fund	319,145 15
2131	DA Seized Funds Afte Aft 10/89	293 00
2211	Law Library	1,357 97
2212	Mediation Services Prog Fund	1,430 00
2230	Juvenile Justice Fund	4,640 33
2242	Sheriff's Seizure Aft 10/89	32,900 39
2301	Road & Bridge Fund	40 274 97
2303	Farm to Market Lateral Road	2,220 35
2370	Flood Control Fund	1,277 20
2410	Mosquito Control District Fund	6,689 45
2841	Juvenile Probation-State Aid	30,118 88
2848	Juv Jst Alt Education Program	950 00
2864	Auto Crimes Task Force Grant	21,891 66
2914	CDBG Housing Program	945,345 78
2915	CDBG Infrastructure Program	67,700 62
2994	Disaster Recovery - Ike	334,259 07
3100	County Capital Projects Fund	182,682 00
3120	Limited Tax Cnty Bldg Bds Sr09	866,539 52
3307	Unltd Tax Road Bonds Sr 2003B	40,291 02
3312	Unltd Tax Road Bonds Sr 2009	582,419 05
7605	Escrow Fund	176,607 00
	Grand Total:	**3,659,033.41**

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Approved Order to pay by Commissioners Court this day January 10, 2012

Cliff Billingsley, County Auditor

absent

Mark A. Henry, Galveston County Judge

Patrick Doyle, Galveston County Commissioner, Pct 1

Kevin D. O'Brien, Galveston County Commissioner, Pct 2

ATTEST:

Stephen D. Holmes, Galveston County Commissioner, Pct 3

Dwight D. Sullivan, County Clerk

Kenneth Clark, Galveston County Commissioner, Pct 4

By: Brandy Chapman Deputy

Brandy Chapman

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351490	702471	ABL MANAGEMENT INC	01/10/12	16 818 82	MW	OH		
A200351491	013524	ALERT ALARM BURG AND FIRE PRO	01/10/12	10 00	MW	OH		
A200351492	707451	ALWAYS SAFETY AND 1ST AID INC	01/10/12	179 70	MW	OH		
A200351493	013037	AMERICAN FENCE AND SUPPLY CO	01/10/12	63 78	MW	OH		
A200351494	711832	AMERICAN HOME BUILDERS INC	01/10/12	372 894 21	MW	OH		
A200351495	711548	AMERICAN HOMESTAR CORPORATION	01/10/12	98 397 88	MW	OH		
A200351496	702478	AMERSON, RODGER DAN	01/10/12	700 00	MW	OH	B7	
A200351497	710983	ARDENT CONSTRUCTION LLC	01/10/12	26 998 62	MW	OH		
A200351498	704093	ASTIN, JULIE A	01/10/12	47 18	MW	OH		
A200351499	709784	AT&T MOBILITY	01/10/12	56 21	MW	OH		
A200351500	021030	BACLIFF BUILDERS SUPPLY INC	01/10/12	202 40	MW	OH		
A200351501	704183	BAY COLONY APARTMENTS	01/10/12	100 00	MW	OH	RE	
A200351502	401969	BENNETT, JAMES M	01/10/12	731 25	MW	OH	B7	
A200351503	403751	BERARDINELLI CORREIA, SHAUNA	01/10/12	715 00	MW	OH	B7	
A200351504	700686	BFI WASTE SERVICES OF TEXAS L	01/10/12	5 20	MW	OH		
A200351505	711795	BGB INTERESTS LP	01/10/12	151 271 35	MW	OH		
A200351506	401759	BOSWORTH PAPERS INC	01/10/12	445 00	MW	OH		
A200351507	712520	BOUNCE ENERGY INC	01/10/12	65 21	MW	OH		
A200351508	702559	BRIGGS LYNETTE	01/10/12	1,800 00	MW	OH	B7	
A200351509	024091	BROADWAY DRUG STORE	01/10/12	61 18	MW	OH		
A200351510	024240	BROOKSIDE EQUIP SALES INC	01/10/12	280 09	MW	OH		
A200351511	712308	BURGHLI HOMES PROMENADE HOMES	01/10/12	11 096 63	MW	OH		
A200351512	701478	CDW GOVERNMENT INC	01/10/12	379 68	MW	OH		
A200351513	702081	CFASER KENDRIC	01/10/12	212 50	MW	OH	B7	
A200351514	407782	CENTERPOINT ENERGY	01/10/12	164 65	MW	OH		
A200351515	712596	CHERRY CRUSHED CONCRETE	01/10/12	6 859 62	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351516	033985	CITY OF GALVESTON	01/10/12	196 39	MW	OH		
A200351517	033985	CITY OF GALVESTON	01/10/12	26,521 00	MW	OH		
A200351518	033985	CITY OF GALVESTON	01/10/12	10 578 46	MW	OH		
A200351519	033209	CITY OF LA MARQUE	01/10/12	9,436 74	MW	OH		
A200351520	403085	CITY OF TEXAS CITY	01/10/12	100 00	MW	OH		
A200351521	712273	CLEMENTS, CLYDE WESLEY	01/10/12	357 50	MW	OH	B7	
A200351522	710180	CLEVELAND ASPHALT PRODUCTS IN	01/10/12	6 085 70	MW	OH		
A200351523	707069	COBB FENDLEY & ASSOCIATES	01/10/12	13,053 80	MW	OH		
A200351524	034223	COLTZER, ROBERT G	01/10/12	6 388 15	MW	OH	B7	
A200351525	709565	COMMERCIAL WIRELESS SOLUTIONS	01/10/12	1 490 00	MW	OH		
A200351526	705337	CONZ, GLORIA	01/10/12	450 00	MW	OH		
A200351527	707222	CPI FOODS INC	01/10/12	2 110 00	MW	OH		
A200351528	709896	CRESCENT ENGINEERING COMPANY	01/10/12	279,412 76	MW	OH		
A200351529	VOID CONTINU	Void - Continued Stub	01/10/12	0 00	VM	OH		Void
A200351530	VOID CONTINU	Void - Continued Stub	01/10/12	0 00	VM	OH		Void
A200351531	708690	CROWDER GULF JOINT VENTURE IN	01/10/12	324,759 07	MW	OH		
A200351532	406688	CURRENT USA INC	01/10/12	133 63	MW	OH		
A200351533	704992	DAHLENBURG, MICHAEL L	01/10/12	150 00	MW	OH	B7	
A200351534	700678	DATAVOX INC	01/10/12	5,298 40	MW	OH		
A200351535	711809	DAVIS III, NEAL	01/10/12	357 50	MW	OH	B7	
A200351536	700546	DIAMOND HYDRAULICS INC	01/10/12	57 31	MW	OH		
A200351537	706153	DIAZ MARK A	01/10/12	650 00	MW	OH	B7	
A200351538	712656	DUNNAHOO, CHRISTOPHER	01/10/12	61 03	MW	OH		
A200351539	707318	EFFINGER ERIKA	01/10/12	84 36	MW	OH		
A200351540	403437	EXXON CREDIT CARD CENTER	01/10/12	46 99	MW	OH		
A200351541	714183	EZ - TAN	01/10/12	300 00	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351542	711783	PARIS BASAM	01/10/12	35 00	MW	OH		
A200351543	410365	FAUS, SALVADOR	01/10/12	227 50	MW	OH	B7	
A200351544	710210	FLEETCOR TECHNOLOGIES DBA CHE	01/10/12	566 96	MW	OH		
A200351545	410399	FOLEY KERRI	01/10/12	2,700 00	MW	OH	B7	
A200351546	711912	FORT PC M BRUCE	01/10/12	513 50	MW	OH	B7	
A200351547	713959	FOXHOVEN INC	01/10/12	50 000 00	MW	OH		
A200351548	704440	FULK GEORGE BYRON	01/10/12	1,105 00	MW	OH	B7	
A200351549	704625	G & K SERVICES	01/10/12	206 37	MW	OH		
A200351550	704625	G & K SERVICES	01/10/12	165 13	MW	OH		
A200351551	406195	GALVESTON COUNTY SHERIFF'S DE	01/10/12	213 81	MW	OH		
A200351552	071175	GALVESTON COUNTY WCID #1	01/10/12	47 34	MW	OH		
A200351553	708685	GARDLINE COMMUNICATIONS INC	01/10/12	2,295 01	MW	OH		
A200351554	711807	GARRETT LAW FIRM,THE	01/10/12	378 95	MW	OH	B7	
A200351555	408386	GEARINC MERRICK	01/10/12	950 00	MW	OH		
A200351556	701571	GELB JEFFREY	01/10/12	991 25	MW	OH	B7	
A200351557	713057	GETTY CARLTON A	01/10/12	10 00	MW	OH		
A200351558	706770	GHOGOMU, WILLIAM T	01/10/12	487 50	MW	OH	B7	
A200351559	705566	GOLDEN WEST ENTERPRISES INC	01/10/12	15 795 17	MW	OH		
A200351560	708298	GOLDSBERRY & ASSOCIATES PLLC	01/10/12	357 50	MW	OH	B7	
A200351561	714104	GOTTLOB,JEFFREY	01/10/12	65 49	MW	OH		
A200351562	709134	GRAHAM, CARMEN A	01/10/12	650 00	MW	OH	B7	
A200351563	701592	GULF COAST CENTURY	01/10/12	1 090 00	MW	OH		
A200351564	704506	GULF COAST COMPLETE MARINE SE	01/10/12	7 045 36	MW	OH		
A200351565	404061	GULF COAST MARKET INC	01/10/12	69 25	MW	OH		
A200351566	401104	GULFSIDE OVERHEAD DOOR COMPAN	01/10/12	410 00	MW	OH		
A200351567	712770	GURRY MECHANICAL L P	01/10/12	4 811 75	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351568	709059	GUSTAFSON TERRI	01/10/12	80 65	MW	OH		
A200351569	705885	H R M SUPPLY	01/10/12	375 90	MW	OH		
A200351570	713304	HAYNES, BRENT	01/10/12	251 15	MW	OH		
A200351571	702878	HEAT TRANSFER SOLUTIONS INC	01/10/12	532 50	MW	OH		
A200351572	713709	HENRY SCHEIN INC	01/10/12	52,198 66	MW	OH		
A200351573	711536	HERITAGE-CRYSTAL CLEAN LLC	01/10/12	1,502 05	MW	OH		
A200351574	406612	HERNANDEZ, CARLOS	01/10/12	122 10	MW	OH		
A200351575	710047	HERNANDEZ SUSAN	01/10/12	26 64	MW	OH		
A200351576	403480	HERRING JR, MATTHEW	01/10/12	78 26	MW	OH		
A200351577	713255	HESSE, DAVID C	01/10/12	1,267 50	MW	OH	B7	
A200351578	710709	HOGAN DWANETTE	01/10/12	485 63	MW	OH		
A200351579	409105	HOME DEPOT	01/10/12	228 88	MW	OH		
A200351580	701385	HOUSTON 2 WAY RADIO INC	01/10/12	64 00	MW	OH		
A200351581	705379	HUGH PATRICK CONSTRUCTORS	01/10/12	77,167 75	MW	OH		
A200351582	711253	HULL & ASSOCIATES P C	01/10/12	5 00	MW	OH		
A200351583	703727	INFOSAT COMMUNICATIONS	01/10/12	43 28	MW	OH		
A200351584	701901	J W KELSO COMPANY INC	01/10/12	245,717 68	MW	OH		
A200351585	712357	JACKSON, ERIN LARENA	01/10/12	487 00	MW	OH	B7	
A200351586	710587	JACOBS ENGINEERING GROUP INC	01/10/12	4,200 00	MW	OH		
A200351587	409049	JAHN-GALVESTON INSURANCE AGEN	01/10/12	11,013 01	MW	OH		
A200351588	710470	JAMES CROWDER FUNERAL HOME IN	01/10/12	6,123 00	MW	OH		
A200351589	708810	JAROTH INC	01/10/12	78 00	MW	OH		
A200351590	400471	JOE AGUIRRE TILE INC	01/10/12	44,266 87	MW	OH		
A200351591	404661	JOHNSON AUTOMOTIVE SUPPLY AND	01/10/12	346 26	MW	OH		
A200351592	707570	JOHNSON, CHERYL	01/10/12	55 244 14	MW	OH		
A200351593	701979	JONES LAW FIRM	01/10/12	422 50	MW	OH	B7	

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351594	406053	JONES MC CLURE PUBLISHING INC	01/10/12	86 00	MW	OH		
A200351595	701243	JONES, STACEY LEE	01/10/12	1,608 75	MW	OH	B7	
A200351596	112037	KEMAH HARDWARE AND SUPPLY	01/10/12	884 90	MW	OH		
A200351597	700067	KILGORE, JEFFREY A	01/10/12	580 00	MW	OH	B7	
A200351598	407214	KLD LABS INC	01/10/12	3 484 22	MW	OH		
A200351599	402386	KLEEN JANITORIAL SUPPLY COMPA	01/10/12	8,163 98	MW	OH		
A200351600	710415	KLEEN KUT LANDSCAPE SERVICE	01/10/12	5,750 00	MW	OH		
A200351601	113100	KLOTZ ASSOC INC	01/10/12	85,684 57	MW	OH		
A200351602	714194	LAMAR VIRGINIA L	01/10/12	4,968 00	MW	OH		
A200351603	711705	LARSON FAITH	01/10/12	126 54	MW	OH		
A200351604	711176	LAW OFFICE OF CS HALL PLLC	01/10/12	292 50	MW	OH	B7	
A200351605	704053	LAW OFFICE OF LANELLE O'CONNE	01/10/12	97 50	MW	OH	B7	
A200351606	710869	LAW OFFICE OF LINDSAY R LOPEZ	01/10/12	601 25	MW	OH	B7	
A200351607	708815	LAW OFFICE OF PAUL B KENNEDY	01/10/12	860 50	MW	OH	B7	
A200351608	706067	LCR-M LIMITED PARTNERSHIP	01/10/12	63 98	MW	OH		
A200351609	705777	LEATHERS BILL	01/10/12	162 50	MW	OH	B7	
A200351610	712688	LEAVITT, CHRISTOPHER J	01/10/12	854 00	MW	OH		
A200351611	404959	LEE, DALE W	01/10/12	1,032 00	MW	OH	B7	
A200351612	712180	LEWIS, ANDREW A	01/10/12	5 00	MW	OH		
A200351613	710524	LEWIS, SIRDON	01/10/12	225 33	MW	OH		
A200351614	123026	LIGGIOS TIRE AND SERVICE CENT	01/10/12	3,466 51	MW	OH		
A200351615	707090	LINEBARGER GOGGAN BLAIR & SAM	01/10/12	342 68	MW	OH		
A200351616	707090	LINEBARGER GOGGAN BLAIR & SAM	01/10/12	71 40	MW	OH		
A200351617	714184	LOPEZ, LINDA	01/10/12	297 60	MW	OH		
A200351618	708744	LOUNDS DONALD	01/10/12	225 00	MW	OH		
A200351619	705152	LOVE, PAUL	01/10/12	552 50	MW	OH	B7	

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351620	713742	LSI TITLE AGENCY INC	01/10/12	8 00	MW	OH		
A200351621	709842	LYN WINGERT & ASSOCIATES	01/10/12	2 797 43	MW	OH		
A200351622	701940	MABES HAULING	01/10/12	440 00	MW	OH		
A200351623	713989	MAILFINANCE INC	01/10/12	3 111 83	MW	OH		
A200351624	713527	MAILROOM FINANCE INC	01/10/12	22,098 77	MW	OH		
A200351625	131540	MAINLAND PHARMACY	01/10/12	450 78	MW	OH		
A200351626	709125	MALONEY & PARKS LLP	01/10/12	2 982 50	MW	OH	B7	
A200351627	710378	MARTIN RESOURCE MANAGEMENT CO	01/10/12	22 902 60	MW	OH		
A200351628	705424	MASTER WORD SERVICE INC	01/10/12	3,741 46	MW	OH		
A200351629	705185	MAUZY, BRUCE	01/10/12	1,501 50	MW	OH	B7	
A200351630	400252	MAXWELL, BONITA G	01/10/12	189 81	MW	OH		
A200351631	131029	MCREE FORD INC	01/10/12	13 20	MW	OH		
A200351632	712341	METRO CITY CONSTRUCTION LP	01/10/12	258,111 47	MW	OH		
A200351633	705575	MILAM AND COMPANY PAINTING IN	01/10/12	32 274 35	MW	OH		
A200351634	711805	MILLER ROBERT DAVID	01/10/12	1,007 50	MW	OH	B7	
A200351635	707434	MILT'S SEAFOOD PLANT INC	01/10/12	36 00	MW	OH		
A200351636	032250	MITCHELL CHUOKE PLUMBING CO	01/10/12	26,600 00	MW	OH		
A200351637	706214	MORGAN, LF'NARD D	01/10/12	136 53	MW	OH		
A200351638	405987	MUELLER DINAH J	01/10/12	292 50	MW	OH	B7	
A200351639	710385	MUNRO'S UNIFORM SERVICES LTD	01/10/12	656 76	MW	OH		
A200351640	712990	MURRAY, JASON	01/10/12	4 985 00	MW	OH		
A200351641	712990	MURRAY JASON	01/10/12	51,713 86	MW	OH		
A200351642	712990	MURRAY, JASON	01/10/12	42,696 17	MW	OH		
A200351643	712990	MURRAY, JASON	01/10/12	1,594 71	MW	OH		
A200351644	705888	NAJER, MAURICE	01/10/12	1,690 00	MW	OH	B7	
A200351645	410387	NEOPOST USA INC	01/10/12	143 99	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351646	705360	NETWORK CABLING SERVICES INC	01/10/12	9,395 78	MW	OH		
A200351647	407073	NEXTEL OF TEXAS INC	01/10/12	866 82	MW	OH		
A200351648	711213	NRG ENERGY INC	01/10/12	574 36	MW	OH		
A200351649	703084	OMNI BASE SERVICES INC	01/10/12	192 00	MW	OH		
A200351650	703084	OMNI BASE SERVICES INC	01/10/12	112 00	MW	OH		
A200351651	703084	OMNI BASE SERVICES INC	01/10/12	1 054 92	MW	OH		
A200351652	705252	ONEOK INC	01/10/12	1,597 95	MW	OH		
A200351653	400105	OWEN ELECTRIC SUPPLY	01/10/12	2,207 13	MW	OH		
A200351654	404939	PADGETT SHORELINE CONST INC	01/10/12	9,500 00	MW	OH		
A200351655	705290	PALMER, MICHAEL	01/10/12	260 00	MW	OH	B7	
A200351656	409712	PARISH ERVIN R	01/10/12	110 45	MW	OH		
A200351657	711436	PEGASUS SCHOOLS INC	01/10/12	18 819 79	MW	OH		
A200351658	709286	PESTMASTER SERVICES INC	01/10/12	3,465 08	MW	OH		
A200351659	710703	PICTOMETRY INTERNATIONAL CORP	01/10/12	2 220 35	MW	OH		
A200351660	406092	POOR SHERIFF FREDDIE	01/10/12	6 075 00	MW	OH		
A200351661	713853	PUTONTI & ESCOVER PC	01/10/12	3 00	MW	OH		
A200351662	705753	QUINTANILLA, DONNIE	01/10/12	467 00	MW	OH		
A200351663	712886	R W LUCAS CONSTRUCTION LLC	01/10/12	254,821 86	MW	OH		
A200351664	712886	R W LUCAS CONSTRUCTION LLC	01/10/12	99 671 72	MW	OH		
A200351665	712364	RAMIREZ, VICTORIA	01/10/12	170 39	MW	OH		
A200351666	714188	RIOS, ROBIN A	01/10/12	506 56	MW	OH	B7	
A200351667	710577	RUSSELL, GREG	01/10/12	471 25	MW	OH	B7	
A200351668	403785	SAENZ, ALVIN N	01/10/12	1 202 50	MW	OH	B7	
A200351669	400133	SANDERS, EARNESTINE LYNCH	01/10/12	60 50	MW	OH		
A200351670	191023	SANTA FE AUTO PARTS INC	01/10/12	603 66	MW	OH		
A200351671	700001	SANTA FE SENIOR CITIZENS COUN	01/10/12	500 00	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351672	707539	SCHULTZ MARILYN	01/10/12	350 00	MW	OH		
A200351673	701888	SCOTT SHELBY	01/10/12	950 00	MW	OH	B7	
A200351674	711834	SEARS & BENNETT LLP	01/10/12	1 933 75	MW	OH	B7	
A200351675	192146	SEASIDE ENTERPRISES INC	01/10/12	48 91	MW	OH		
A200351676	134221	SHEARN MOODY PLAZA CORP	01/10/12	53 082 33	MW	OH		
A200351677	711193	SHELMARK ENGINEERING L L C	01/10/12	7 775 00	MW	OH		
A200351678	405858	SHELTERING HARBOUR	01/10/12	10,568 70	MW	OH		
A200351679	709806	SMITH IRRIGATION EQUIPMENT	01/10/12	623 00	MW	OH		
A200351680	430754	SMITH, JAMES DENNIS	01/10/12	390 00	MW	OH	B7	
A200351681	712436	SOUTH LAND TITLE LLC	01/10/12	256 00	MW	OH		
A200351682	705477	SOUTHEAST FIRE PROTECTION LP	01/10/12	16 245 00	MW	OH		
A200351683	703586	SOUTHEAST TEXAS ASSOCIATION O	01/10/12	200 00	MW	OH		
A200351684	713129	SOUTHWEST T & I INC	01/10/12	203 00	MW	OH		
A200351685	707542	SPRINT SPECTRUM LP	01/10/12	435 91	MW	OH		
A200351686	194167	STATE BAR OF TEXAS	01/10/12	125 00	MW	OH		
A200351687	409104	STEVE'S WAREHOUSE TIRES	01/10/12	30 00	MW	OH		
A200351688	093039	STEVEN-SHARON CORPORATION	01/10/12	111 59	MW	OH		
A200351689	194514	STEVENS, MARK W	01/10/12	474 50	MW	OH	B7	
A200351690	432219	STEWART, DELLA L	01/10/12	39 41	MW	OH		
A200351691	709091	STICKLER TOMMY JAMES	01/10/12	487 50	MW	OH	B7	
A200351692	708715	STREAM ENERGY	01/10/12	177 52	MW	OH		
A200351693	713663	STUCKER, WILLIAM	01/10/12	10 00	MW	OH		
A200351694	711234	SULLIVAN LAND SERVICES LTD	01/10/12	164,124 17	MW	OH		
A200351695	405722	SUN COAST RESOURCES INC	01/10/12	4,943 14	MW	OH		
A200351696	410741	SUNGARD AVAILABILITY SERVICES	01/10/12	11 350 00	MW	OH		
A200351697	410529	TAYLOR, ANGELA M	01/10/12	1 105 00	MW	OH	B7	

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351698	703954	TEXAS CONFERENCE OF URBAN COU	01/10/12	182,682 00	MW	OH		
A200351699	063982	TEXAS FLIGHT LINE LC	01/10/12	2,798 01	MW	OH		
A200351700	710172	TEXAS JUSTICE COURT	01/10/12	75 00	MW	OH		
A200351701	708583	TEXAS LAW & PSYCHIATRY PLLC	01/10/12	2,400 00	MW	OH	MH	
A200351702	202267	TEXAS PARKS AND WILDLIFE DEPT	01/10/12	963 90	MW	OH		
A200351703	202267	TEXAS PARKS AND WILDLIFE DEPT	01/10/12	6 929 26	MW	OH		
A200351704	202267	TEXAS PARKS AND WILDLIFE DEPT	01/10/12	1 103 01	MW	OH		
A200351705	406578	TEXAS STATE UNIVERSITY SAN MA	01/10/12	500 00	MW	OH		
A200351706	714196	TORRES JUAN	01/10/12	474 00	MW	OH		
A200351707	710399	TPM INC	01/10/12	100 00	MW	OH	RE	
A200351708	712290	TPEE-MENDUS	01/10/12	1,400 00	MW	OH		
A200351709	401653	TRUCK PARTS & SPECIALISTS INC	01/10/12	141 10	MW	OH		
A200351710	713962	TRUE ELECTRIC LLC	01/10/12	197 27	MW	OH		
A200351711	710003	U S ENERGY SAVINGS CORP	01/10/12	94 35	MW	OH		
A200351712	701538	UNITED PARCEL SERVICE	01/10/12	14 63	MW	OH		
A200351713	409463	UNITED STATES POSTAL SERVICE	01/10/12	1 050 00	MW	OH		
A200351714	402812	UTMB	01/10/12	600 00	MW	OH		
A200351715	406603	VERIZON	01/10/12	320 38	MW	OH		
A200351716	709039	VICKERY, KAY	01/10/12	40 52	MW	OH		
A200351717	708752	VOICE4NET COM	01/10/12	50 00	MW	OH		
A200351718	231209	WALMART	01/10/12	777 28	MW	OH		
A200351719	712330	WATKINS, GENE ANTONE	01/10/12	1,800 00	MW	OH	B7	
A200351720	701863	WEBER, WINIFRED B	01/10/12	195 00	MW	OH	B7	
A200351721	706158	WELLNESS HEALTH LETTER AND AS	01/10/12	28 00	MW	OH		
A200351722	700273	WELSH MATTHEW SEAN	01/10/12	706 52	MW	OH		
A200351723	701533	WEST PUBLISHING CORPORATION	01/10/12	1 518 97	MW	OH		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351724	707577	WILLIAMS JR BILLY A	01/10/12	500 00	MW	OH		
A200351725	712638	WILSON, JOCELYN	01/10/12	636 03	MW	OH		
A200351726	405396	WOOTEN, THOMAS J	01/10/12	2,320 00	MW	OH	B7	
A200351727	711421	XANALYS LTD	01/10/12	800 00	MW	OH		
A200351728	712998	ZENDEH DEL AND ASSOCIATES PLL	01/10/12	950 00	MW	OH	B7	

S U B T O T A L S

Total Void Machine Written	0 00	Number of Checks Processed	2
Total Void Hand Written	0 00	Number of Checks Processed	0
Total Machine Written	3479,969 86	Number of Checks Processed	237
Total Hand Written	0 00	Number of Checks Processed	0
Total Reversals	0 00	Number of Checks Processed	0
Total Cancelled	0 00	Number of Checks Processed	0
S U B T O T A L	3479,969 86		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
F600000331	161059	BOB PAGAN FORD INC	01/10/12	6,511 00	CX	OH		
F600000332	711931	DSW HOMES LLC	01/10/12	128 773 53	CX	OH		
F600000333	071118	GALVESTON NEWSPAPERS INC	01/10/12	14,724 26	CX	OH		
F600000334	403006	KEYWORTHS HARDWARE INC	01/10/12	191 59	CX	OH		
F600000335	705097	LONE STAR UNIFORMS INC	01/10/12	25,645 00	CX	OH		
F600000336	709070	SCHWAB-RADCLIFFE, SUZANNE	01/10/12	3 218 17	CX	OH	B7	

S U B T O T A L S

Total Void Machine Written	0 00	Number of Checks Processed	0
Total Void Hand Written	0 00	Number of Checks Processed	0
Total Machine Written	0 00	Number of Checks Processed	0
Total Hand Written	0 00	Number of Checks Processed	0
Total Reversals	0 00	Number of Checks Processed	0
Total Cancelled	179,063 55	Number of Checks Processed	6
S U B T O T A L	179,063 55		

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note

G R A N D T O T A L S

Total Void Machine Written	0 00	Number of Checks Processed	2
Total Void Hand Written	0 00	Number of Checks Processed	0
Total Machine Written	3479 969 86	Number of Checks Processed	237
Total Hand Written	0 00	Number of Checks Processed	0
Total Reversals	0 00	Number of Checks Processed	0
Total Cancelled	179,063 55	Number of Checks Processed	6
G R A N D T O T A L	3659,033 41		

Galveston County, Texas

Supplemental List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Into		Amount
FUND: 1101	**General Fund**		
Warrant #: VW 00351729	**Payee Name: BACLIFF MUNICIPAL UTILITY DISTRICT**		
10104121 122711	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	125 86
10104330 122711	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	24 87
		Warrant Total:	**150.73**
Warrant #: VW 00351730	**Payee Name: BOLIVAR PENINSULA SPECIAL UTILITY DISTRICT**		
10002205 121511	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	174 37
10002222 121511	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	46 23
10002875 121611	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	69 35
10003863 112911	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	92 46
10004583 120911	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	69 35
10005389 121611	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	231 40
10006109 121611	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	1 570 50
		Warrant Total:	**2,253.66**
Warrant #: VW 00351731	**Payee Name: CENTERPOINT ENERGY**		
4716782 122911	1101170100 - 5421300	Facilities Srvs & Maintenance - Gas	84 15
47167838 122911	1101170100 - 5421300	Facilities Srvs & Maintenance - Gas	503 07
47543723 010612	1101170100 - 5421300	Facilities Srvs & Maintenance - Gas	2,462 51
47632666 010312	1101170100 - 5421300	Facilities Srvs & Maintenance - Gas	98 65
48091797 122811	1101170100 - 5421300	Facilities Srvs & Maintenance - Gas	273 28
48482202 010412	1101170100 - 5421300	Facilities Srvs & Maintenance - Gas	101 87
89106207 010312	1101170100 - 5421300	Facilities Srvs & Maintenance - Gas	16 57
		Warrant Total:	**3,540.10**
Warrant #: VW 00351732	**Payee Name: CITY OF LA MARQUE**		
11003415 122211	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	178 92
160010852 122711	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	40 95
1600108563	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	126 75
		Warrant Total:	**346.62**
Warrant #: VW 00351733	**Payee Name: CITY OF LA MARQUE**		
160010854 122711	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	62 30
		Warrant Total:	**62.30**
Warrant #: VW 00351734	**Payee Name: CITY OF TEXAS CITY**		
1960974052 12301	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	113 61
2182478663 1211	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	42 45
		Warrant Total	**156 06**
Warrant #: VW 00351735	**Payee Name: ENTERGY**		
2253364 010312	1101170100 - 5421200	Facilities Srvs & Maintenance - Electricity	3,557 16

Galveston County, Texas

Supplemental List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Into		Amount
3571159 123011	1101170100 - 5421200	Facilities Srvs & Maintenance - Electricity	303 55
3626535 123011	1101170100 - 5421200	Facilities Srvs & Maintenance - Electricity	5 00
		Warrant Total:	**3,865.71**
Warrant #: VW 00351737	**Payee Name: GALVESTON COUNTY WCID #1**		
220024920 122711	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	125 32
220024924 122711	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	60 00
230025370 122711	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	60 00
30064065 010312	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	131 85
		Warrant Total:	**377.17**
Warrant #: VW 00351738	**Payee Name: GALVESTON COUNTY WCID #8**		
120240 121411	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	365 07
2174000 121611	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	23 62
21760 121411	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	286 33
		Warrant Total:	**675.02**
Warrant #: VW 00351739	**Payee Name: LANSDOWNE MOODY CO LP**		
EW07690	1101522020 - 5746010	Parks Department - Capitalized Furn,Fix & Equip	38,600 00
		Warrant Total:	**38,600.00**
Warrant #: VW 00351740	**Payee Name: LAW OFFICE OF MICHELE BASSETT**		
JAIL DKT 123011	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	950 00
		Warrant Total:	**950 00**
Warrant #: VW 00351741	**Payee Name: LINEBARGER GOGGAN BLAIR & SAMPSON LLP**		
DEC 11 JP3 FEES	1101000000 - 2291011	General Fund - Due to Collection Agency	2,742 95
		Warrant Total:	**2,742.95**
Warrant #: VW 00351742	**Payee Name: SAN LEON MUNICIPAL UTILITY DIST**		
10353195 122911	1101170100 - 5421100	Facilities Srvs & Maintenance - Water	78 85
		Warrant Total:	**78.85**
Warrant #: VW 00351743	**Payee Name: STEVENS, MARK W**		
10CR2236 010412	1101121000 - 5431230	Justice Administration - Court Apptd Atty Dist Courts	689 00
		Warrant Total:	**689.00**
		FUND 1101 TOTAL:	**54,488.17**

FUND: 2230 Juvenile Justice Fund

Warrant #: VW 00351736	**Payee Name: FLEETCOR TECHNOLOGIES DBA CHEVRON**		
32801880	2230256105 - 5423112	Juv Justice - Administration - Auto Credit Card Exp	25 01
		Warrant Total:	**25.01**

Galveston County, Texas

Supplemental List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Into	Amount
	FUND 2230 TOTAL:	**25.01**

Galveston County, Texas

Supplemental List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Invoice Number	Account Info	Amount
FUND: 2230 Juvenile Justice Fund		
Warrant #: VW 00351736	**Payee Name: FLEETCOR TECHNOLOGIES DBA CHEVRON**	
32801880	2230256105 - 5423112 Juv Justice - Administration - Auto Credit Card Exp	25 01
	Warrant Total:	**25.01**
	FUND 2230 TOTAL:	**25.01**

Galveston County, Texas

List of County Auditor's Approved Claims For Voucher Warrants Dated 01/10/2012

Approved Order to pay by Commissioners Court this day January 10, 2012

Cliff Billingsley

Cliff Billingsley, County Auditor

absent

Mark A. Henry, Galveston County Judge

Patrick Doyle, Galveston County Commissioner, Pct 1

Kevin D. O'Brien, Galveston County Commissioner, Pct 2

Stephen D. Holmes, Galveston County Commissioner, Pct 3

Kenneth Clark, Galveston County Commissioner, Pct 4

ATTEST:

Dwight D. Sullivan, County Clerk

By: Brandy Chapman Deputy

Brandy Chapman

Check	Payee ID	Payee Name	Date	Check Amount	Type	Subs	Rel To	Note
A200351729	021329	BACLIFF MUNICIPAL UTILITY DIS	01/10/12	150 73	MW	OH		
A200351730	708995	BOLIVAR PENINSULA SPECIAL UTI	01/10/12	2,253 66	MW	OH		
A200351731	407782	CENTERPOINT ENERGY	01/10/12	3,540 10	MW	OH		
A200351732	033209	CITY OF LA MARQUE	01/10/12	346 62	MW	OH		
A200351733	033209	CITY OF LA MARQUE	01/10/12	62 30	MW	OH		
A200351734	403085	CITY OF TEXAS CITY	01/10/12	156 06	MW	OH		
A200351735	405028	ENTERGY	01/10/12	3,865 71	MW	OH		
A200351736	710210	FLEETCOR TECHNOLOGIES DBA CHE	01/10/12	25 01	MW	OH		
A200351737	071175	GALVESTON COUNTY WCID #1	01/10/12	377 17	MW	OH		
A200351738	071407	GALVESTON COUNTY WCID #8	01/10/12	675 02	MW	OH		
A200351739	121053	LANSDOWNE MOODY CO LP	01/10/12	38,600 00	MW	OH		
A200351740	706605	LAW OFFICE OF MICHELE BASSETT	01/10/12	950 00	MW	OH	B7	
A200351741	707090	LINEBARGER GOGGAN BLAIR & SAM	01/10/12	2 742 95	MW	OH		
A200351742	191106	SAN LEON MUNICIPAL UTILITY DI	01/10/12	78 85	MW	OH		
A200351743	194514	STEVENS, MARK W	01/10/12	689 00	MW	OH	B7	

G R A N D T O T A L S

Total Void Machine Written	0 00	Number of Checks Processed	0
Total Void Hand Written	0 00	Number of Checks Processed	0
Total Machine Written	54,513 18	Number of Checks Processed	15
Total Hand Written	0 00	Number of Checks Processed	0
Total Reversals	0 00	Number of Checks Processed	0
Total Cancelled	0 00	Number of Checks Processed	0
G R A N D T O T A L	54 513 18		

AGENDA ITEM #1b

ORDER

On this the 10th day of January 2012, the Commissioners Court of Galveston County, Texas convened in a regularly scheduled meeting with the following members thereof present

Mark Henry, County Judge **absent**
Patrick Doyle, Commissioner, Precinct No 1
Kevin D O'Brien, Commissioner, Precinct No 2
Stephen Holmes, Commissioner, Precinct No 3
Ken Clark, Commissioner, Precinct No 4 and **and Acting County Judge**
Dwight D Sullivan, County Clerk

when the following proceedings, among others, were had to-wit

Upon recommendation being received by the County Auditor, IT IS ORDERED that the County Clerk enter this ORDER in the minutes of the Commissioner's Court approving the biweekly payrolls of GALVESTON COUNTY, GALVESTON COUNTY HEALTH DISTRICT, AND GALVESTON COUNTY ROAD DISTRICT NO 1 as are shown on the payroll lists attached hereto and made a part hereof for all intents and purposes for the period ending Jan 4th, 2012 and being salary warrant numbers **PY0333106 through PY0333130 and EFT90321522 through EFT90322809 .** The gross amount of such warrants are estimated **$2,874,362.49 for Biweekly Payroll #01, 2012.**

UPON MOTION OF COUNTY COMMISSIONER **O'BRIEN** AND SECONDED

BY COMMISSIONER **HOLMES** THE ABOVE ORDER WAS PASSED THIS **10TH** DAY

OF **JAN.**, 2012 with **4** votes cast in favor thereof and **0** votes cast against

COUNTY OF GALVESTON, TEXAS

~~Mark Henry, County Judge~~
Kenneth Clark,
Acting County Judge

ATTEST:

Dwight D Sullivan
County Clerk
By: Brandy Chapman Deputy
Brandy Chapman

RECOMMENDED

Cliff Billingsley, CPA
County Auditor

AGENDA ITEM #1c

COUNTY OF GALVESTON

MEMORANDUM

December 22, 2011

To Patricia Grady
County Judge's Office

FROM Tony Pompa
Auditor's Office

SUBJECT Commissioners' Court Agenda

Please include the following item to the next Commissioners' Court Agenda.

If you should have any question please call me at extension 5327

ORDER

On this 12th day of January, 2012, the Commissioners' Court of Galveston County, Texas convened in a regular meeting with the following members thereof present

Mark Henry, County Judge **absent**
Patrick F. Doyle, Commissioner, Precinct No 1
Kevin O'Brien, Commissioner, Precinct No. 2
Stephen Holmes, Commissioner, Precinct No 3
Ken Clark, Commissioner, Precinct No. 4 and **Acting County Judge**
Dwight D Sullivan, County Clerk

when the following proceedings, among others were had to-wit

Upon recommendation being received by the County Auditor, it is ordered that the County Clerk enter this Order in the minutes of the Commissioners' Court approving the payments of the monthly Health Insurance claims of GALVESTON COUNTY, GALVESTON COUNTY HEALTH DISTRICT, AND GALVESTON COUNTY ROAD DISTRICT NO 1 made by Boon Chapman for the month ending October 31, 2011 the gross amount of such payment being $2,331,306 97

UPON MOTION OF THE COUNTY COMMISSIONER O'BRIEN AND SECONDED BY COMMISSIONER HOLMES the above order was passed this 12TH DAY OF JANUARY, 2012 with 4 votes cast in favor thereof and 0 votes cast against.

County of Galveston, Texas

~~Mark Henry, County Judge~~
Kenneth Clark,
Acting County Judge

ATTEST:

Dwight D Sullivan
County Clerk
By: Brandy Chapman Deputy
Brandy Chapman

RECOMMENDED

Cliff Billingsley, CPA
County Auditor

AUDITOR'S OFFICE - ACCOUNTING DIVISION
BOON CHAPMAN - MNB3010008898
GALVESTON COUNTY HEALTH PLAN
BANK RECONCILIATION (IFAS 6123-000000-1013056)
October 31, 2011

BALANCES PER THE BANK				
	BEGINNING BALANCE	DEPOSITS	WITHDRAWALS	ENDING BALANCE
BANK	$ 340,922 70	$ 2,128,468.73	$ 2,380,870 79	$ 88,520 64
DEPOSITS IN TRANSIT				
PRIOR MONTH CLAIMS FUNDING		-		-
CURRENT MONTH CLAIMS FUNDING				-
		-		-
OUTSTANDING CHECKS				
PRIOR MONTH				
77,579 23	(77,579.23)		(77,579 23)	-
CURRENT MONTH				
28,015 41			28,015 41	(28,015 41)
ADJUSTMENTS				
Duplicate Ck#13710 clrd, ck13598 duplicate	54.49			54.49
Amount Error Ck# 13671 clrd1/4/08 as 13674 for 54 49 sb 6 81	47.58			47 58
Ck #28408 cleared 12/8/08 for 7 11 sb 7 34	(0.23)			(0 23)
3/1/10 Ck41715 cleared for 7 81 s/h/bn 47 81 is OS	47.81			47 81
8/20/10 Ck47153 cleared as 47151&ck47153 is in OS list for original amount of $1,100 80	1,100.80			1,100.80
ADJUSTED BALANCES PER BANK	$ 264,593.92	$ 2,128,468.73	$ 2,331,306.97	$ 61,755 68

BALANCES PER THE BOOKS				
	BEGINNING BALANCE	RECEIPTS	DISBURSEMENTS	ENDING BALANCE
IFAS	$ 12,060.07	$ 2,128,385.38	$ 2,128,385.38	$ 12,060 07
ADJUSTMENTS				
9/29/11 Vpay draw in transit	252,533.85		252,533 85	-
10/31/11 Vpay draw in transit			(49,612.26)	49,612 26
				-
				-
				-
				-
INTEREST				-
October-11		83.35		83.35
				-
ADJUSTED BALANCES PER BOOK	$ 264,593.92	$ 2,128,468 73	$ 2,331,306 97	$ 61,755.68

ACCOUNT NUMBER [illegible]
ENCL 1

GALVESTON COUNTY
BOON-CHAPMAN HEALTH
****
SEND TO ANNEX BUILDING
****

EFFECTIVE JULY 21, 2011, MOODY NATIONAL BANK MAKES THE FIRST $200 OF NON NEXT DAY CHECKS YOU DEPOSIT AVAILABLE ON THE NEXT BUSINESS DAY

CHECKING ACCOUNTS

VIEW OUR PRIVACY STATEMENT ONLINE AT WWW MOODYBANK COM

COMMERCIAL CHEX + NOW CHECKING		NUMBER OF ENCLOSURES	1
ACCOUNT NUMBER	3010008898	Statement Dates	10/03/11 thru 10/31/11
PREVIOUS BALANCE	340,922 70	DAYS IN THE STMT PERIOD	29
5 DEPOSITS/CREDITS	2,128,385.38	AVERAGE DAILY BALANCE	299,706 63
6 CHECKS/DEBITS	2,380,870.79	AVERAGE COLLECTED BAL	299,706 63
SERVICE CHARGE	00	Interest Earned	83 35
INTEREST PAID	83 35	Annual Percentage Yield Earned	0 35%
CURRENT BALANCE	88,520 64	2011 Interest Paid	1,180 64

	Total For This Period	Total Year-to-Date
TOTAL OVERDRAFT FEES	$.00	$ 00
TOTAL INSUFFICIENT ITEM FEES	$ 00	$ 00

AGENDA ITEM #1d

COUNTY OF GALVESTON

MEMORANDUM

December 22, 2011

To Patricia Grady
County Judge's Office

FROM Tony Pompa
Auditor's Office

SUBJECT Commissioners' Court Agenda

Please include the following item to the next Commissioners' Court Agenda.

If you should have any question please call me at extension 5327

ORDER

On this the 10th day of January, 2012, the Commissioners' Court of Galveston County, Texas convened in a regular meeting with the following members thereof present

Mark Henry, County Judge absent
Patrick F Doyle, Commissioner, Precinct No 1
Kevin O'Brien, Commissioner, Precinct No 2
Stephen Holmes, Commissioner, Precinct No 3
Ken Clark, Commissioner, Precinct No 4 and Acting County Judge
Dwight D Sullivan, County Clerk

When the following proceedings, among others were had to-wit

Upon recommendation being received by the County Auditor, it is ordered that the County Clerk enter this Order in the minutes of the Commissioners' Court approving the payments of the monthly Workers' Compensation claims of GALVESTON COUNTY, GALVESTON COUNTY HEALTH DISTRICT, AND GALVESTON COUNTY ROAD DISTRICT NO 1 made by The Littleton Group for the month ending October 31, 2011 the gross amount of such payment being $61,977 67.

UPON MOTION OF THE COUNTY COMMISSIONER O'BRIEN AND SECONDED BY COMMISSIONER HOLMES the above order was passed this 10TH DAY OF JANUARY, 2012 with 4 votes cast in favor thereof and 0 votes cast against

County of Galveston, Texas

~~Mark Henry, County Judge~~,
Kenneth Clark,
Acting County Judge

ATTEST:

RECOMMENDED:

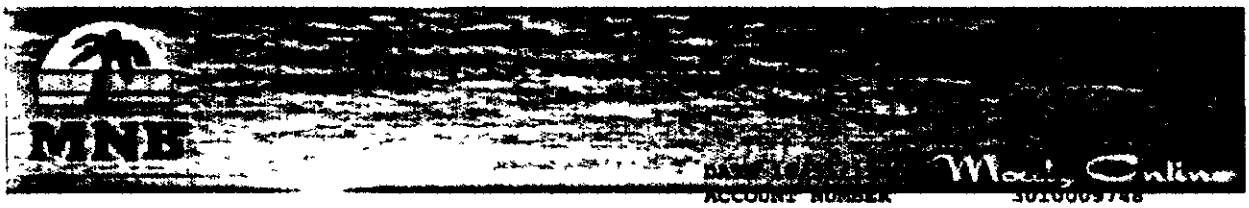
Dwight D Sullivan
County Clerk
By: Brandy Chapman Deputy
Brandy Chapman

Cliff Billingsley, CPA
County Auditor

COUNTY OF GALVESTON
AUDITOR'S OFFICE - ACCOUNTING DIVISION
LITTLETON GROUP - MNB # 3010009748
GALVESTON COUNTY FUNDED WORKER'S COMPENSATION
BANK RECONCILIATION (IFAS 6123 & 6124-000000-1013055)
October 31, 2011

		BEGINNING BALANCE	DEPOSITS	WITHDRAWALS	ENDING BALANCE
BANK		$ 16,356 11	$ 30,644.95	$ 38,133.66	$ 8,867 40
DEPOSITS IN TRANSIT					
PRIOR MONTH		-		-	-
			-		-
OUTSTANDING CHECKS					
PRIOR MONTH					
	18,783.32	(18,783 32)		(18,783 32)	-
CURRENT MONTH					
	42,627.33			42,627 33	(42,627 33)
Bank Adjustments:					
2/15,16/10 Adj for unknwn OS cks, Treas- Littleton Admin ran test ck file - cks unissued & await clearing by Treas		2,255 68			2,255 68
5/17/11 Stop Payment Fee		30 00			30 00
6/2/11 Stop Payment Fee		30 00			30 00
7/7/11 Stop Payment fee		30 00			30 00
9/26/11 Stop Payment Fees		60.00	(60.00)		-
ADJUSTED BALANCES PER BANK		$ (21.53)	$ 30,584.95	$ 61,977 67	$ (31,414 25)

	BEGINNING BALANCE	RECEIPTS	DISBURSEMENTS	ENDING BALANCE
IFAS	$ 675.44	$ 30,581 30	$ 30,581.30	$ 675 44
Book Adjustments				-
10/26/11 WC Claims Funded in November			11,983 98	(11,983 98)
10/28/11 WC Claims Funded in November JE00033489			2,400 68	(2,400 68)
10/31/11 WC Claims Funded in November			17,708 68	(17,708 68)
9/30/11 WC Claims Funded in October	(696.97)		(696 97)	-
Interest				-
Oct - 2011		3 65		3 65
				-
ADJUSTED BALANCES PER THE BOOKS	$ (21 53)	$ 30,584 95	$ 61,977 67	$ (31,414 25)



ACCOUNT NUMBER [illegible]
ENCL 122

GALVESTON COUNTY
LITTLETON GROUP WORKERS COMP
****
SEND TO ANNEX BUILDING
****

EFFECTIVE JULY 21, 2011, MOODY NATIONAL BANK MAKES THE FIRST $200 OF NON NEXT DAY CHECKS YOU DEPOSIT AVAILABLE ON THE NEXT BUSINESS DAY

CHECKING ACCOUNTS

VIEW OUR PRIVACY STATEMENT ONLINE AT WWW MOODYBANK COM

COMMERCIAL CHEX + NOW CHECKING		NUMBER OF ENCLOSURES	122
ACCOUNT NUMBER	3010009748	Statement Dates	10/03/11 thru 10/31/11
PREVIOUS BALANCE	16,356 11	DAYS IN THE STMT PERIOD	29
12 DEPOSITS/CREDITS	30,641.30	AVERAGE DAILY BALANCE	13,107 53
121 CHECKS/DEBITS	38,133.66	AVERAGE COLLECTED BAL	13,107.53
SERVICE CHARGE	00	Interest Earned	3 65
INTEREST PAID	3 65	Annual Percentage Yield Earned	0 35%
CURRENT BALANCE	8,867 40	2011 Interest Paid	184.76

	Total For This Period	Total Year-to-Date
TOTAL OVERDRAFT FEES	$ 00	$ 00
TOTAL INSUFFICIENT ITEM FEES	$.00	$ 00

AGENDA ITEM #2a

Galveston County
Legal Department

COUNTY COURTHOUSE
722 MOODY 5th FLOOR
GALVESTON, TEXAS 77550-2317

HARVEY BAZAMAN

Donald Glywasky
Barry C Willey
Myrna S Reingold

Galveston Line
(409) 770-5562

Houston Line
(281) 316-8300

Fax Line
(409) 770-5560

RECEIVED
JAN 04 2012
GALVESTON COUNTY JUDGE

January 4, 2011

Hon. Mark Henry
Hon. County Commissioners' Court
Galveston County Courthouse
Galveston, Texas 77550

Re Claim for Damages
Claimant Farmers' Insurance Group as Subrogee for Cloutier Trotter
Date of Loss: 09/02/11
Amount $1,015 05

Gentlemen

This is to inform you that a full and final settlement of the above referenced claim has been made

The facts underlying this claim are that on or about the above referenced date claimant's vehicle was damaged in a minor auto incident wherein a deputy with the Galveston County Sheriff's Department backed into Mr Trotter's vehicle while in a private parking lot Mr Trotter's vehicle incurred minor damage in the amount of $1,015 05 The settlement amount represents the full amount of property damages

By copy hereof, I am forwarding the County Purchasing Agent the necessary paperwork to begin preparation of the check Should you have any questions, please call

Sincerely,

Barry C Willey

BCW/mfa
cc Sheriff Freddie Poor

AGENDA ITEM #3

THE COUNTY OF GALVESTON

RIGHT OF WAY /
REAL ESTATE SERVICES
722 Moody, 1st Floor
Galveston, Texas 77550

January 2, 2012

(409) 770-5577
(281) 316-8300, Ext 5577

Honorable Mark Henry, County Judge
Hon Galveston County Commissioners' Court
Galveston County Courthouse
722 Moody
Galveston, Texas 77550

Re Parcel 148 – F M 646
Limits F M 1764 to S H 6

Gentlemen

For your consideration, we are attaching original deed covering Parcel 148 required for the captioned F M 646 Project The Parcel consists of 1,987 square feet of land appraised at $4,968 00 TxDOT will reimburse the County for 90% of the Right of Way cost

If you are agreeable to accepting this transaction, please authorize issuance of a check in the amount of $4,968 00 payable to Virginia L Lamar The deed should be recorded in the County Clerk's Official Public Records After recording, please have the original instrument return to the Right of Way Department

Yours very truly,

Claudette Fickessen

Encl
cf

cc Commissioner Kevin O'Brien, Precinct 2
Mr Mike Fitzgerald, P E , County Engineer

2012001621
6 PGS

Parcel 148
F.M. 646

DEED

STATE OF TEXAS §
§ **KNOW ALL MEN BY THESE PRESENTS:**
COUNTY OF GALVESTON §

That Virginia L. Lamar, as Trustee for the James E and Virginia Lamar Living Trust, of the County of Galveston, State of Texas, hereinafter referred to as Grantors, whether one or more, for and in consideration of the sum of Four Thousand, Nine Hundred and Sixty-eight and no/100 Dollars ($4,968 00) to Grantors in hand paid by the State of Texas, acting by and through the Texas Transportation Commission, receipt of which is hereby acknowledged, and for which no lien is retained, either expressed or implied, have this day Sold and by these presents do Grant, Bargain, Sell and Convey unto the State of Texas all that certain tract or parcel of land in Galveston County, Texas, more particularly described in Exhibit "A", which is attached hereto and incorporated herein for any and all purposes

SAVE and EXCEPT, HOWEVER, it is expressly understood and agreed that Grantors are retaining title to the following improvements located on the property described in said Exhibit "A", to wit

None

Grantors reserve all of the oil, gas and sulphur in and under the land herein conveyed but waive all rights of ingress and egress to the surface thereof for the purpose of exploring, developing, mining or drilling for same, however, nothing in this reservation shall affect the title and rights of the State to take and use all other minerals and materials thereon, therein and thereunder.

TO HAVE AND TO HOLD the premises herein described and herein conveyed together with all and singular the rights and appurtenances thereto in any wise belonging unto the State of Texas and its assigns forever, and Grantors do here bind ourselves, our heirs, executors, administrators, successors and assigns to Warrant and Forever Defend all and singular the said premises herein conveyed unto the State of Texas and its assigns against every person whomsoever lawfully claiming or to claim the same or any part thereof

IN WITNESS WHEREOF, this instrument is executed on the 21st day of December, 2011

Virginia L Lamar, Trustee for the James E and Virginia L Lamar Living Trust

ACKNOWLEDGMENT

THE STATE OF TEXAS §
COUNTY OF GALVESTON §

BEFORE ME, the undersigned, a Notary Public, on this day personally appeared Virginia L Lamar, Trustee for the James E and Virginia L. Lamar Living Trust, know to me to be the person(s) whose name(s) is (are) subscribed to the foregoing instrument and acknowledged to me that he/she/they executed the same for the purposes and consideration herein expressed

GIVEN UNDER MY HAND AND SEAL OF OFFICE, this 21st day of December, 2011

Notary Public, State of Texas
My Commission expires:

JEAN C FALKS
MY COMMISSION EXPIRES
January 29, 2014

EXHIBIT "A"

County Galveston
Highway FM 646
Limits From FM 517 to SH 6
ROW CSJ 0978-01-032
ROW Account 8012-02-068

Property Description for
Parcel 148

BEING a 0 046 of one acre (1,987 square feet) parcel of land located in the Mary Austin Survey, Abstract No. 14, Galveston County, Texas, being a portion of Lot 14 of Thaman's First Subdivision of record in Volume 231, Page 6 of the Galveston County Map Records, Texas (G C M R), and being a portion of Tract 1 of Lamar Lane, an unrecorded subdivision, said Tract 1 conveyed to the James E and Virginia L. Lamar Living Trust by deed of record in County Clerk File No 9824649, Film Code No 012-62-1651 of the Official Public Records of Real Property Galveston County, Texas (O P R O R P G C), said 0 046 of one acre being more particularly described as follows

COMMENCING at a point in the existing northerly right-of-way line of Lamar Lane (60 foot right-of-way) (no record information for right-of-way found), being the southeasterly corner of said Tract 1, from which a 1-1/4 inch iron pipe found bears South 01°57' East, a distance of 0 31 feet, thence as follows,

THENCE, South 88°04'26" West, along the existing northerly right-of-way line of Lamar Lane, being the southerly line of said Tract 1, a distance of 167 47 feet to a 5/8-inch iron rod with aluminum cap stamped "TxDOT" set in the proposed easterly right-of-way line of FM 646 and for the POINT OF BEGINNING of the herein described parcel having surface coordinates of X = 3,213,156 42, Y = 13,711,764 89;

1) THENCE, South 88°04'26" West, continuing along the existing northerly right-of-way line of Lamar Lane, being the southerly line of said Tract 1, a distance of 34 44 feet to a bent 1/2-inch iron rod found in the existing easterly right-of-way line of FM 646 (100 foot right-of-way) recorded in Volume 881, Page 35 of the Galveston County Deed Records (G C.D R), being the southwesterly corner of said Tract 1,

2) THENCE, North 01°55'43" West, along the existing easterly right-of-way line of FM 646, being the westerly line of said Tract 1, a distance of 177 00 feet to a point in the northerly line of said Lot 14, being the southerly line of Lot 17 of said Thaman's First Subdivision, same being the northwesterly corner of said Tract 1, also being the southwesterly corner of that certain 0.761 acre tract of land conveyed to United States Management Corporation by deed of record in County Clerk File No 8647765, Film Code No 004-97-1339 and with a lease assignment to SSP Partners, A Texas Partnership by deed of record in County Clerk File No 2001054719, Film Code No 016-16-1592, O P R O R P G.C , from which a 5/8-inch iron rod found bears South 03°08' West, a distance of 0 89 feet,

3) THENCE, North 88°03'13" East, along the common line of Lot 14 and said Lot 17, being the northerly line of said Tract 1, same being the southerly line of said 0 761 acre tract, a distance of 9 48 feet to a 5/8-inch iron rod with aluminum cap stamped "TxDOT" set in the proposed easterly right-of-way line of FM 646,

EXHIBIT "A"

4) THENCE, South 01°55'00" East, along the proposed easterly right-of-way line of FM 646, a distance of 152 00 feet to a 5/8-inch iron rod with aluminum cap stamped "TxDOT" set for an angle point, **

5) THENCE, South 46°55'17" East, continuing along the proposed easterly right-of-way line of FM 646, a distance of 35.35 feet to the POINT OF BEGINNING and containing 0 046 of one acre (1,987 square feet) of land **

Notes

All bearings and coordinates are based on the Texas Coordinate System, South Central Zone, North American Datum 1983 (1996 Adjustment), all distances and coordinates are surface an may be converted to grid by dividing by a combined adjustment factor of 1 00013

** The monument described and set in this call may be replace with a TxDOT Type II right-of-way marker upon completion of the highway construction project under the supervision of a Registered Professional Land Surveyor, either employed or retained by TxDOT

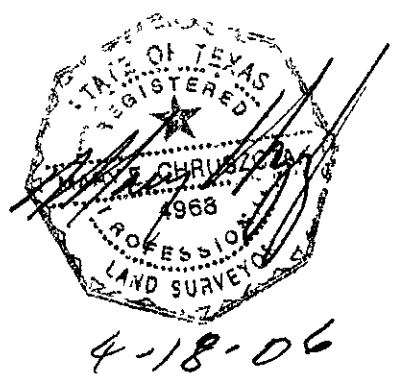
Access is permitted to the highway facility from the remainder of the property adjacent to this parcel

A plat of even survey date herewith accompanies this property description

I certify that the survey was performed on the ground under my supervision on August 15, 2003

Prepared By

GeoSolutions, Ltd
1440 Lake Front Circle, Suite 110
The Woodlands, Texas 77380
Tel. 281-681-9766

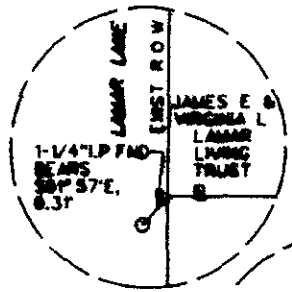


4-18-06

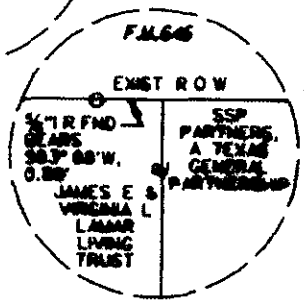
LEGEND

- Set ⅝" IR w/TxDOT Alum Cap
- Fnd. ⅝" IR w/TxDOT Alum Cap
- Set ⅝" Iron Rod with GS Cap (unless otherwise noted)
- Fnd. (Type indicated at Location)
- GAS PUMP
- MONITOR WELL
- WATER METER
- 2'X2' GAS COVER
- PROPERTY LINE
- SURVEY LINE
- LANDHOOK
- BREAK

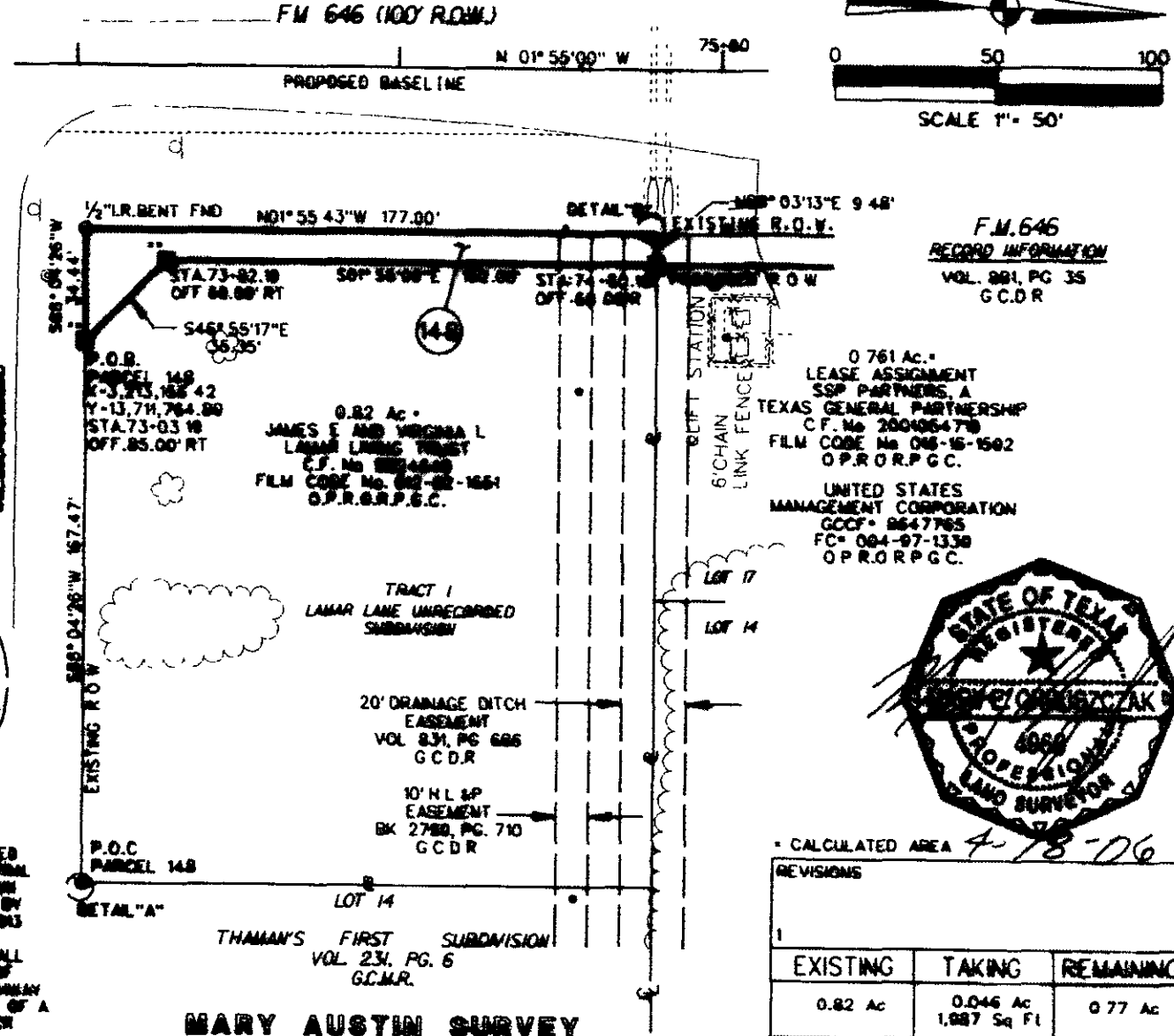
P.O.B POINT OF BEGINNING
P.O.C POINT OF COMMENCING
STA. STATION
OFF OFFSET
R.O.W RIGHT OF WAY
N.T.S NOT TO SCALE



DETAIL "A"
N.T.S



DETAIL "B"
N.T.S



NOTES

1. ALL BEARINGS AND COORDINATES SHOWN ARE BASED ON THE TEXAS COORDINATE SYSTEM, SOUTH CENTRAL ZONE, NAD 83 (1986 ADJ.) ALL COORDINATES SHOWN ARE SURFACE AND MAY BE CONVERTED TO GRID BY DIVIDING BY TxDOT CONVERSION FACTOR OF 1.00013
2. **THE MONUMENT DESCRIBED AND SET IN THIS CALL MAY BE REPLACED WITH A TxDOT TYPE RIGHT OF WAY MARKER UPON THE COMPLETION OF THE HIGHWAY CONSTRUCTION PROJECT UNDER THE SUPERVISION OF A REGISTERED PROFESSIONAL LAND SURVEYOR, EITHER EMPLOYED OR RETAINED BY TxDOT
3. THIS MAP IS BASED ON ABSTRACTING PERFORMED BY POSTLE PROPERTY SERVICES IN MAY 2003 MAP COMPLETED IN APRIL, 2006.
4. PROPERTY DESCRIPTION OF EVEN DATE HAS BEEN PREPARED IN CONJUNCTION WITH THIS PARCEL PLAT
5. ACCESS IS PERMITTED TO THE HIGHWAY FACILITY FROM THE REMAINDER OF THE PROPERTY ADJACENT TO THIS PARCEL

MARY AUSTIN SURVEY
A-14

DEED REFERENCES WITH VOL AND PG ARE OF THE GALVESTON COUNTY DEED RECORDS G.C.M.R INDICATES GALVESTON COUNTY PLAT RECORDS, AND C.F INDICATES CLERKS FILE NO OF THE OFFICIAL PUBLIC RECORDS OF REAL PROPERTY OF GALVESTON COUNTY

* CALCULATED AREA

REVISIONS

1

EXISTING	TAKING	REMAINING
0.82 Ac	0.046 Ac 1,987 Sq Ft	0.77 Ac

Solutions, Ltd.

Tel (281) 681-9766 Fax (281) 681-9779

PARCEL 14B
FM 646
GALVESTON COUNTY, TEXAS
R O W C S J - 0078-01-032

DATE APRIL, 2006 | SCALE 1" = 50'

PARCEL 14B
ACCOUNT NO 8042-02-068

FILED AND RECORDED

OFFICIAL PUBLIC RECORDS

20120001621

January 10, 2012 05 05 24 PM

FEE $0 00

Dwight D. Sullivan, County Clerk

Galveston County, TEXAS

AGENDA ITEM #4

THE COUNTY OF GALVESTON

RUFUS CROWDER, CPPB
PURCHASING AGENT

COUNTY COURTHOUSE
722 Moody (21st Street)
Fifth (5th) Floor
GALVESTON, TEXAS 77550
(409) 770-5371

GWEN MCLAREN, CPPB
ASST PURCHASING AGENT

January 2, 2012

Honorable County Judge
And Commissioners' Court
County Courthouse
Galveston, Texas

Re Disposal of Salvage or Surplus Property

Gentlemen,

It is requested that authorization be granted to dispose of the salvage and/or surplus property items represented on the attached Vehicle Listing This request is per the instructions outlined in the Texas Local Government Code, section 263 152, Disposition

These items will be placed on the GovDeals website within 30 days after authorization is granted

Your consideration in this matter will be greatly appreciated

Respectfully submitted,

Rufus G Crowder, CPPB
Purchasing Agent
County of Galveston

Attachment

GALVESTON COUNTY, TEXAS
VEHICLE LISTING BY DEPARTMENT

FAID	VIN NO	DESCRIPTION	YEAR	MAKE	MODEL	UNIT	LIC NO	MILEAGE	AS OF DATE	AUCTION 2012
DEPARTMENT 127100 District Attorney										
000000001498	2FAFP71W0YX191598	SEDAN	2000	FORD	CROWN VICTORIA	UNIT 1001	408WLN	157 000	04/29 2011	
TOTAL COUNT 1										
DEPARTMENT 172111 Fleet Mgmt - Galveston										
000000026729	1FBSS31L9YHB83722	VAN	2000	FORD	F350	UNIT C4003	859XSW	133 342	07/18/2011	
000000029260	2FAFP71W56X144144	PATROL-VARIOUS	2006	FORD	POLICE INTERCEPTOR	UNIT 3614	222*088	16		
000000029329	2FAFP71W17X135474	4 DOOR SEDAN	2007	FORD	CROWN VIC	UNIT 3705	1005965	16		
000000029349	2FAFP71W47X135470	4 DOOR SEDAN	2007	FORD	CROWN VIC	UNIT C0715	085TVC	16		
000000029336	2FAFP71W37X135475	4 DOOR SEDAN	2007	FORD	CROWN VIC-PATROL-CAR	UNIT-3706	1005967	16		
TOTAL COUNT 5										

AGENDA ITEM #5

COUNTY OF GALVESTON
RESOLUTION

On this the 10th day of January 2012, the Commissioners Court of Galveston County, Texas, convened in a regularly scheduled meeting with the following members thereof present

MARK HENRY, County Judge, **absent**
PATRICK F DOYLE, Commissioner, Precinct No 1,
KEVIN O'BRIEN, Commissioner, Precinct No 2,
STEPHEN D HOLMES, Commissioner, Precinct No 3,
KENNETH D CLARK, Commissioner, Precinct No 4, and **Acting County Judge**
DWIGHT D SULLIVAN, County Clerk,

when the following proceedings, among others, were had, to-wit

WHEREAS, the Galveston County Commissioners Court finds it in the best interest of the citizens of Galveston County that the Prosecution of Juvenile Offenders Project of the District Attorney's Office be operated for the grant period of September 1, 2012 to August 30, 2013, and

WHEREAS, Galveston County Commissioners Court agrees to providing all applicable cash match for the said project as required by the Juvenile Accountability Block Grant application, and

WHEREAS, Galveston County Commissioners Court agrees that in the event of loss or misuse of the Criminal Justice Division funds, Galveston County Commissioners Court assures that the funds will be returned to the Criminal Justice Division in full

WHEREAS, Galveston County Commissioners Court designates the County Judge as the grantee's authorized official The authorized official is given the power to apply for, accept, reject, alter or terminate the grant on behalf of the applicant agency

NOW THEREFORE, BE IT RESOLVED that the Galveston County Commissioners Court approves submission of the grant application for the Prosecution of Juvenile Offenders Project to the Office of the Governor, Criminal Justice Division

SIGNED AND ATTESTED to on this the 10th day of January 2012

Dwight D Sullivan, County Clerk
By: Brandy Chapman, Deputy
Grant Application Number 1330013

Mark Henry, County Judge
Kenneth Clark, Acting County Judge

AGENDA ITEM #6

COUNTY OF GALVESTON

RESOLUTION

WHEREAS, The County of Galveston finds it in the best interest of the citizens of Galveston County, that the Prosecution of Cases Involving Violent Crimes Against Women Project be operated for the FY 2013 , and

WHEREAS, Galveston County agrees to provide applicable matching funds for the said project as required by the VAWA grant application, and

WHEREAS, Galveston County agrees that in the event of loss or misuse of the Criminal Justice Division funds, Galveston County assures that the funds will be returned to the Criminal Justice Division in full

WHEREAS, Galveston County designates the County Judge as the grantee's authorized official The authorized official is given the power to apply for, accept, reject, alter or terminate the grant on behalf of the applicant agency

NOW THEREFORE, BE IT RESOLVED that Galveston County approves submission of the grant application for the Prosecution of Cases Involving Violent Crimes Against Women Project to the Office of the Governor, Criminal Justice Division

Passed and Approved this the 10th day of January, 2012

~~Mark Henry, County Judge~~
Kenneth Clark, Acting County Judge

Dwight D Sullivan, County Clerk
By: Brandy Chapman Deputy
Brandy Chapman

Grant Application Confirmation Number _____

AGENDA ITEM #7

TNMP

STACY WHITEHURST
VICE PRESIDENT OF REGULATORY AFFAIRS

577 N Garden Ridge Blvd
Lewisville, TX 75067-2691

RECEIVED
DEC 21 2011
GALVESTON COUNTY JUDGE

December 19, 2011

Honorable Judge James D Yarbrough
722 Moody
Galveston, Texas 77550
Galveston County

Honorable Judge Yarbrough

As required in House Bill 3059, Section 366.005, Texas-New Mexico Power Company is providing new utility service connections for counties you represent

Any questions please contact Sara Walters at 469-484-8587

Sincerely,

Stacy R Whitehurst

SRW/sw
Enclosure

cc Sara Walters

Texas New Mexico Power Company
New Premise Turn-Ons
577 N Garden Ridge Blvd
Lewisville, Texas 75067
Phone 972-420-4189

County GALVESTON

Service Address	City/State/Zip	Established Date	Prem Code
5217 1/2 CALVERT LN	DICKINSON TX 77539	13-DEC-2011	542649
HWY 1765	TEXAS CITY TX 77590	06-DEC-2011	542081
2327 1/2 PASQUA TRAIL	LEAGUE CITY TX 77573	09-DEC-2011	542439
4629 1/2 29TH ST	DICKINSON TX 77539	13-DEC-2011	542681
217 SHOSHONE RIDGE DR	LA MARQUE TX 77568	07-DEC-2011	542260
219 TURQUOISE TRADE DR	LA MARQUE TX 77568	07-DEC-2011	542259
2105 DICKINSON AVE	LEAGUE CITY TX 77573	16-DEC-2011	542951
W 1309 PARKWOOD AVE UNIT 103	FRIENDSWOOD TX 77546	16-DEC-2011	542919
6555 SOUTH SHORE BLV	LEAGUE CITY TX 77573	14-DEC-2011	542799
S 1111 FRIENDSWOOD DR	FRIENDSWOOD TX 77546	14-DEC-2011	542769
W 400 PARKWOOD AVE STE 116	FRIENDSWOOD TX 77546	07-DEC-2011	542229
126 MUSTANG STAMPEDE DR	LA MARQUE TX 77568	12-DEC-2011	542529
230 SHOSHONE RIDGE DR	LA MARQUE TX 77568	12-DEC-2011	542501
230 SPLINTERED ARROW DR	LA MARQUE TX 77568	12-DEC-2011	542500
S 2214 GULF FWY	LEAGUE CITY TX 77573	19-DEC-2011	542979

AGENDA ITEM #8

GALVESTON CENTRAL APPRAISAL DISTRICT

Ken Wright, Chief Appraiser
600 Gulf Freeway, Suite113 Texas City, Texas 77591
Telephone (409) 935-1980 or toll free (866) 277-4725
Fax (409) 935-4319

RECEIVED
DEC 27 2011
GALVESTON COUNTY JUDGE

December 21, 2011

The Honorable Mark Henry
County Judge
County of Galveston
722 Moody, 2nd Floor
Galveston, TX 77550

RE Board of Directors Election 2012-2013

Dear Judge Henry:

Please find enclosed the *Summary of Votes* of the Galveston Central Appraisal District Board of Directors election The following five candidates received the highest number of votes and are, therefore, declared directors of the Galveston Central Appraisal District for the two-year term beginning January 1, 2012 and ending December 31, 2013

Gary A Jones
Dan Brightwell
David A Moss
Victor Pierson
Walter Syers

Mrs. Cheryl E Johnson, Galveston County Tax Assessor-Collector, will serve as member ex-officio If you have any questions, please call me at your convenience.

Sincerely,

Ken Wright
Chief Appraiser

KW:jw
Enc

cc: Mr Mel Trammell, Finance Director

GALVESTON CENTRAL APPRAISAL DISTRICT
Board of Directors Selection
2012 - 2013
Deadline 12/15/11

SUMMARY OF VOTES

Voting Units and Allocated Votes																									
Candidates	County	School Districts									Cities														TOTAL
	Incl RFL	Galv	Dickins	Frndsw	High Isl	Hitchc	LaM	Cl Creek	S Fe	TC	Galv	TC	LaM	Hitchc	Jam B	Dickins	Frndsw	Kemah	LC	ClSh	S Fe	Tiki	Bayou	VOTES
	1242	520	370	284	10	74	178	674	144	481	225	208	31	14	7	33	137	6	334	0	17	6	5	5000
Jones, Gary A	2		370			74		124	144								137	3	2					856
Moss, David	2						178			481		208	31						2					902
Pierson, Victor	2	520									225				7	33			2				3	792
Syers, Walt	2			284				550											2					838
Williams, II, Emery R	2													14										16
Brightwell, Dan	834																		2					836
Morrison, Clay	396																	3	322					721
Timmins, Evelyn	2																		2		17	6	2	29

AGENDA ITEM #9

Travel & Training - In Texas

Item #	Department	# Emp	Purpose	Date(s)	Location	Cost	Fund	Available Budget
1	Engineering	1	Broaden knowledge in engineering and learn about engineering failures during hurricanes and at other times	February 23-24, 2012	Austin, TX	$951	1101	$3,900
2	IT	3	IFAS training and development	January 18-10, 2012	Houston, TX	$365	1101	$24,328

In Texas

Travel & Training Request

Date of Request:	January 3, 2012
Department/Division	Engineering
Subject	Forensics Engineering Symposium
Event Dates	February 23-24, 2012
Location Within Galveston County:	
Location Out of Galveston County.	University of Texas at Austin, W Pickle Research Center
Person(s) to Attend	Mike Fitzgerald
Reason:	Broaden knowledge in engineering & learn about engineering failures during hurricanes and at other times.
Benefit to County	Increase County Engineer's knowledge & training

Estimated Expense:	
Fee	$550 00
Meals	$90 00
Air.	
Car:	
Hotel.	$310 85
Other	
Total Cost	$950.85

Funding Source: 1101 190100 5495100 (Education) ($550.00)
1101 190100 5496100 (Travel) ($400.85)

General Fund Amount	
Grant Fund Amount	Name of Grant
Other Source:	Name of Other Source
Total	

Authorized by

THE UNIVERSITY OF TEXAS AT AUSTIN
Cockrell School Center for Lifelong Engineering Education

Forensics Engineering Symposium

February 23 & 24, 2012

Program Agenda

Time	Lecture Title	Presenter
Thursday, February 23, 2012		
7 30 – 8 00	**Registration with Light Breakfast**	
8·00 – 10·00	**Forensic Engineering Introduction and Case Studies**	David W Fowler Professor, UT
10 00 – 10 15	**Break**	
10 15 – 12 15	**Case Studies, Continued**	David W Fowler Professor, UT
12 15 – 1 15	**Lunch**	
1 15 – 3 15	**Case Histories of Building Failures - Forensics and Methodology**	Patrick J Sullivan
3 15 – 3 30	**Break**	
3 30 – 5 30	**Sudden Damage vs. Maintenance Problems in Buildings**	Jim Wiethorn Haag Engineering
Friday, February 24, 2012		
8 00 – 10 00	**Commonality Test Methodology and Other Common Peril Case Studies**	Erik Nelson
10 00 – 10 15	**Break**	
10 15 – 12 15	**Risks in Structural Engineering, Some Case Histories of Failures and Lessons Learned**	Narendra Gosain
12 15 – 1 15	**Lunch**	
1 15 – 3 15	**Being an Expert Witness: What You Need to Know**	Stewart Whitehead
3 15 – 3 30	**Break**	
3 30 – 5 30	**Professional Practice, Engineering Ethics and Board Update**	C W Clark

THE UNIVERSITY OF TEXAS AT AUSTIN
Cockrell School Center for Lifelong Engineering Education

AFFIX STAMP HERE

US POSTAGE

FORENSICS ENGINEERING SYMPOSIUM

FEBRUARY 23-24, 2012

The University of Texas at Austin
West Pickle Research Center

REGISTER NOW!
Go online www.UTclee.org
or call 512.471.3506
$550.00 (before Jan26)
$650.00 (after Jan26)

Mike Fitzgerald
722 Moody St
Galveston, TX 77550

Wed nite Feb 22
Thur nite Feb 23
Fri nite Feb 24

THE UNIVERSITY OF TEXAS AT AUSTIN

FORENSICS ENGINEERING SYMPOSIUM

FEBRUARY 23-24, 2012

The University of Texas at Austin
West Pickle Research Center

REGISTER NOW!
Go online www.UTclee.org
or call 512.471.3506
$550.00 (before Jan26)
$650.00 (after Jan26)

This Forensics Engineering Symposium brings together the best of academia and industry. Topics will focus on lessons learned from hurricanes, building envelopes, structural failures, foundations, as well as a powerhouse of case studies and best practices from a full spectrum of industries.

TOPICS

- Introduction to Forensics Engineering
- Case Studies
- Geoforensic Engineering
- Forensics and Failures
- Commonality Test Methodology
- Sudden Damage vs. Maintenance Problems in Buildings
- Professional Practice, Ethics & Board Updates
- Being an Expert Witness

Cockrell School of Engineering
Center for Lifelong Engineering Education

INFORMATION TECHNOLOGY

5WH -

What: **South Central SUGA Conference**

Who: **David Brannen, Rebecca Galindo and Thomas Kuruvilla**

Where: **Marriott Houston Westchase**
2900 Briarpark Dr.
Houston, TX 77042

When: **January 18-20, 2012** Wednesday Thursday and Friday

Why: **IFAS training and development.**

Brochure: **http://www.sugainc.org/clientuploads/SouthCentral2011/SCSUGAReg2012-Final.pdf**

How: Carpool to West Houston for 3 days of classes

Planned Costs:	*Item*	*Qty*	*Unit $*	*Total $*
	Registration Fee	**3**	**$75 if before January 6**	**225**
	42 Miles one way	**6**	**.555**	**139.86**
			Total = **$**	**364.86**

Charge to Edu 5495100 / 1101159100

Requested by Mike Owens Date. 1/4/12

Approved by Michael O. Owens Date 1/4/12

Approved by. J. Allen Date: 1-4-12

EDUCATION COURSES FOR WEDNESDAY, JANUARY 18, 2012

SUBJECT TO CHANGE

May be added (pending review)
NaviLine Administration
PCI Compliance
Client Access Printers

PUBLIC ADMINISTRATION & NOT-FOR-PROFIT

Location	8:30-9:45 a.m.	10:00-11:15 a.m.	1:00-2:15 p.m.	2:30-3:45 p.m.	4:00-5:15 p.m.
Westchase 1	HRA600-Introduction to Human Resources (NaviLine, Ures)	HRA612 Understanding the Training Function in Human Resources (WebEx) (NaviLine, Raines, Daniel (moderator))	HRA618-Human Resources Information System Transaction Processing (WebEx) (NaviLine, Raines, Daniel (moderator))	PAA645-NaviLine Finance Payroll and Human Resources Product Enhancements (NaviLine, English)	
Grand Ballroom Salon D	CIS672-Customer Information System Efficient Customer Service Practices Inquiry (NaviLine, Oliver)	CIS673-Customer Information System Efficient Customer Service Practices Maintenance (NaviLine, Oliver)	CIS657 Customer Information System Billing and Smart Metering Overview (NaviLine, Carpenter)	CIS609-Customer Information System Product Enhancements and Future Direction (NaviLine, Carpenter, Oliver)	CRA619-Cash Receipts Roundtable (NaviLine, Cooper)
Grand Ballroom Salon C		CRA607 Printer Setup in Cash Receipts (NaviLine, Cooper)	BPA613-Building Permits Efficiency Tips and Techniques (NaviLine, Passo)	BPA619-Building Permits Online Applications using Click2Gov (NaviLine, Passo)	PAA654-Compare NaviLine / PLUS / ONESolution Permitting (NaviLine, ONESolution, PLUS, Passmore)
Richmond 1	PZA613-Planning and Engineering Efficiency Tips and Techniques (NaviLine, Passo)	PZA621-Planning and Engineering Creating an Agenda (NaviLine, Passo)	PAA643-Compare NaviLine / PLUS / ONESolution Planning Zoning and Engineering (NaviLine, ONESolution, PLUS, Passmore)		TXA618-Tax Billing & Collections Future Direction (NaviLine, Hass)
Briarpark 1 (Lab)	CGA683-QRep (Cognos Impromptu) for Beginner / Intermediate Users: Community Services (Lab) Work at your own pace (NaviLine, Cooper, Daniel)	CGA685-QRap (Cognos Impromptu) for Beginner / Intermediate Users: Finance (Lab) Work at your own pace (NaviLine, Lukowitz, Daniel)			
Grand Ballroom Salon A		PIA633-New Employee Orientation for Purchasing/Inventory (Nav_Line, Kirk)	PIA608-Enabling DMS Purchase Order Print & Automatic Mass PO Close (Purchasing/Inventory) (Nav_Line, Kirk)	PIA634-Year End Processing with Purchasing/Inventory (NaviLine, Kirk)	
Westchase 2	PLU647-Employee Timesheets (PLUS, Konsalinsky, Bennage)	PLU653-Introduction to FinancePLUS Fixed Assets (PLUS, Konsalinsky, Bennage)	PLU646-FinancePLUS Accounts Payable ACH Process (PLUS, Konsalinsky, Bennage)	PLU603-What's New with FinancePLUS 5.0 (PLUS, Bennage, Konsalinsky)	
Westchase 3		PLU634-CommunityPLUS Form Easy and Mail Merge Overview (PLUS, Van)	PLU655-CommunityPLUS with Silverlight What's New in Community Development Applications (Permitting, Zoning Licensing Code Enforcement) (PLUS, Van)		PLU660-CommunityPLUS Community Development Roundtable (Permitting Zoning Licensing Code Enforcement) (PLUS, Van)
Richmond 2	USR6096-CDD Basics Financials (User-led Session) (Preso, DeShazer)	OSA609-ONESolution Finance & Payroll Product Enhancements (ONESolution Finance, English)	USR6093-Managing Migrating Classic IFAS to 7i (User led Session) (IFAS, Bigler)	USR6097-Intermediate CDD (User led Session) (IFAS, DeShazer)	IFAS TBA
Grand Ballroom Salon B	WFA616-Work Orders/Facility Management 101 (NaviLine, Kelly)	WFA628-Work Orders/Facility Management Reporting (NaviLine, Kelly)	WFA608-How Work Orders/Facility Management and Continuing Property Records Work Together (NaviLine, Kelly)	WFA610-Tips and Techniques for Improving Processes with Work Orders/Facility Management (NaviLine, Kelly)	WFA613-Work Orders/Facility Management Internal Billing (NaviLine, Kelly)
Republic Grill Private Dining Room					USR6088-Customer Information System Monthly Processes & Revenue Balancing What Do You Do? (User-led Session) (NaviLine, Mikules)

PUBLIC SAFETY & JUSTICE

Location	8:30-9:45 a.m.	10:00-11:15 a.m.	1:00-2:15 p.m.	2:30-3:45 p.m.	4:00-5:15 p.m.
Grand Ballroom Salon E		RMS616-Understanding Incident Based Reporting (IBR) (OSSI, R. Spoon)	RMS618-Understanding Uniform Crime Reporting (UCR) (OSSI, R. Spoon)	OSPSJ603-ONESolution Public Safety & Justice Suite Roadmap and Enhancements (REPEATED FRI 10:30 A.M.) (ONESolution, Lowry)	PSJ6009-OSSI RMS & JMS Enhancements and Roadmap (OSSI, Gole)
Briarpark 1 (Lab)					CGA686-QRap (Cognos Impromptu) for Beginner / Intermediate Users: Public Safety & Justice (Lab) Work at your own pace (NaviLine, Crane, Lukowitz)
Briarpark 3	CCA623-How to Configure NaviLine Crimes Versions 6-8 Enhancements (NaviLine, Crane)	CCA624-NaviLine Crimes Reporting Let Me Count the Ways (NaviLine, Crane)	NaviLine Public Safety IDEAS Roundtable (NaviLine, Lowry)		PSJ609-OSSI/ONESolution Suite Overview (ONESolution, Barnett)
Grand Ballroom Salon F	OSIJS600-Integrated Justice Suite (IJS) Overview (ONESolutions, Wallace)	Public Safety Multi-Agency Roundtable (OSSI, ONESolution, Lowry, Gole)	RMS627-OSSI RMS Common Support Issues Tips and Tricks (WebEx) (OSSI, Burke (remote), Lowe (on-site moderator))	JMS605-OSSI JMS Common Support Issues Tips and Tricks (WebEx) (OSSI, Burke (remote), Lowe (on-site moderator))	PSJ6005-OSSI Quality Control Roundtable (OSSI, Lowry, Kelly)
Westchase 4				USR6087 Easy Application Deployment and Secure Remote Access with Citrix (User-led Session) (OSSI, Irwin)	
Briarpark 2 (Lab)	EMS614-OSSI CAD End User Refresher (Lab) 8:00-11:45 a.m. (OSSI, Dean)	EMS614 CONTINUED-OSSI CAD End User Refresher (Lab) 9:00-11:45 a.m. (OSSI, Dean)	EMS615-OSSI CAD System Administrator Refresher (Lab) 1:00-4:45 p.m. (OSSI, Dean)	EMS615 CONTINUED-OSSI CAD System Administrator Refresher (Lab) 2:00-5:45 p.m. (OSSI, Dean)	

GENERAL

Location	8:30-9:45 a.m.	10:00-11:15 a.m.	1:00-2:15 p.m.	2:30-3:45 p.m.	4:00-5:15 p.m.
Richmond 3		iSeries Track HTA6063-Working Effectively as an End User on Green Screen or Select Environment (Part 1 of 4) (NaviLine, Phillips)	iSeries Track TCH684-iSeries Maintenance Best Practices (Part 2 of 4) (NaviLine, Phillips)	iSeries Track NLA618-Version and Release Upgrade Best Practices (Part 3 of 4) (NaviLine, Phillips)	iSeries Track TCH669-The What Why and How of Journaling (Part 4 of 4) (NaviLine, Phillips)
Westchase 4	USR652 iSeries 101 (User-led Session) (NaviLine, Perry)		USR608-Introduction to Query (User-led Session) (NaviLine, Perry)		USR631-Intermediate Query Report Formatting (User led Session) (NaviLine, Perry)
Richmond 1				HTA621 ASP Overview for SunGard Public Sector Applications (REPEATED THUR 10:00 A.M.) (All, Sarsena, Critchfield)	
Grand Ballroom Salon G	EGV600-eGovernment Products Overview (NaviLine, ONESolutions, Baum)	TCH636-Wireless Implementations What You Should Know (All, Preare)	CLA607-GovNOW Product Overview (NaviLine, ONESolutions, Baum)	NLA604-NaviLine Interface Overview (NaviLine, Baum)	HTA6028-Disaster Recovery & Managed Services Overview for SunGard Public Sector Applications (REPEATED FRI 9:00 A.M.) (All, Sarsena, Critchfield)
Grand Ballroom Salon H	CGA661 Cognos Business Intelligence An Overview of SunGard Public Sector's Advanced Reporting and Business Intelligence Solution (NaviLine, ONESolutions, PLUS, Lukowitz)		CGA681-Cognos Business Intelligence (Cognos 10) and NaviLine (NaviLine, Lukowitz)	OSA600-ONESolution Overview Trends and Direction (REPEATED THUR 3:30 P.M.) (ONESolutions, Bates)	OSA611-ONESolution Desktop and Security (ONESolutions, Bates)
Briarpark 1 (Lab)				CGA678-Test Drive Cognos Business Intelligence - Work at Your Own Pace (Lab) (REPEATED THUR, 2:00 P.M.) (All, Lukowitz, Cooper)	
Republic Grill Private Dining Room	Maximizing Your SunGard Investment (NaviLine, ONESolutions, Swanson)		VND6025-Enterprise Workforce Management Employee Timekeeping and Advanced Scheduling (All, ExpandTime Software)	VND6028-The World of Credit Cards is Changing How New Regulations Impact Your Agency (All, Automatic Merchant)	

EDUCATION COURSES FOR THURSDAY, JANUARY 19, 2012

SUBJECT TO CHANGE

PUBLIC ADMINISTRATION & NOT-FOR-PROFIT

Location	8:15-9:30 a.m.	9:45-11:00 a.m.	11:15 a.m.-12:30 p.m.	1:45-3:00 p.m.	3:15-4:30 p.m.	4:45-6:00 p.m.
Grand Ballroom Salon D	CIS675-Customer Information System: Efficient Cycle, Off Cycle and Final Billing Processes in Customer Information System (NavLine, Oliver)	CIS619-Customer Information System Delinquency Collection Liens and Write-Off Processing (NavLine, Oliver)	OSUT600-ONESolution Utilities Stakeholder Participation Utilities Service Orders (ONESolution, Carpenter, Jones)			CIS639-Customer Information System Roundtable (NavLine, Oliver)
Grand Ballroom Salon C	PAA642-NavLine Community Services Product Enhancements (NavLine, Haas)		PAA656-NavLine Community Services IDEAS Review (NavLine, Haas)		CEA617 Code Enforcement: Fee and Lien Processing (NavLine, Haas)	PAA625-NavLine Community Services Future Direction (NavLine, Haas)
Republic Grill Private Dining			USR6089-Code Enforcement-Maximize Best Practices & Minimize Stress (User-led Session) (NavLine, Hollis)		USR612-Land/Parcel Management, Why You Need a Land Administrator (User-led Session) (NavLine, Perry)	USR6084-Code Enforcement Roundtable (User-led Session) (NavLine, Kotz)
Westchase 4		USR6088-Land/Parcel Management Roundtable (User-led Session) (NavLine, Perry)				
Richmond 1	PAA649-Compare NavLine / PLUS / ONESolution Code Compliance (NavLine, ONESolution, PLUS, Personnel)		LXA601-Land Management: Cleaning Up Your Database (NavLine, Pease)	LXA613-Land Management: I Can See My House From Here (NavLine, Pease)	PAA657-Compare NavLine / PLUS / ONESolution Business Licensing, Registration, and Tax (NavLine, ONESolution, PLUS, Pacewater)	PAA658-Compare NavLine / PLUS / ONESolution Land Administration (NavLine, ONESolution, PLUS, Pacewater)
Briarpark 1 (Lab)	PAA604-Electronic Plan Review - Fast Drive Manager (Lab) (NavLine, Pease)	CEA618: Code Enforcement: Creating a Notice Letter in DMS (Lab) (NavLine, Pease)			CDA6004-Office Cognos Improvements for Beginner / Intermediate Users - Optional (Lab) Work at your own pace (NavLine, Oliver, Lukowitz)	
Westchase 2	PLU666-FinancePLUS Human Resources Benefits Overview (PLUS, Kondelinsky)	PLU659-FinancePLUS Human Resources Payroll Processing Overview (PLUS, Kondelinsky)	PLU661-FinancePLUS 8.0 Document Management, Workflow, and Security Enhancements (PLUS, Basinage)	PLU621-FinancePLUS Human Resources Discussion Group (PLUS, Kondelinsky, Basinage)	PLU613-FinancePLUS Fund Accounting Discussion Group (PLUS, Kondelinsky, Basinage)	
Westchase 3	PLU635-End of Period Processing for CommunityPLUS Business Licensing (PLUS, Van)	PLU649-CommunityPLUS with Silverlight: What's New in Utility Billing and Miscellaneous Billing (PLUS, Van)	PLU618-CommunityPLUS Utility Billing Roundtable (PLUS, Van)	PLU652-PLUS IDEAS Review (PLUS, Hollis)	PLU619-CommunityPLUS Cash Receipts & Miscellaneous Billing Roundtable (P. LUS, Van)	
Richmond 2	IFAS TBA	IFAS TBA		IFAS TBA	IFAS TBA	IFAS TBA
Grand Ballroom Salon A	GMA668-Understanding the Most Relevant GMBA Reports for Managers (NavLine, Kirk)		PAA663-Bank Reconciliation using GMBA and Cash Receipts (NavLine, Kirk)	PAA667-Migration Process from IFAS, NavLine or PLUS to ONESolution Finance & Community (PLUS, Jones)	GMA657-GMBA Fiscal Year End Creating Accounts for the Next Fiscal Year (NavLine, Kirk)	PRA626-Payroll/Personnel Roundtable (NavLine, Daniel)
Grand Ballroom Salon B	OSA607-ONESolution CRM/311 New Windows .Net Solution (ONESolution, Tidwell, Kelly)	OSA6600-ONESolution Asset Management New Windows .Net Solution Overview (ONESolution, Tidwell, Kelly)		OSFR607-ONESolution Computerized Maintenance Management System (CMMS) (ONESolution, Tidwell, Kelly)	CZA608-Contract Management Reminders, Escalations and Events: What They Can Do for You (NavLine, Kelly)	OSW6603-Work Management Roundtable & Stakeholder Participation (Work Orders/Fleet/Contract Management/Asset Management if/Continuing Property Records) (NavLine, Tidwell, Kelly)
Grand Ballroom Salon G	PRA661-Setting Up User Department Entry in Payroll/Personnel (NavLine, Daniel)	PRA662-Payroll/Personnel Processing and Reconciliation (NavLine, Daniel)	PRA601-Payroll/Personnel Budgeting (NavLine, Daniel)	PRA602 Calendar Year End Processing in Payroll/Personnel (NavLine, Daniel)		
Grand Ballroom Salon H	MRA610-Accounts Receivable Overview (including acceptance of Payments in Cash Receipts) (NavLine, Cooper)	MRA621-Accounts Receivable System Control Overview (NavLine, Cooper)	MRA622-Accounts Receivable Demand Reports (NavLine, Cooper)		MRA602-Using CMS for Accounts Receivable Invoices and Statements (NavLine, Cooper)	MRA626-Accounts Receivable Roundtable (NavLine, Cooper)

PUBLIC SAFETY & JUSTICE

Location	8:15-9:30 a.m.	9:45-11:00 a.m.	11:15 a.m.-12:30 p.m.	1:45-3:00 p.m.	3:15-4:30 p.m.	4:45-6:00 p.m.
Briarpark 3	CAD666-CAD400 Common Support Issues (NavLine, Crane)	CAD634-CAD400 Refresher Geo-File and Overrides (NavLine, Crane)	CAD633-Getting the Most Out of CAD400 (NavLine, Crane)	PSJ6010-Mobile Data Browser & Field Reporting (New MobileOne) Enhancements (NavLine, Crane)	MDB617-MobileFlash Refresher (NavLine, Lamar)	
Grand Ballroom Salon B			OSEMS606-ONESolution CAD Searching and Option Reporting (ONESolution, Dean)			
Grand Ballroom Salon E	OSEMS606-OSSIONESolution CAD Enhancements and Roadmap (ONESolution, Lowry, Gale)	EMS616-OSSIONESolution CAD Common Support Issues: Tips and Tricks (OSSI, ONESolution, Jones)	USR6085-OSSI Roundtable (User-led Session) (OSSI, Morrison, Gale)	MBL610-OSSI MCT/MFR Common Support Issues, Tips and Tricks (WebEx) (OSSI, Gale, Lowry, Anderson)	PSJ6007 OSSI System Security Overview (OSSI, Lowry)	
Grand Ballroom Salon F	MBL611-OSSI Internet Products Common Support Issues, Tips and Tricks (OSSI, Kirby)	MBL618-OSSI MCT & MFR Enhancements and Roadmap (OSSI, Lowry, Gale)		Active Directory Configuration (OSSI, Army, Lowry)	PSJ6003-OSSI Roundtable-Quartermaster and Property & Evidence (OSSI, Gale)	eCitation Roundtable (OSSI, Gale)
Grand Ballroom Salon G	CSA612 Case Management Application Review (WebEx) (NavLine, Lemon)	CSA622-Working with Demand Reports in Case Management (WebEx) (NavLine, Lemon)	CSA601-Municipal Courts Case Management Workshop I (WebEx) (NavLine, Lemon)		PSJ681-Integrated Justice Suite (IJS) Roadmap & Product Enhancements (IDEAS) (ONESolution, Lowry)	ONESolution Public Safety IDEAS Roundtable (ONESolution, Lowry)
Westchase 4	PSJ606-CJIS Policy/Message Suites Overview (OSSI, Lowry)	PSJ6013-OSSI Mapping Tips and Tricks (OSSI, Lowry)	PSJ6006-OSSI Suite Best Practices (OSSI, Lowry)	PSJ6012-OSSI Customer Care & Customer Support Connect Portal Overview (OSSI, Lowry)		
Briarpark 2 (Lab)	MBL609-OSSI MCT System Administrator Refresher (Lab) (OSSI, Watkins)	MBL613-OSSI Internet Products Refresher (Lab) (OSSI, Kirby)	RMS620-OSSI RMS System Administrator Refresher (Lab) (OSSI, Kidd)	RMS605-OSSI JMS End User Refresher (Lab) (OSSI, Watkins)	RMS621-OSSI RMS End User Refresher (Lab) (OSSI, Kidd)	

GENERAL

Location	8:15-9:30 a.m.	9:45-11:00 a.m.	11:15 a.m.-12:30 p.m.	1:45-3:00 p.m.	3:15-4:30 p.m.	4:45-6:00 p.m.
Richmond 3	CIS610-eGovernment Utility Services (NavLine, Baum)	OSTCH601-ONESolution Technology Hardware and Topology (ONESolution, Phone, ONESolution, Baum)	CLA605-eGovernment Citizen and Miscellaneous Service (NavLine, ONESolution, Baum)	CLA606-eGovernment Community Development Services (NavLine, ONESolution, Baum)	OSA600-ONESolution Overview Trends and Direction (REPEAT SESSION) (NavLine, Blaine)	
Westchase 1	Menu Driver Track: HTA656-Fundamentals of Menu Driver in Select/Grass Screen (Part 1 of 5) (NavLine, Phillips)	Menu Driver Track: HTA671 Fundamentals of Menu Driver in NavLine (Part 2 of 5) (NavLine, Phillips)		Menu Driver Track: TCH642 Additional Application Security for NavLine (Part 3 of 5) (NavLine, Phillips)	Menu Driver Track: TCH651 Additional Application Security for Select (Part 4 of 5) (NavLine, Phillips)	Menu Driver Track: MDA600-Menu Driver Processes (Part 5 of 5) (NavLine, Phillips)
Richmond 1		HTA621-ASP Overview for SunGard Public Sector Applications (REPEAT SESSION) (All, Sereno, Oppenheim)				
Grand Ballroom Salon F			CGA682-Cognos Business Intelligence (Cognos 10) and ONESolution (ONESolution, Knowles)			
Grand Ballroom Salon C				TCH668-Virtualization for ONESolution and NavLine (NavLine, ONESolution, Phone)		
Briarpark 1 (Lab)				CGA679-Test Drive Cognos Business Intelligence: Work at Your Own Pace Lab (REPEAT SESSION) (All, Lukowitz, Cooper)		
Richmond 2			USR6086-MIS Roundtable (User-led Session) (NavLine, Whitted)			
Grand Ballroom Salon D				USR628-Intermediate Query Data Handling (User-led Session) (NavLine, Perry)		
Republic Grill Private Dining				USR6040-Top Ten QRep Tips for 2011 (User-led Session) (NavLine, Quiroga)		

EDUCATION COURSES FOR FRIDAY, JANUARY 20, 2012
SUBJECT TO CHANGE

PUBLIC ADMINISTRATION & NOT-FOR-PROFIT

Location	9:00-10:15 a.m.						10:30-11:45 a.m.					
Briarpark 1 (Lab)							BLA611-Business Licenses: Creating a License in DMS (Lab)	NaviLine	Pease			
Westchase 2	CGA669-Cognos 7 Reporting for FinancePLUS and CommunityPLUS	PLUS	Korastinsky	Van			CGA670-Cognos 8 Reporting for FinancePLUS and CommunityPLUS	PLUS	Korastinsky	Van		
Westchase 3	BLA610-Business Licenses Overview	NaviLine	Pease									

PUBLIC SAFETY & JUSTICE

Location	9:00-10:15 a.m.						10:30-11:45 a.m.					
Grand Ballroom Salon E	OSEMS604-Upgrading from OSSI CAD to ONESolution CAD - What to Expect	OSSi					OSPSJ603-ONESolution Public Safety & Justice Suite Roadmap and Enhancements (REPEAT SESSION)	ONESolution	Lowry			

GENERAL

Location	9:00-10:15 a.m.						10:30-11:45 a.m.					
Richmond 1	CLA604-eGovernment Financial and Human Resources Services	NaviLine	ONESolution	Baum								
Richmond 3	HTA6028-Disaster Recovery & Managed Services Overview for SunGard Public Sector Applications (REPEAT SESSION)	All	Serena	Crutchfield								
Westchase 4	USR630-Intermediate Query - Select Records (User-led Session)	NaviLine	Perry									

ONESolution Overview, Trends and Direction (OSA600)

Course Description	This session will present a high-level overview SunGard Public Sector's (SPS's) ONESolution portfolio The session will include ONESolution positioning, initiatives, release strategy as well as current and future design and implementation opportunities including SPS's ONESolution supporting ePortal efforts		
Product Group / Line	Public Administration and Public Safety & Justice / ONESolution	**Interest Area**	
Content/Learner Profile	Basic - All Employees - Overview	**CPE or CEU Value**	1 00
Course Start Date / Time	Wednesday January 18, 2012 / 2 30 p m , CT	**Instructor**	Bates, Don
Room for Event	Grand Ballrm Salon H	**Event Type**	Session
Course Objectives	At the completion of this session attendees will be able to have a broad understanding of SunGard Public Sector's ONESolution portfolio		
Target Audience	Management representing any of SunGard Public Sector's customers, but certainly ALL customers are welcome		
General Prerequisites			

ONESolution Overview, Trends and Direction (OSA600)

Course Description	This session will present a high-level overview SunGard Public Sector's (SPS's) ONESolution portfolio The session will include ONESolution positioning, initiatives, release strategy as well as current and future design and implementation opportunities including SPS's ONESolution supporting ePortal efforts		
Product Group / Line	Public Administration and Public Safety & Justice / ONESolution	**Interest Area**	
Content/Learner Profile	Basic - All Employees - Overview	**CPE or CEU Value**	1 00
Course Start Date / Time	Thursday, January 19, 2012 / 3 15 p m CT	**Instructor**	Bates, Don
Room for Event	Richmond 3	**Event Type**	Session
Course Objectives	At the completion of this session attendees will be able to have a broad understanding of SunGard Public Sector's ONESolution portfolio		
Target Audience	Management representing any of SunGard Public Sector's customers, but certainly ALL customers are welcome		
General Prerequisites			

ONESolution CRM/311 - New Windows .Net Solution Overview (OSA607)

Course Description	SunGard Public Sector will preview the new Public Administration ONESolution CRM/311 application Details on product features, supported interfaces, architecture and platforms will be presented along with a live preview of the application		
Product Group / Line	Public Administration / ONESolution	**Interest Area**	
Content/Learner Profile	Basic - All Employees - Overview	**CPE or CEU Value**	1 00
Course Start Date / Time	Thursday, January 19, 2012 / 1 45 p m , CT	**Instructor**	Tidwell, Kim & Kelly, Sharon
Room for Event	Grand Ballrm Salon B	**Event Type**	Session
Course Objectives	At the completion of this course, attendees will be able to -- List major features found in ONESolution CRM/311 -- Understand ONESolution 'Call Scripting' -- Understand the ONESolution Common Person and Common Entity concept		
Target Audience	All users and administrators of Public Administration systems		
General Prerequisites			

ONESolution Finance and Payroll Product Enhancements (OSA609)

Course Description	This session will be announce the new enhancements that have been included in ONESolution Version 10 20, as well as future enhancements being discussed for future releases		
Product Group / Line	Public Administration / ONESolution	**Interest Area**	
Content/Learner Profile	Intermediate - All Employees - Overview	**CPE or CEU Value**	1 00
Course Start Date / Time	Wednesday, January 18, 2012 / 10 00 a m , CT	**Instructor**	English, Jeane
Room for Event	Richmond 2	**Event Type**	Session
Course Objectives	At the completion of this session, attendees will be able to -- Be knowledgeable of the enhancements available in the 10 20 release of ONESolution -- Be aware of the enhancements being discussed for future releases of ONESolution -- Understand how to be involved in the enhancements specifications through the PAC (Product Advisory Committee) for ONESolution Finance		
Target Audience	Finance Directors, Budget Directors, Purchasing Directors, all other financial staff members		
General Prerequisites			

ONESolution Desktop and Security (OSA611)

Course Description			
Product Group / Line	Public Administration / ONESolution	**Interest Area**	
Content/Learner Profile	Basic - All Employees - Overview	**CPE or CEU Value**	1 00
Course Start Date / Time	Wednesday, January 18, 2012 / 4 00 p m CT	**Instructor**	Bates Don
Room for Event	Grand Ballrm Salon H	**Event Type**	Session
Course Objectives			
Target Audience			
General Prerequisites			

ONESolution Asset Management - New Windows .Net Solution Preview (OSAM600)

Course Description	ONESolution's Assets Management module includes the inventory, condition assessment and inspection of assets It also includes the definition of maintenance schedules and default materials lists for asset classes Unlike many Computer Maintenance Management Systems (CMMS) that are either specific to non linear or linear assets ONESolution's asset inventory has a structured asset hierarchy that serves both types of assets effectively This session will provide a preview of the ONESolution Asset Management module		
Product Group / Line	Public Administration / ONESolution	**Interest Area**	
Content/Learner Profile	Basic - All Employees - Overview	**CPE or CEU Value**	1 00
Course Start Date / Time	Thursday, January 19, 2012 / 8 15 a m , CT	**Instructor**	Tidwell, Kim & Kelly, Sharon
Room for Event	Grand Ballrm Salon B	**Event Type**	Session
Course Objectives	At the completion of this course, attendees will be able to -- Understand the differences between the NaviLine and PLUS Series suites and ONESolution Asset Management solution related to assets -- Understand the additional capabilities of the ONESolution Asset Management solution		
Target Audience	Asset Managers and Work Management Supervisors responsible for maintaining assets		
General Prerequisites			

AGENDA ITEM #10

Cheryl E. Johnson, RTA

Assessor and Collector of Taxes
Galveston County

Galveston County Courthouse
722 Moody Avenue, Galveston, Texas 77550
Toll Free 877-766-2284 Fax 409-766-2479 Office 409-765-3277
Cheryl F Johnson@co galveston tx us

RECEIVED
DEC 27 2011
GALVESTON COUNTY JUDGE

December 19, 2011

Mark Henry, Galveston County Judge
722 Moody Street
Galveston, Texas 77550

Re Request for Approval of Refunds in Excess of $2,500

Dear Judge Henry

In accordance with Section 31 11 (a) of the Texas Property Tax Code, I hereby request approval of the following refund(s)

Account Number	Amount	Reason
1160-0080-0002-014	$2,991 13	Overpayment
1897-0004-0006-000	$2,504 70	Overpayment
2114-0000-0207-000	$3,908 34	Overpayment
2397-0001-0001-000	$3,498 44	Overpayment
2818-0013-0037-000	$4,109 52	Overpayment
3510-0093-1007-002	$3,400 79	Overpayment
3841-0000-0015-000	$ 2,525 19	Overpayment
4131-0001-0018-000	$9,020 85	Overpayment
4572-0003-0003-000	$2,849 94	Overpayment
5461-0000-0009-000	$3,868 80	Overpayment
6383-0000-1747-000	$7,295 46	Overpayment
7314-0001-0008-000	$4,655 28	Overpayment

Sincerely,

Cheryl E Johnson

Good Afternoon,

Please find items for Commissioner's Court as follows

Consideration of requests for Tax Refunds in Excess of $2,500

1160-0080-0002-014	Texas American Title
1897-0004-0006-000	BAC Tax Service
2114-0000-0207-000	Susan Vaughn
2397-0001-0001-000	Alamo Title
2818-0013-0037-000	First American Tax Service
3510-0093-1007-002	Omri Shaffron
3841-0000-0015-000	Texas American Title
4131-0001-0018-000	BAC Tax Service
4572-0003-0003-000	Fannie Mae
5461-0000-0009-000	Robert E & Martha May
6383-0000-1747-000	Candace Lewis
7314-0001-0008-000	BAC Tax Service

Thank you,

Alexander Makris
Galveston County Tax Office
409 770 5106
409 766 4544 (Fax)

Cheryl E. Johnson
Assessor And Collector of Taxes
Galveston County
Galveston County Courthouse
722 Moody, Galveston, Texas 77550
(409) 765-3277 Toll Free (877) 766-2284 Fax (409) 766-2479
Cheryl E Johnson@co galveston tx us

RECEIVED
JAN 0 2 2012
GALVESTON COUNTY JUDGE

December 28, 2011

Mark Henry, Galveston County Judge
722 Moody Street
Galveston, Texas 77550

Re Request for Approval of Refunds in Excess of $2,500 00

Dear Judge Henry

In accordance with Section 31 11 (a) of the Texas Property Tax Code, I hereby request approval of the following refund (s)

Account Number	Amount	Reason
8600-0461-4942-020	$2,901 55	Supplemental Adjustment

Sincerely,

Cheryl E. Johnson

Cheryl E Johnson

2010 Supp#8

Refunds over $2500

8600-0461-4942-020	Birr, Inc	$2,901.55

AGENDA ITEM #11

Galveston County, Texas
Commissioners Court
Contract Approval Request

Date of Request	1/4/2012	Department	Information Technology		
Renewal Contract		Orgkey	1101159100	Object Code	5492101
Contract Start Date	09/02/09	Vendor	Comcast		
Contract End Date	09/01/12	Description	Ninth Amendment for Mid County Annex		
Contract # Issued By Purchasing	CM09134		Reviewed By County Legal		Yes

Fund Name	Fund #	FY12 $ Budget	FY12 $ Request	FY13 $ Request	FY14 $ Request	FY15 $ Request	FY15 $ Request
Telephone expense		$400 00 Monthly	$400 00 Monthly				
Telephone Expense		$500 00 One Time	$500 00 One time				
Totals							
Total Cost							

Approved By	Date	Signature
Admin Coordinator Department Head	1-4-12	
County Budget Office	1-4-12	
Assistant Purchasing Agent	1-5-12	
Acting County Judge	1-10-12	

Bid # BO92035

NINTH AMENDMENT
To
Network Services Agreement No. TX-8824-090309-01

This Ninth Amendment, ("Amendment") made effective as of January 4, 2012 ("Effective Date") modifies and amends the Network Services Agreement No. TX-8824-090309-01 ("Agreement"), by and between Comcast Business Communications, LLC ("Company") and County of Galveston ("Customer"), individually referred to herein as "Party", and jointly referred to as "Parties". In the event of conflict between this Amendment and the Agreement, the terms and conditions of this Amendment shall take precedence in the interpretation of the explicit matter in question. Unless otherwise set forth herein, all capitalized terms set forth herein shall have the same meaning as set forth in the Agreement.

Whereas, Customer and Company have previously entered into the Agreement and whereby Company agreed to provide Customer the Services more particularly described therein;

Whereas, the Parties desire to amend the Agreement by this writing to reflect the amended or additional terms to which the Parties have agreed to;

Now, therefore, in consideration of the mutual covenants, promises, and consideration set forth in this Amendment, the Parties agree as follows:

1 At the request of the Customer, Comcast shall add 10 Mbps ENS lite Service at the Customer site(s), as set forth in Schedules A and B attached hereto

2. The Non-Recurring Charges for the Services specified herein shall be $500.00 and shall be due upon installation of the Services

3 The additional MRC for the Services specified herein throughout the remainder of the Agreement term shall be $400 00 (additional charges are in addition to any and all current MRC paid to Company by Customer).

4 This Ninth Amendment shall commence as of the Effective Date set forth herein and is coterminous with the original Agreement.

IN WITNESS WHEREOF, the Parties hereto have executed this Ninth Amendment as of the day and year written below and the persons signing covenant and warrant that they are duly authorized to sign for and on behalf of the respective Parties. Except as otherwise modified by this Amendment, all other terms and conditions of the original Services Agreement, inclusive of any all preceding Amendments shall remain in full force and effect

County of Galveston		**Comcast Business Communications, LLC**	
Signature:	Kenneth Clark	Signature:	
Printed Name	Kenneth Clark	Printed Name:	Terrence J. Connell
Title:	Acting County Judge	Title:	Senior Vice President
Date:	January 10, 2012	Date:	January 4, 2012

SCHEDULE A

BUILDINGS, SERVICES AND PRICING

Date 1/4/2012

Short Description of Service New 10Mb ENS Lite circuit to be installed at the Mid-County Annex building located at 9300 Emmett F Lowry Expy, Texas City TX 77591

14 MONTHS

DATA NETWORK SERVICES - PAGE 1

Line	Service Element	Description	Location A*	Location Z*	Tax Jurisdiction	Qty	Unit Pricing MRC	Unit Pricing NRC	Extended Pricing MRC	Extended Pricing NRC
001	ENS Lite Ethernet Network Interface 10/100	1 Port	Mid-County Annex - 930	lamarque tx.houston hs	Interstate	1	$88.83	$500.00	$88.83	$500.00
002	ENS - Basic Network Bandwidth	10 Mbps	Mid-County Annex - 930	lamarque tx.houston hs	Interstate	1	$311.17	$0.00	$311.17	$0.00
003	-					1	$0.00	$0.00	$0.00	$0.00
004	-					1	$0.00	$0.00	$0.00	$0.00
005	-					1	$0.00	$0.00	$0.00	$0.00
006	-					1	$0.00	$0.00	$0.00	$0.00
007	-					1	$0.00	$0.00	$0.00	$0.00
008	-					1	$0.00	$0.00	$0.00	$0.00
009	-					1	$0.00	$0.00	$0.00	$0.00
010	-					1	$0.00	$0.00	$0.00	$0.00
011	-					1	$0.00	$0.00	$0.00	$0.00
012	-					1	$0.00	$0.00	$0.00	$0.00
013	-					1	$0.00	$0.00	$0.00	$0.00
014	-					1	$0.00	$0.00	$0.00	$0.00
015	-					1	$0.00	$0.00	$0.00	$0.00
016	-					1	$0.00	$0.00	$0.00	$0.00
017	-					1	$0.00	$0.00	$0.00	$0.00
018	-					1	$0.00	$0.00	$0.00	$0.00
019	-					1	$0.00	$0.00	$0.00	$0.00
020	-					1	$0.00	$0.00	$0.00	$0.00
021	-					1	$0.00	$0.00	$0.00	$0.00
022	-					1	$0.00	$0.00	$0.00	$0.00
023	-					1	$0.00	$0.00	$0.00	$0.00
024	-					1	$0.00	$0.00	$0.00	$0.00
025	-					1	$0.00	$0.00	$0.00	$0.00
026	-					1	$0.00	$0.00	$0.00	$0.00
027	-					1	$0.00	$0.00	$0.00	$0.00
028	-					1	$0.00	$0.00	$0.00	$0.00
029	-					1	$0.00	$0.00	$0.00	$0.00
030	-					1	$0.00	$0.00	$0.00	$0.00
031	-					1	$0.00	$0.00	$0.00	$0.00
032	-					1	$0.00	$0.00	$0.00	$0.00
033	-					1	$0.00	$0.00	$0.00	$0.00
034	-					1	$0.00	$0.00	$0.00	$0.00
035	-					1	$0.00	$0.00	$0.00	$0.00

* Building Location Detail Attached

	MRC	NRC
PAGE 1 DATA NETWORK SERVICES SUBTOTAL	$400.00	$500.00
PAGE 2 DATA NETWORK SERVICES SUBTOTAL	$0.00	$0.00
PAGE 3 DATA NETWORK SERVICES SUBTOTAL	$0.00	$0.00
TOTAL CUSTOM INSTALLATION CHARGES	$0.00	$0.00

COMCAST ACCOUNT REPRESENTATIVE: Bill Tucker

COMCAST SALES ENGINEER: Don Kleihege

CUSTOMER NAME: County of Galveston

NAME:

TITLE:

DATE:

TOTAL MONTHLY SERVICE CHARGES	$400.00
MONTHLY CUSTOM INSTALLATION CHARGES	$0.00
TOTAL MONTHLY CHARGES	**$400.00**
TOTAL NONRECURRING SERVICE CHARGES	$500.00
NONRECURRING CUSTOM INSTALLATION CHARGES	$0.00
TOTAL NONRECURRING CHARGES	**$500.00**

Note: The prices included on this sales order do not include any local, state or federal fees charges, or taxes that may apply. Please refer to the Comcast Master Service Agreement for specific detail regarding such charges.

Comcast

SCHEDULE B - BUILDING LOCATION DETAIL

BILLING LOCATION INFORMATION

Billing Name	County of Galveston			Contact Name	Bob Lyons
County	Galveston			Email	bob lyons@co galveston tx us
Street / Address	P O Box 1418			Phone	(409) 766-2444 Ext
City State, Zip	Galveston	TX	77553-	Fax	
Tax Exempt	Yes			Cell / Pager	(832) 248-6629
Billing Interval	Monthly				

SERVICE LOCATIONS

Site Name.	Mid-County Annex			LocalContact	Bob Lyons
County	Galveston			Email	bob lyons@co galveston tx us
Address 1	9300 Emmett F Lowry Expy			Phone	(409) 722-2444 Ext
Address 2				Fax	
Floor	1st			Cell / Pager	(832) 248-6629
Room	Server			Latitude	
City State, Zip	Texas City	TX	77591-	Longitude	
Site Name.				Local Contact	
County				Email	
Address 1				Phone	
Address 2				Fax	
Floor				Cell / Pager	
Room				Latitude	
City State, Zip				Longitude	

AGENDA ITEM #12

NO

BACK – UP

PROVIDED

AGENDA ITEM #13

COUNTY of GALVESTON
HUMAN RESOURCES
Jan Piveral, SPHR
Human Resources Director

January 3, 2012

To. Patricia Grady

From Jan Piveral, SPHR

Re: Commissioners' Court Agenda Item-Exemption to the 4 Pay Period Mandatory Vacancy Policy

Please submit the following item for the January 10, 2012 Commissioners' Court Agenda

Consideration of approving exemption to the 4 pay period mandatory vacancy policy for Customer Service Representative-Tax Office submitted by Human Resources Director

Off 409-770-5418 • Fax 409-770-5351
722 MOODY STREET • 3rd FLOOR • GALVESTON, TEXAS 77550

REQUEST FOR EXEMPTION TO 4 PAY PERIOD MANDATORY VACANCY POLICY

Date 1-3-12 DEPARTMENT REQUESTING EXEMPTION TAX office

DATE JOB WAS VACANT 1-16-12 4PP END DATE 3-15-12 DATE NEED FILLED asap

JOB TITLE FOR EXEMPTION REQUEST Customer Service Rep POSITION # 47

BUDGETED POSITION Y

SALARY GRADE-STEP 9A SALARY $ 25,925 GRANT FUNDED N CREATED POSITION N

JOB DESCRIPTION ATTACHED Y

BRIEF SUMMARY OF JOB Cashier for motor vehicle & property tax.

JUSTIFICATION FOR EXEMPTION in tax season.

CAN OVERTIME FILL THIS SPOT WITHOUT HIRING ADDITIONAL EMPLOYEE? N IF Y, HOW MUCH WOULD THE OVERTIME COST? $_____

DO YOU ATTEST THAT YOU CANNOT DISTRIBUTE THESE RESPONSIBILITIES WITH CURRENT EMPLOYEES, MAKING THE ADDITIONAL HIRE NECESSARY? Y

JUSTIFICATION DOCUMENTATION ATTACHED? Y

RECOMMENDATION TO GRANT EXEMPTION REQUEST FROM HR DIRECTOR

RECOMMENDED ✓ NOT RECOMMENDED _____

REASON NOT RECOMMENDED _____

SUBMITTED FOR AGENDA ✓ DATE ON AGENDA 1-10-12

APPROVED ____

DOCUMENT ATTACHED AGENDA AND BUDGET AMENDMENT

PARTIES CONTACTED TO APPEAR TO DISCUSS JUSTIFICATION FOR EXEMPTION IN CC? Y

WHO WILL APPEAR Cheryl Johnson

POSITION TITLE: Customer Service Representative

DEPARTMENT: Branch Office

IMMEDIATE SUPERVISOR: Branch Manager

FLSA STATUS: Non-Exempt **GRADE: 9**

JOB SCOPE & SUMMARY

Responsible for providing efficient and professional services to the taxpayers of Galveston County at any Branch location assignment Cashier for Motor Vehicle and Property Tax and performs other clerical work as assigned

ESSENTIAL FUNCTIONS OF THE JOB

1 Issue motor vehicle license plates and renewal stickers
2 Issue timed permits (30/72/144 hour)
3 Issue handicap placards
4 Process title applications and transfers
5 Collect current and delinquent ad valorem taxes
6 Process applications for state and county beer, wine and liquor permits
7 Process dealer title applications (DTA) over the counter or from the "DTA" diskette submitted to the office weekly as needed
8 Receive/disburse voter registration applications
9 Interview taxpayers by mail, telephone, or in person to determine proper data to process motor vehicle titles/registration/renewals and tax payments
10 **Required** to provide own transportation for assignment to any Tax Office Branch as deemed necessary by Motor Vehicle Coordinator or Chief Deputy of Operations
11 Other duties as assigned (may include preparing RTS spreadsheet for submission to Galveston Office, insuring title packages are complete with all necessary documents attached filing etc)

REQUIRED LICENSES AND CERTIFICATION

Required to keep abreast of current law changes

MINIMUM EDUCATION AND EXPERIENCE REQUIREMENTS

- Must have high school diploma or equivalent
- Must have Texas driver's license
- Must have considerable knowledge of Microsoft word excel
- Must acquire a comprehensive knowledge about ad valorem taxation and the Net Data Tax System and the Texas state registration and titling system (RTS)
- Must have a working knowledge of internet to download the various motor vehicle forms needed

SKILLS, KNOWLEDGE AND ABILITIES

A good knowledge of English spelling, grammar punctuation and office procedures Skill in performing mathematical calculations, operating a personal computer calculator, typewriter and other office equipment Ability to accept constructive criticism Ability to accurately enter data and file information communicate effectively verbally and in writing Ability to work independently, organize compile and record information accurately Ability to handle confidential information with

discretion, ability to handle large sums of money, excellent attendance, ability to establish and maintain effective working relationships with co-workers county employees and the general public

ACCEPTABLE TRAINING AND EXPERIENCE

Any equivalent combination of experience and training which provides the required knowledge, skills and abilities

PHYSICAL DEMANDS AND WORKING CONDITIONS

Physical requirements include carrying and lifting 10 lbs occasionally, visual acuity, speech and hearing, hand and eye coordination and manual dexterity necessary to operate a computer keyboard typewriter calculator microfilm reader and basic office equipment subject to carrying, lifting, twisting and reaching to perform essential functions Working conditions are inside an office environment

NON-PHYSICAL DEMANDS

Frequency codes F = frequently O = occasionally R = rarely

Time Pressure	F
Noisy/Distracting Environment	F
Performing Multiple Tasks Simultaneously	F
Danger/Physical Abuse	O
Emergency Situations	O
Tedious Exacting Work	F
Irregular Schedule/Overtime	O
Frequent Change Of Tasks	F
Working Closely With Others As Part Of A Team	F

SIGNATURE / APPROVAL

_____ _____

Employee Date

_____ _____

Branch Manager Date

_____ _____

Chief Deputy Operations Date

AGENDA ITEM #14

#14

Dennis J. Harris, Sr.
Director

Galveston County Department of Parks & Senior Services

www.galvestonparks-seniors.org

To: Hon Mark Henry, County Judge

Members of Commissioner's Court

From: Dennis J Harris, Director
Department of Parks & Senior Services

Subject: Texans Feeding Texans Grant Agreement
Application No. HDM-12-808

Please place the following item on Commissioner's Court agenda for Tuesday, January 10, 2012

"Consideration of approval of Grant Agreement between Galveston County, Department of Parks & Senior Services and Texas Department of Agriculture for Home Delivered Meal Grant Program submitted by Parks & Senior Services Director"

Attached you will find the Texans Feeding Texans grant agreement for your review The terms of this agreement is February 1, 2012 through January 31, 2013

Should you have any questions, please let me know

DENNIS J HARRIS

Attachments

cc Connie Nicholson, Grant Coordinator
Trisha Dodson, Data Entry Technician

TEXAS DEPARTMENT OF AGRICULTURE

TODD STAPLES
COMMISSIONER

December 21, 2011

Dennis Harris
Executive Director
Galveston County Department of Parks & Senior Services
4102 Main Street (FM 519)
LaMarque, TX 77568

Re: Texans Feeding Texans: Home-Delivered Meal Grant Program Agreement
Application No. **HDM-12-808**

Dear Dennis:

The Texas Department of Agriculture (TDA) is pleased to inform you that your 2011 application to the Texans Feeding Texans: Home-Delivered Meal Grant Program has been conditionally approved and that we are able to offer Galveston County Department of Parks & Senior Services, serving meals in Galveston County, a grant of $111,622.27. Acceptance of this grant will be conditional on your completion and return of the enclosed Grant Agreement ("Agreement").

Carefully review the Agreement to determine whether your agency can meet the conditions. The Agreement includes a budget form that must be completed and returned as well. The budget should indicate how the organization intends to expend the 2012 grant funds. While we urge you to represent your budget as accurately as possible, there are mechanisms described in the agreement, Section IX, 9 5, to revise the budget during the grant year, if necessary.

Grant funds must be used to directly supplement or extend existing meal services to homebound persons that are elderly and/or have a disability. Grant funds may not be used for the purchase of capital assets. This would include any equipment valued at $5,000 or more. In order for TDA to monitor the expenditure of grant funds, you will be required to provide Quarterly Grant Spending Reports. It is important to know that the Quarterly Reports will require you to detail how TDA grant funds are spent. Some organizations have chosen to keep separate accounts or fund records to simplify this reporting.

Please sign and return the Agreement and attachments to our office by January 13, 2012. A copy of the fully executed Agreement will then be returned to you for your records. If TDA does not receive your signed Agreement by January 13, 2012, your grant will be forfeited.

P.O. Box 12847 Austin, Texas 78711 (512) 463-7476 Fax (888) 223-8861
www.TexasAgriculture.gov

The Agreement should be returned to one of the following addresses:

Physical Address:
Texas Department of Agriculture
Home-Delivered Meal Grant Program
1700 N. Congress Avenue
Austin, Texas 78701

Mailing Address:
Texas Department of Agriculture
Home-Delivered Meal Grant Program
P O. Box 12847
Austin, Texas 78711

We look forward to working with you throughout the next year and assisting you in the generous and important work you do for your community. If you have any questions about the Texans Feeding Texans: Home-Delivered Meal Grant Program, or if TDA can be of assistance to you, please contact Ms. Lindsay Dickens, Grants Specialist, at (512) 463-6695 or at Lindsay.Dickens@TexasAgriculture.gov.

Sincerely,

Karen L. Reichek
Grants Coordinator

KR/LD/ld

Enclosure

TEXAS DEPARTMENT OF AGRICULTURE

TODD STAPLES
COMMISSIONER

February 2 2012

Dear Grantee

As a recipient of funds from the Texas Department of Agriculture's (TDA) 2011 Texans Feeding Texans Home-Delivered Meal Grant Program (HDM), you are required to provide TDA with quarterly expenditure reports during the grant year **The fourth quarter report is due Thursday, March 1, 2012. Reports must be signed and may be submitted to me via regular mail, email or fax at (888) 223-9048.** The required report form is enclosed Organizations that serve meals in multiple counties must submit separate reports for each county

For this quarterly report, you should list expenditures associated with your TDA grant that have been incurred from November 1, 2011 – January 31, 2012 **Do not report all expenditures; only show expenditures of TDA funds.** It is the organization's responsibility to retain itemized records showing your expenditures Expenditures reported as a per-meal rate are not acceptable

If you have any questions regarding the quarterly report please contact me directly via phone or email at 512-463-6695 or Grants@TexasAgriculture.gov

Sincerely,

Lindsay A. Dickens

Lindsay A Dickens
Grants Specialist

Enclosure

P.O. Box 12847 Austin, Texas 78711 (512) 463-7476 Fax (888) 223-8861
www.TexasAgriculture.gov

GRANT AGREEMENT
Texas Department of Agriculture
Home-Delivered Meal Grant Program

I. RECITALS

1.1 **WHEREAS**, Grantor has established the Home-Delivered Meal Grant Program ("Program") to distribute grant funds to eligible organizations that provide home-delivered meals to Homebound persons who are Elderly and/or have a Disability, and

1.2 **WHEREAS**, Grantee has applied for a grant from the Program and has met all requirements for receiving the Grant

1 3 **NOW, THEREFORE,** in consideration of the mutual promises and consideration contained herein, the receipt and sufficiency of which are hereby acknowledged, the parties agree as follows

II. DEFINITIONS

2.1 "**Agreement**" means this Grant Agreement and all attachments hereto.

2.2 "**Department**" means the Texas Department of Agriculture

2.3 "**Disability**" means a physical, mental or developmental impairment, temporarily or permanently limiting an individual's capacity to adequately perform one or more essential activities of daily living, which include, but are not limited to, personal and health care, moving around, communicating, and housekeeping

2.4 "**Elderly**" means an individual who is 60 years of age or older

2.5 "**Grant**" means the funds awarded to Grantee by Grantor, subject to the requirements of this Agreement, Texas Administrative Code Title 4, Part 1, Sections 1 950 et seq and other Program requirements, in the amount of **$111,622.27** to be used in **Galveston** County

2.6 "**Grantee**" means **Galveston County Department of Parks & Senior Services, 4102 Main Street (FM 519), LaMarque, TX 77568.**

2.7 "**Grantor**" means the Texas Department of Agriculture, P O Box 12847, Austin, Texas 78711

2 8 "**Grant Coordinator**" means Grantor's representative responsible for coordinating the Program

2 9 "**Homebound**" means a person who is unable to leave his or her residence without aid or assistance or whose ability to travel from his or her residence is substantially impaired

2 10 "**Program**" means Grantor's Home-Delivered Meal Grant Program

2.11 "**Term of Agreement**" is February 1, 2012 through January 31, 2013

III. GRANTOR AND GRANTEE OBLIGATIONS

3.1 **Award by Grantor.** Subject to the provisions of this Agreement and Texas Administrative Code Title 4, Part 1, Sections 1 950 et seq , Grantor hereby awards to Grantee the Grant, which Grantee shall use only to supplement and extend existing services related directly to the delivery of meals to Homebound persons that are Elderly and/or have a Disability

The Department shall make a grant award not later than February 1 of each calendar year to each Grantee Fifty percent (50%) of such grant awarded shall be allocated and distributed to each Grantee on or before February 1 of each calendar year The remaining fifty percent (50%) of such grant award shall be allocated and distributed to each Grantee on or before August 1 of

APPLICANT NO HDM-12-808

each calendar year Notwithstanding any other provision of this subchapter, the Department may deny, revoke, suspend, or withhold a grant award for misuse of grant funds, or failure to comply with any requirement or section of subchapter O, including, without limitation, Texas Administrative Code Title 4, Part 1, Sections 1 950 et seq

3.2 **Performance by Grantee.** Grantee shall use Grant in accordance with the terms of this Agreement and Texas Administrative Code Title 4, Part 1, Sections 1 950 et seq.

3.3 **Grantee's Menu and Substitution Procedure.** Grantee shall have all menus and meal substitution procedures approved by a registered dietician or a person with a baccalaureate degree that majored in food and nutrition, dietetics, or food service management, who is currently employed by a home-delivered meal organization on an annual basis. Grantee shall maintain documentation of such approval

3.4 **Grantee Meal Delivery and Temperature Standards and Procedures.** Grantee shall maintain policies to ensure compliance with meal temperature standards and the Program's four-hour delivery requirement at each meal preparation location Grantee shall also maintain records demonstrating compliance with Grantee's policies If Grantee does not comply with meal temperature standards and the four-hour delivery requirement due to exceptional circumstances the Grantee should seek written waiver from Grantor as soon as practicable following the occurrence of the exceptional event or circumstances If Grantee fails to comply with the Program's four-hour delivery requirement, Grantee will be required to implement corrective action, as determined by TDA, prior to applying for future funds

3.5 **Food Establishment Permits.** Simultaneously with execution of this Agreement, Grantee must provide Grantor with a copy of its food establishment permit by August 31 of the grant year, as issued by the applicable governmental permitting authority, whether that authority is a municipality, county, public health district, or the Texas Department of State Health Services ("DSHS")

3.6 **Exempt Grantee.** If a grantee claims exemption from the requirement to obtain a food establishment permit, the grantee must provide all necessary documentation to establish entitlement to such exemption, in a form satisfactory to Grantor Pursuant to 25 TAC §229 372(c) (relating to DSHS permit requirements), only a nonprofit organization is exempt from payment of a permit fee A "nonprofit organization" is as a civic or fraternal organization, charity, lodge, association, proprietorship or corporation possessing a 501(c) exemption under the Internal Revenue Code; or a religious organization meeting the definition of "church" as defined by the Internal Revenue Service

3.7 **Inspection of Exempt Grantees.** If Grantor, in its sole discretion, determines that Grantee is exempt from the requirement to obtain a food establishment permit, Grantee must provide a current inspection report from a kitchen sanitation expert who is approved by the department, that reflects Grantee is in full compliance with the Texas Food Establishment Rules ("TFER") promulgated by DSHS Such inspection report must have been issued and signed by the kitchen sanitation expert within the 12 month period preceding the date of the award of the Program Grant

3 8 **Failure to Obtain a Food Establishment Permit or Comply with TFER.** If it is determined that Grantee failed to obtain a required food establishment permit, or that Grantee failed to comply with TFER, Grantor, at its sole discretion, may exercise the remedies set forth in sections 6 1 and 7 1 of this Agreement, including, without limitation, termination of the Agreement and taking legal action to obtain full reimbursement of the Grant

IV. GRANTEE'S REPORTING REQUIREMENTS

4.1 **Budget.** Grantee shall provide a detailed budget for the year, attached hereto as "Attachment A", not to exceed **$111,622.27** for the Term of the Agreement, signed by the Grantee, using the budget categories by which Grantee shall be submitting Quarterly Report information

4.2 **Quarterly Report.** Grantee shall provide to Grantor a quarterly report in a format prescribed by Grantor. The report must track the expenditure of Grant funds in sufficient detail to assure compliance with Program rules Report due dates are as follows:

- **June 1, 2012** for the period February 1, 2012 – April 30, 2012
- **September 1, 2012** for the period May 1, 2012 – July 31, 2012
- **December 1, 2012** for the period August 1, 2012 – October 31, 2012
- **March 1, 2013** for the period November 1, 2012 – January 31, 2013

4.3 **Failure to Comply with Reporting Requirements.** Failure of Grantee to comply with any of the reporting requirements in this Agreement may result in the withholding or revocation of a Grant, the refund of Grant funds disbursed, and/or Grantee's ineligibility for future Program funds

4.4 **Notice of Failure to Receive County Grant.** Grantee shall promptly notify the Department of any failure to receive or reduction in the amount of the county grant funds required by Texas Administrative Code Title 4, Part 1, Section 1 953 as reported by Grantee in its application for funds under this Program. Failure of Grantee to receive, or reduction in the amount of county grant funds may result in the withholding or revocation of a Grant or require Grantee to refund Grant funds disbursed

4.5 **Eligible Meals.** The Grant is based on the number of Eligible Meals served by **Galveston County Department of Parks & Senior Services.** Eligible Meals are calculated by subtracting the meals funded by the Texas Department of Aging and Disabilities and/or Area Agency on Aging, **77,491**, from the total number of meals as delivered by **Galveston County Department of Parks & Senior Services** in **Galveston** County between September 1, 2010 and August 31, 2011, **134,274**. The Grant was calculated on the remaining number, or **56,783** meals For purposes of this Grant, any meals that are not Eligible Meals are classified as Ineligible Meals If an audit or review of the Grant reveals that Grantee has received Grant funds based on Ineligible Meals, Grantee will be required to reimburse Grantor the amount of the excess Grant funds received, on terms and conditions as may be set by Grantor

V. RECORDKEEPING, ACCESS, INSPECTIONS, AUDITS AND INVESTIGATIONS

5.1 **Access by Grantor and State Auditor's Office.** During the Term of Agreement and for at least three years after termination of the Agreement, Grantee shall allow Grantor and/or the State Auditor's Office access to and the right to examine the premises, books, accounts, records, files and other papers or property belonging to or in use by Grantee and pertaining to this Agreement or the use of funds pursuant to this Agreement, in order to ascertain complete compliance with the provisions of this Agreement and with Program guidelines Such records shall be maintained by Grantee at a location that is readily accessible to Grantor and/or the State Auditor's Office Grantor further has the right to make a visual inspection of any assets purchased with Grant funds

5.2 **Audits or Investigations by State Auditor's Office.** Grantee understands that acceptance of Grant funds under this Agreement acts as acceptance of the authority of the Department, the State Auditor's Office, or any successor agency, to conduct an audit or investigation in connection with such funds Grantee further agrees to cooperate fully with the Department and the State Auditor's Office, or their successors, in the conduct of any audit or investigation, including providing all records requested Grantee will ensure that this clause concerning the authority to audit the funds received by Grantee is included in any subcontract it awards

5.3 **Disallowance of Grant Funds.** Grantee understands and agrees that Grantee shall be liable to the Department for any costs disallowed as a result of any audit, investigation or review

VI. USE OF GRANT FUNDS

6.1 **Allowable Expenditures.** Allowable expenditures include, but are not limited to, food costs and related preparation and packaging expenses, gasoline, costs for obtaining any required food establishment permit from the applicable governmental entity or permitting authority, costs for obtaining an inspection report from a kitchen food sanitation expert, if applicable, and other

operational costs, but shall not be used for the purchase of capital assets Grant funds shall not be used for expenditures that are not made in compliance with any applicable State purchasing laws and regulations Grantee shall not, under any circumstances, use grant funds for alcoholic beverages, entertainment or charitable or political contributions. If requested by Grantor, Grantee must be able to produce proof of payment (stamped paid invoices or receipts) of all allowable expenditures

6.2 **Misuse of Grant Funds.** Grantor may require a full or partial refund of the Grant if (a) Grant funds are misused, (b) Grants funds are used for Ineligible Meals, (c) Grant funds are used in an illegal manner, (d) Grant funds are used for non-allowable expenses, (e) Grantee violates the terms and conditions of this Agreement, or (f) Grantee made any misrepresentations to Grantor in obtaining this Grant. This provision is not exclusive of other grounds for withholding or recouping of funds or any other remedy, civil or criminal, which may be available to Grantor

6.3 **No Duplication of Services.** Grant funds shall not be used to duplicate services provided to Grantee's clients. Grantee shall have a system in place to prevent the duplication of services to Grantee's clients

6.4 **Availability of State Funds.** This Agreement is subject to the availability of state funds If such funds become unavailable during the Term of Agreement and Grantor is unable to obtain sufficient funds, this Agreement shall be reduced or terminated.

VII TERM AND TERMINATION OF THE AGREEMENT

7.1 **Term and Termination.** Either party may terminate this Agreement before the end of the Term of Agreement, without cause, by delivering a written notice of termination to the other party Early termination of this Agreement shall not relieve Grantee from the reporting requirements contained in sections IV, V, and VI of this Agreement

7.2 **No Reimbursement Upon Termination.** In the event of termination of this Agreement, Grantor shall make no further disbursement of Grant funds to Grantee beyond those already approved at the time of termination, and Grantee specifically waives all rights to any such funds

VIII. USE AND DISPOSITION OF PROPERTY

8.1 **Use of Property.** During the Term of Agreement, any property acquired with Grant funds shall be used in accordance with this Agreement, to accomplish the purposes of the Program

8.2 **Records of Property.** Grantee shall maintain appropriate records of goods or property purchased with Grant funds and shall develop a control system to ensure adequate safeguards to prevent loss, damage, or theft of such goods or property

IX. AGREEMENT MODIFICATIONS

9.1 **Amending Agreement.** Except as provided in paragraph 9 6 below, this Agreement embodies the entire agreement between the parties, and there are no covenants, agreements, representations, warranties or restrictions between the parties other than those specifically set forth herein Except as provided in paragraph 9 2 below, no modification or amendment to this Agreement is valid unless in writing and signed by the parties

9.2 **Notification of Change in Grantee's Address.** Grantee must notify Grantor in writing within 30 days if Grantee's address changes during the Term of Agreement Failure to submit required notice may be grounds for termination of this Agreement

9.3 **Grantor Request for Amendment.** Grantor may amend this Agreement by submitting the requested change to Grantee's Agent in writing Continued performance hereunder shall be deemed acceptance of such Amendment by Grantee

9.4 **Grantee Request for Amendment.** Grantee may request an amendment to the Agreement by submitting the requested change, in writing, to the Grant Coordinator All requests for an amendment to the Agreement must include a summary of Grantee's home-delivered meal services and a statement explaining the need for the change.

9.5 **Budgetary Revisions.** The Grantee may make a one time budget revision (not affecting the overall budget amount) without prior approval, during the program year, so long as the revision does not require an increase or decrease in any budget line item over 10% of the item's approved budget All other budget revisions will require prior approval The grantee shall request prior approval for a budget change by submitting a statement explaining the need for the change, specifying the amount, and identifying the expenditure categories affected by the change

9.6 **Changes Become Part of Agreement.** Changes approved in accordance with this section IX become a part of this Agreement, superseding all inconsistent provisions

X. GENERAL TERMS AND CONDITIONS

10.1 **Delegation to Third-Party.** Grantee is not relieved of its duties and obligations imposed by this Agreement through delegation by Grantee to a third-party

10.2 **Agreement Binding.** This Agreement shall be binding on and inure to the benefit of the parties and their officers, administrators, legal representatives, and successors except as otherwise expressly provided herein Neither party may assign or transfer this Agreement without the written consent of the other party The parties intend to be legally bound and have executed this Agreement as evidenced by their signatures on the date indicated below This Agreement is not effective unless and until it has been signed by both parties

10.3 **No Creation of Debt.** This Agreement shall not be construed as creating any debt on behalf of the State of Texas, and/or Grantor in violation of Section 49 Article III of the Texas Constitution In compliance with Section 6 Article VIII of the Texas Constitution, all obligations of the State of Texas or Grantor hereunder are subject to the availability of appropriations and authorization to pay by the Texas Legislature

10.4 **Delivery Methods.** Unless specifically provided herein, any notice, tender, or delivery to be given hereunder by any party to another party must be affected by personal delivery in writing or by mailing the same by registered or certified mail, return receipt requested All notices shall be addressed to the parties at the address stated in the Agreement unless a change of address has been given in the manner provided for in this paragraph.

10.5 **Authorized Representative.** Each person signing expressly represents that he or she is duly authorized to do so and to bind the party on whose behalf they are signing All legal documents prepared for Grantee's signature must be executed by an individual with the authority to legally bind Grantee

10.6 **Indemnification** Grantee shall indemnify and hold harmless Grantor, its agents and employees, from any and all claims, demands, and causes of action arising from or related to Grantee's performance under this Agreement, including reasonable attorneys' fees incurred in defending or settling any such claims

10.7 **No Employer Relationship.** Grantee and Grantee's employees and agents have no employer-employee relationship with Grantor

10.8 **Representations and Warranties of Grantor and Grantee.** Grantor and Grantee each represent and warrant that it has full right and authority to enter into this Agreement and to grant the other party the rights set forth in this Agreement and that all necessary approvals have been obtained Each party represents and warrants that it is in good standing in all jurisdictions in which it is required to be so qualified for performance of this Agreement, and all necessary certifications, registrations, approvals and licenses have been obtained, and all necessary fees paid

10.9 **Applicable Law.** This Agreement shall be governed by and construed in accordance with the laws and court decisions of the State of Texas. If any legal action is necessary to enforce this Agreement, or for any dispute arising out of the operations or actions contemplated herein, exclusive venue shall lie in the District Courts of Travis County, Texas

10.10 **Headings.** Captions and headings of the sections or paragraphs of this Agreement are for convenience and reference only and shall not affect, modify or amplify the provisions of this Agreement, nor shall they be employed to interpret or aid in the construction of this Agreement

10.11 **Severability.** If any part of this Agreement is declared by a court of competent jurisdiction to be invalid or unenforceable, such portion shall be deemed severed from this Agreement and the remaining part shall remain in full force and effect, and the parties shall promptly negotiate to replace invalid or unenforceable portions that are essential parts of this Agreement

10.12 **Waiver.** A waiver by Grantor of any provision hereunder shall not operate as a waiver of any other provision, or continuing waiver of the same provision in the future

10.13 **Construction of Agreement.** Both parties hereby agree that they participated in the creation of this Agreement, and the terms hereof are a product of the negotiation between the parties In the event there is a dispute regarding the meaning of any provision of this Agreement, no provision shall be construed in favor of or against any party's position on the grounds that said Party was the drafter of this Agreement

10.14 **Exhibits.** The following instruments are incorporated into this Agreement as attachments

Attachment A – Grant Budget
Attachment B – W-9 Form

10.15 **Uniform Grant Management Standards (UGMS).** In accordance with Texas Government Code §783 007, this Agreement shall comply in all respects with the Uniform Grant Management Standards (UGMS) In the case of any conflicts between UGMS and this Agreement, the UGMS shall control

XI. TEXAS PUBLIC INFORMATION ACT NOTICE

11.1 ALL INFORMATION PROVIDED BY GRANTEE PURSUANT TO THIS AGREEMENT IS SUBJECT TO THE TEXAS PUBLIC INFORMATION ACT, TEX. GOV'T CODE. CHAPTER 552, AND MAY BE SUBJECT TO DISCLOSURE TO THE PUBLIC.

By their signatures below, the parties do hereby agree to the terms of this Agreement

Texas Department of Agriculture
Senior Services
P.O. Box 12847
Austin, Texas 78711

By _____
Drew DeBerry
Deputy Commissioner

Date 1-31-12

Galveston County Department of Parks &

4102 Main Street (FM 519)
LaMarque, TX 77568

By _____
~~Mark Henry~~ Kenneth Clark
Acting **County Judge**

Date January 10, 2012

ATTACHMENT A

HOME DELIVERED MEAL GRANT BUDGET

Name of grantee: Galveston County Department of Parks & Senior Services
TDA Application No.: HDM-12-808

County in which meals are provided: Galveston

Total grant amount: $111,622.27

COMPLETE THE TABLE BELOW. Please estimate, to the best of your ability, how TDA Grant funds will be expended for your organization during the grant period.

Expenditure Category	Estimated Amount
Personnel	34,210.00
Food/Meals	77,412.27
Equipment	
Building Occupancy	
Transportation	
Office Supplies and Services	
Other: Please specify exactly	
a	
b.	
c	
d	
Total Grant Amount	**$111,622.27**

During the Grant Year, Grantee must demonstrate that TDA grant funds were used to directly supplement or extend existing meal services to homebound persons that are elderly and/or have a disability

By signing, I certify that the information entered on this form is true and correct to the best of my knowledge

Signature Dennis Hesser Date 1/10/12

Form **W-9**
(Rev December 2011)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
Galveston County Department of Parks & Senior Services

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification
☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶

☐ Exempt payee

☑ Other (see instructions) ▶ Government Entity

Address (number, street, and apt. or suite no.)
4102 Main Street (FM 519)

Requester's name and address (optional)
Texas Dept. of Agriculture
PO Box 12847
Austin, Texas 78711

City, state, and ZIP code
La Marque, Texas 77568

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
[ ][ ][ ] - [ ][ ] - [ ][ ][ ][ ]

Employer identification number
7 4 - 6 0 0 0 9 0 8

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here Signature of U.S. person ▶ Dennis Stevens Date ▶ 1/10/12

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases

- The U S. owner of a disregarded entity and not the entity,
- The U S. grantor or other owner of a grantor trust and not the trust, and
- The U S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U S. tax on certain types of income However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U S. resident alien for tax purposes.

If you are a U S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1 The treaty country Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien

2. The treaty article addressing the income

3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4 The type and amount of income that qualifies for the exemption from tax.

5 Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return

Payments you receive will be subject to backup withholding if:

1 You do not furnish your TIN to the requester,

2 You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3 The IRS tells the requester that you furnished an incorrect TIN,

4 The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5 You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only)

Certain payees and payments are exempt from backup withholding. See the Instructions below and the separate Instructions for the Requester of Form W-9

Also see *Special rules for partnerships* on page 1

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of $50 for each such failure unless your failure is due to reasonable cause and not to willful neglect

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a $500 penalty

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name/disregarded entity name" line

Partnership, C Corporation, or S Corporation. Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA) name" on the "Business name/disregarded entity name" line

Disregarded entity. Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity The name on the "Name" line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the "Name" line If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes Enter the disregarded entity's name on the "Business name/disregarded entity name" line If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8

Note. Check the appropriate box for the federal tax classification of the person whose name is entered on the "Name" line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

Limited Liability Company (LLC). If the person identified on the 'Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter "P" for partnership If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301 7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for federal tax purposes If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the ' Name" line

Other entities. Enter your business name as shown on required federal tax documents on the "Name" line This name should match the name shown on the charter or other legal document creating the entity You may enter any business, trade, or DBA name on the "Business name/ disregarded entity name" line.

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/ disregarded entity name," sign and date the form

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding.

1 An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),

2 The United States or any of its agencies or instrumentalities,

3 A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,

4 A foreign government or any of its political subdivisions, agencies, or instrumentalities, or

5 An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6 A corporation,

7 A foreign central bank of issue,

8 A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,

9 A futures commission merchant registered with the Commodity Futures Trading Commission,

10 A real estate investment trust,

11 An entity registered at all times during the tax year under the Investment Company Act of 1940,

12. A common trust fund operated by a bank under section 584(a),

13 A financial institution,

14 A middleman known in the investment community as a nominee or custodian, or

15 A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding The chart applies to the exempt payees listed above, 1 through 15

IF the payment is for . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over $600 required to be reported and direct sales over $5,000 [1]	Generally, exempt payees 1 through 7 [2]

[1] See Form 1099-MISC, Miscellaneous Income, and its instructions

[2] However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN) Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN However, the IRS prefers that you use your SSN

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one) Do not enter the disregarded entity's EIN If the LLC is classified as a corporation or partnership, enter the entity's EIN

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at *www ssa.gov* You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN You can apply for an EIN online by accessing the IRS website at *www irs.gov/businesses* and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon

Caution: *A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.*

Part II. Certification

To establish to the withholding agent that you are a U S. person, or resident alien, sign Form W-9 You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see *Exempt Payee* on page 3

Signature requirements. Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form

3. Real estate transactions. You must sign the certification You may cross out item 2 of the certification

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1 Individual	The individual
2 Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account [1]
3 Custodian account of a minor (Uniform Gift to Minors Act)	The minor [2]
4 a The usual revocable savings trust (grantor is also trustee)	The grantor-trustee [1]
b So-called trust account that is not a legal or valid trust under state law	The actual owner [1]
5 Sole proprietorship or disregarded entity owned by an individual	The owner [3]
6 Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1 671-4(b)(2)(i)(A))	The grantor*
For this type of account:	**Give name and EIN of:**
7 Disregarded entity not owned by an individual	The owner
8 A valid trust, estate, or pension trust	Legal entity [4]
9 Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10 Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11 Partnership or multi-member LLC	The partnership
12 A broker or registered nominee	The broker or nominee
13 Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14 Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1 671-4(b)(2)(i)(B))	The trust

[1] List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

[2] Circle the minor's name and furnish the minor's SSN.

[3] You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

[4] List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 1.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: *spam@uce.gov* or contact them at *www.ftc.gov/idtheft* or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

AGENDA ITEM #15

GALVESTON COUNTY ENGINEERING DEPARTMENT

Change Order No. _7__
Melody Lane Reconstruction

Owner: Galveston County
Contractor: **Conrad Construction Co., Ltd**
Engineer: **Klotz Associates, Inc.**

Contract Number **1071**
Purchase Order Number **C105682**
Bid Number **B111028**

Work Being Changed

1. Additional cost to add left turn lane/signal back to contract along with 30 days time extension. 2. Ref: rfi 12, time for delays, request 45 days for a total of 75 days.

CHANGE IN CONTRACT PRICE		CHANGE IN CONTRACT TIME	
Original Contract Price	**$3,056,531.00**	Original Contract Time	**300** Days
Net Change From		Net Change From	
Previous Change Orders	**$33,676.01 (1,2,3,4,5,6)**	Previous Change Orders.	**14** Days
Contract Price Prior To		Contract Time Prior To	
This Change Order	**$3,090,207.01**	This Change Order	**314** Days
Net Increase/Decrease Of		Net Increase/Decrease Of	
This Change Order	**$17,455.25**	This Change Order	**75** Days
Contract Price With All		Contract Time With All	
Approved Change Orders	**$3,107,622,.26**	Approved Change Orders	**389** Days

RECOMMENDED
By Katherine A Mears
Engineer (Consultant)
By _____ Date 12-20-2011
Engineer (County Engineer)

APPROVED.
County Of Galveston
By _____ Date January 10, 2012
~~Mark Henry, County Judge~~
Kenneth Clark, Acting County Judge
Attest _____
Dwight Sullivan, County Clerk
By: Brandy Chapman Deputy
Brandy Chapman

ACCEPTED
Contractor
By _____ Date 12.12.11
Contractor (Authorized Signature)

Robert Barrow, Vice President
Printed Name

Galveston County Engineering

Change Order No: 7 attach 1

Project: Melody Lane Reconstruction

					Original + Prevously Revised		New			
Pay item no	Spec item no.	Description	Unit	Unit Price	Quntity	Item Cost	Revised unit price	Quantity	Revised item cost	Overrun/Underrun
new		mobilization	ls				$5,825.00	1	$ 5,825 00	new item $ 5,825.00
14	618	condt (pvc)schd 80 (2'')	lf	$ 6 85	20	$ 137 00	$ 13 98	20	$ 279 60	overrun $ 142 60
15	618	condt (rm) (2'')	lf	$ 12 57	15	$ 188.55	$ 23 30	15	$ 349 50	overrun $ 160.95
16	682	back plate (12'') (3 sec)	ea	$ 46 90	1	$ 46 90	$ 69.90	1	$ 69.90	overrun $ 23 00
17	682	back plate (12'') (4 sec)	ea	$ 64.00	2	$ 128.00	$ 81 55	2	$ 163.10	overrun $ 35 10
18	682	ped sig sec (12'') led (2 indications	ea	$ 433 50	4	$ 1,734 00	$ 582 50	4	$ 2,330 00	overrun $ 596.00
19	682	veh sig sec (12'') led (grn arw)	ea	$ 145 25	2	$ 290 50	$ 233 00	2	$ 466 00	overrun $ 175.50
20	682	veh sig sec (12'') led (grn)	ea	$ 162 50	2	$ 325 00	$ 256.30	2	$ 512 60	overrun $ 187.60
21	682	veh sig sec (12'') led (yel arw)	ea	$ 133.00	1	$ 133.00	$ 233 00	1	$ 233 00	overrun $ 100 00
22	682	veh sig sec (12'') led (yel)	ea	$ 150 00	2	$ 300.00	$ 233.00	2	$ 466 00	overrun $ 166 00
23	682	veh sig sec (12'') led (red)	ea	$ 145 00	4	$ 580 00	$ 233.00	4	$ 932.00	overrun $ 352 00
24	684	traf sig cbl (ty a) (12 awg) (2 condr)	lf	$ 0 65	395	$ 256 75	$ 1.17	395	$ 462.15	overrun $ 205 40
25	684	traf sig cbl (ty a) (12 awg) (4 condr)	lf	$ 1 00	405	$ 405 00	$ 1 40	405	$ 567 00	overrun $ 162.00
26	684	traf sig cbl (ty a) (12 awg) (7 condr)	lf	$ 1 50	345	$ 517.50	$ 2 04	345	$ 703 80	overrun $ 186 30
27	684	traf sig cbl (ty a) (14 awg) (2 condr)	lf	$ 0 65	405	$ 263 25	$ 1.17	405	$ 473 85	overrun $ 210 60
28	687	ped pole assy	ea	$ 765 00	1	$ 765 00	$ 1,398 00	1	$ 1,398 00	overrun $ 633 00
29	688	ped detect (2 inch push btn)	ea	$ 81 50	4	$ 326 00	$ 174 75	4	$ 699 00	overrun $ 373.00
30	688	veh lp detect (sawcut)	lf	$ 7 50	65	$ 487 50	$ 13 98	65	$ 908 70	overrun $ 421.20
new		additional traffic control	ls				$7,500 00	1	$ 7,500 00	new item $ 7,500 00
		Total				$6,883.95			$24,339 20	$17,455.25

Galveston County Engineering

Change Order No:__7, attach 1_
Project: Melody Lane Reconstruction

traffic control breakdown

mobilization	ls	$2,500.00
arrow pannel board	ls	$2,300.00
signage	ls	$ 1,500.00
barrell and other devices	ls	$ 1,200 00
Total		$7,500 00

We will be requesting a 30 time extension

Robert Barrow

Statewide Traffic Signal Company

1509 W. 34th Street
Houston, Texas 77018
Ph. (713) 680-2875 Fax (713) 680-0127

Sept 16, 2011

Galveston County
Location Melody Lane Reconstruction from FM 2351 (E Edgewood) to Galveston County Line
Bid Due: February 1, 2011

Statewide Traffic Signal Company proposes to do the following scope of work based on the project specifications and the estimated quantites below

ADDITIVE ALTERNATE BID

ITEM NO.	SPEC NO	BID ITEM DESCRIPTION	UNIT	EST QTY.	UNIT PRICE	TOTAL COST
		MOBILIZATION	EA	1	$ 5,000.00	$ 5,000 00
14	618	CONDT (PVC) (SCHD 80) (2")	LF	20	$ 12.00	$ 240 00
15	618	CONDT (RM) (2")	LF	15	$ 20 00	$ 300 00
16	682	BACK PLATE (12 IN) (3 SEC)	EA	1	$ 60 00	$ 60 00
17	682	BACK PLATE (12 IN) (4 SEC)	EA	2	$ 70.00	$ 140 00
18	682	PED SIG SEC (12 IN) LED (2 INDICATIONS)	EA	4	$ 500 00	$ 2,000 00
19	682	VEH SIG SEC (12 IN) LED (GRN ARW)	EA	2	$ 200 00	$ 400.00
20	682	VEH SIG SEC (12 IN) LED (GRN)	EA	2	$ 220.00	$ 440.00
21	682	VEH SIG SEC (12 IN) LED (YEL ARW)	EA	1	$ 200 00	$ 200 00
22	682	VEH SIG SEC (12 IN) LED (YEL)	EA	2	$ 200 00	$ 400.00
23	682	VEH SIG SEC (12 IN) LED (RED)	EA	4	$ 200.00	$ 800 00
24	684	TRF SIG CBL (TY A) (12 AWG) (2 CONDR)	LF	395	$ 1.00	$ 395 00
25	684	TRF SIG CBL (TY A) (12 AWG) (4 CONDR)	LF	405	$ 1 20	$ 486 00
26	684	TRF SIG CBL (TY A) (12 AWG) (7 CONDR)	LF	345	$ 1 75	$ 603 75
27	684	TRF SIG CBL (TY A) (14 AWG) (2 CONDR)	LF	405	$ 1.00	$ 405 00
28	687	PED POLE ASSEMBLY	EA	1	$ 1,200.00	$ 1,200 00
29	688	PED DETECT (2 INCH PUSH BTN)	EA	4	$ 150 00	$ 600.00
30	688	VEH LP DETECT (SAWCUT)	LF	65	$ 12.00	$ 780 00

TOTAL ADDITIVE ALTERNATE BID $14,449.75

The unit prices here does NOT include Contrad mark-up. The Prices shown on CO 6, attach 1 include - a 15% OH & P mark-up + 1½% Bond Premium

Excludes:
* Cost of Bonds (If Bonds are required additional fees will apply)
* Police Officers for Traffic Control
* Surveying
* Any cost associated for utility adjustments, line extensions, meter charges or connection charges

Note:
* This quotation is based on the drawings and general notes
* Quote based on unit price for labor, equipment and supervision
* Final quantities are determined based on field measurements
* Quote valid for a period of 60 days

Thank you for the opportunity to bid this work. If you have any questions please call the office at (713) 680-2875

Charles Bobo
Vice President
Cell (713) 206-5880

Frank Spanos
Project Manager / Estimator
Cell (281) 850-1475

C.O. 7, ATTACH 2

Conrad Construction Co., Ltd.
P.O. Box 841134
Houston, Texas 77284
Office: 713-937-3081
Fax: 713-937-1172
E-mail: brianwconrad@hotmail.com

Request for Information

Date: 5/9/11 **Rfi No: 012**
Job: Melody Lane
Subject: Time delays

Information Requested:

Conrad Construction Co's notice to proceed on this project was 3/28/11.

Texas New Mexico Power also mobilized about this time and moved power poles on the east ROW and cut off old poles.

Comcast Cable is still on these poles so calls began from us immediately to Comcast asking when they will be off of the old poles (Bill Leopard - 281-802-1679). After going to the site in late April, Mr. Leopard told David Conrad that they could not get off the old poles until TNM Power is completely off (they have 5 or 6 drops that go underground).

Calls then to TNM Power (Sidney Bob - 281-996-0453 ext. 7101) found that they are scheduling these drops to be moved. As of this writing 5/9/11, nothing has been done.

We started on the sanitary sewer to stay busy. We planned to start on the storm sewer on the east side of Melody, but a review of the plans show that by station 65+00, the storm sewer goes through where the old poles are. This is why they were moved in the first place.

This has impacted our schedule. We will work with these utilities as best we can but they are not moving very fast.

The gas line relocation has not been much better. Centerpoint contractors are moving the gas line on the east ROW to the west to make

way for the new 10" water line. The new water line is shown to go where the existing gas line is. They only started 2 weeks ago and our water line subcontractor is now waiting for the old gas lines to move so the new water line can go in where the old gas line was.

Again, our schedules are being impacted by these utility relocates and we want Klotz, City of Friendswood, and Galveston County to be fully aware.

We will follow up with RFI012a,b, etc. as needed to address this time issue once we realize the full impact of the delays.

Brian Conrad, **Estimator**

Response:

Received. We will address additional time requests as they are submitted.

Approved: _____

Kevin J Hoffman, P.E.

Title: Project Manager

Date: May 11, 2011

AGENDA ITEM #16

APPLICATION FOR PERMISSION TO CONVEY BY METES AND BOUNDS PROPERTY DESCRIPTIONS, PORTIONS OF PREVIOUSLY PLATTED LOTS, WITHOUT REVISING THE PLAT

THE COMMISSIONERS COURT
OF GALVESTON COUNTY, TEXAS

TO THE HONORABLE COMMISSIONERS' COURT OF GALVESTON COUNTY, TEXAS

NOW COMES Terri Varner on behalf of VARNER DEVELOPMENT, Ltd., and files this Petition and Application for permission to convey, by metes and bounds property descriptions, portions of the 86.208 Acres in the BURRELL FRANKS SURVEY, Abst. No. 64, without revising the plat. There shall be no changes in the streets, drainage or any other lines as presently reflected in the Plat. In support thereof, Petitioner would respectfully show into the Court the following, to wit:

A copy of a survey, with a metes and bounds property description, depicting:

1) TRACT A. 5.730 ACRES out of the 86.208 Acres in the BURRELL FRANKS SURVEY, Abst. No. 64
2) TRACT B: 80.478 ACRES out of the 86.208 Acres in the BURRELL FRANKS SURVEY, Abst. No 64,

attached hereto as EXHIBIT "A" and EXHIBIT "B".

1. Only the 86.208 Acres in the BURRELL FRANKS SURVEY, Abst. No.64, is to be involved in these conveyances. Petitioner is the sole owner of the 86.208 Acres in the BURRELL FRANKS SURVEY, Abst. No. 64

2. The proposed revision will not interfere with the established rights of any owner of any other part of the subdivided land, save and except the lands of said VARNER DEVELOPMENT, Ltd., Petitioner herein.

3. Petitioner is willing and prepared to pay to the County any appropriate administrative cost or fees which may be incurred in the processing of the Application and Petition.

4. The petitioner understands that approval of the metes and bounds document does not guarantee approval of water well or sewer permits or building permits and that water, sewer and building permits are separate issues.

5. The petitioner understands that if the development exceeds 5000 gpd, it will have to use something other than a septic system for wastewater disposal as per OSSF Permit No. ON8851 and the petitioner acknowledges that any change or expansion or additions to the existing permitted structures requires building permits from Galveston County and the Galveston County Health District.

WHEREFORE, Petitioner prays that upon final hearing hereof, this Honorable Court adopt an Order granting permission to the Petitioner to convey a portion of the 86.208 Acres in the BURRELL FRANKS SURVEY, Abst. No. 64 all as per the survey plat and metes and bounds property description shown in Exhibit "A" and Exhibit "B" attached hereto, and that this Honorable Court enter such further orders and take such further action as may be proper.

EXECUTED this 20th day of December 2011.

Terri Varner
VARNER DEVOLPMENT, Ltd
91 Trinity Oaks Circle
Spring, Texas 77381

THE STATE OF TEXAS

COUNTY OF GALVESTON

BEFORE ME, the undersigned authority on this day personally appeared Petitioner Terri Varner, on behalf of VARNER DEVELOPMENT, Ltd., to me to be the person whose name is subscribed to the above and foregoing instrument and acknowledged to me that he executed the same for the purposes and consideration therein expressed

WITNESSED MY HAND AND SEAL OF OFFICE this the 20th day of December 2011.

BRENDA J. GORMAN
Notary Public, State of Texas
My Commission Expires
May 13, 2014

Notary Public-State of Texas

APPROVED

BY: Kenneth Clark 1/10/12
MARK HENRY Kenneth Clark — Date
Acting County Judge

ATTEST:

DWIGHT D. SULLIVAN
County Clerk
11-1635 VARNER M&B Application

By: Brandy Chapman Deputy
Brandy Chapman

Exhibit "A"

TRACT A – 2275 Hwy 87

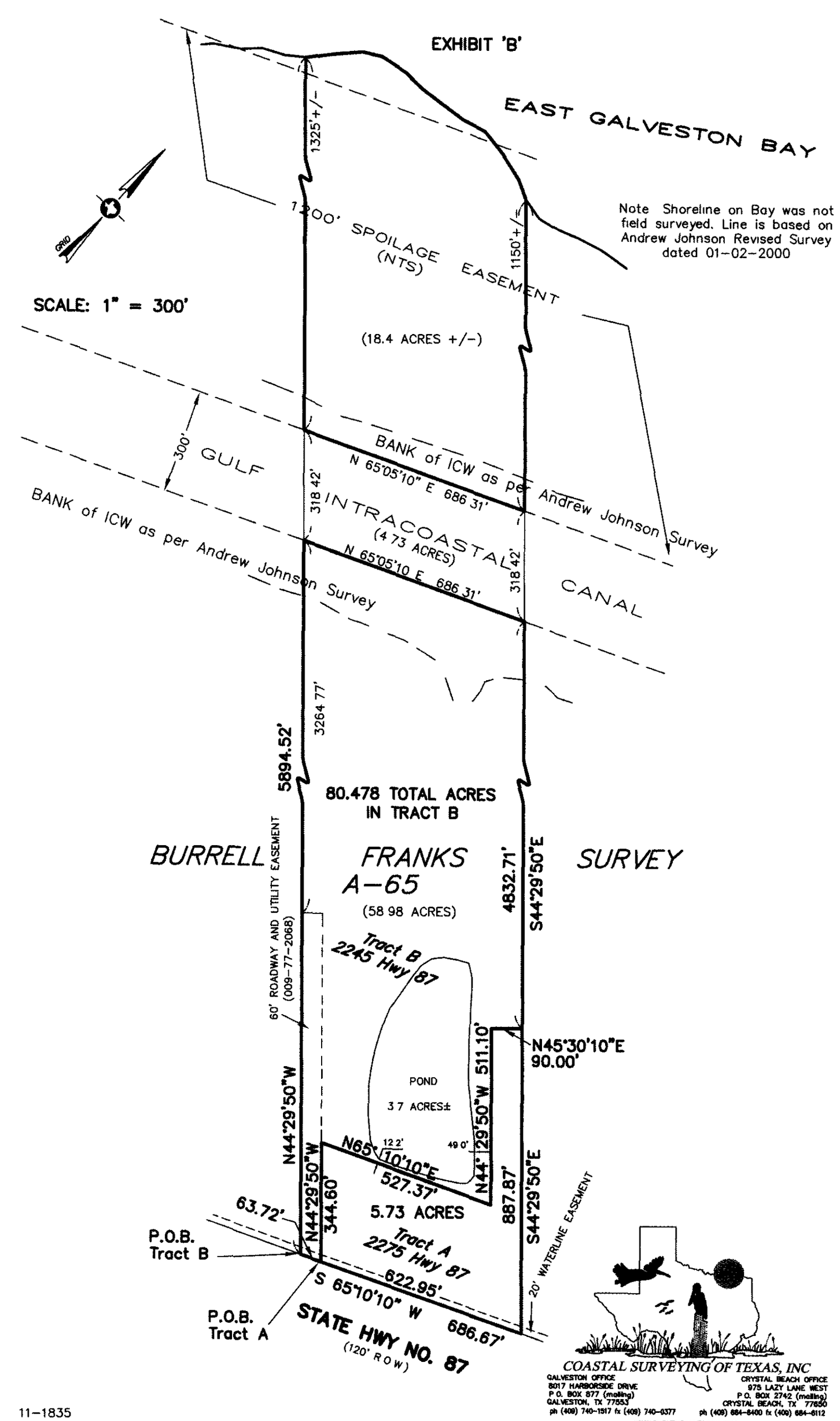
A tract or parcel out of the Burrell Franks Survey, Galveston County, Texas, being part of that certain tract or parcel conveyed to VARNER DEVELOPMENT, LTD , in County Clerk File Number (CCFN) 2005029399 Galveston County Deed Records (GCDR), Galveston County, Texas and that certain tract conveyed to VARNER DEVELOPMENT, LTD , as recorded in CCFN 2005047089 GCDR, and being more particularly described by metes and bounds as follows,
COMMENCING at the Southwest corner of the said Varner tract, as recorded in 2005047089, said point being in the Northerly line of State Highway No 87,
THENCE N65°10'10" E, along the North line of said State Highway No. 87 and the Southerly line of the said Varner tract also being a 60 foot Roadway and Utility Easement as recorded in CCFN 9425887 GCDR, a distance of 63 72 feet to the POINT OF BEGINNING,
THENCE N 44°29'50" W, along the Easterly line of the said 60 foot Roadway and Utility Easement, a distance of 344.60 feet,
THENCE N 65°10'10" E, a distance of 527 37 feet,
THENCE N 44°29'50" W, a distance of 511.10 feet;
THENCE N 45°30'10" E, a distance of 90 00 feet to the East line of the said Varner tract,
THENCE S 44°29'50" E, along the East line of the said Varner tract, a distance of 887 87 feet to the North line of State Highway No 87,
THENCE S 65°10'10" W, along said State Highway No 87, a distance of 622 95 feet to the POINT OF BEGINNING and containing 5.730 Acres

TRACT B – 2245 Hwy 87

A tract or parcel out of the Burrell Franks Survey, Galveston County, Texas, being part of that certain tract or parcel conveyed to VARNER DEVELOPMENT, LTD., as recorded in County Clerk File Number (CCFN) 2005047089 Galveston County Deed Records (GCDR), and being more particularly described by metes and bounds as follows,
BEGINNING at the Southwest corner of the said Varner tract, said point being in the Northerly line of State Highway No 87, said point being the Southwest corner of a 60 foot Roadway and Utility Easement as recorded in CCFN 9425887 GCDR,
THENCE N 44°29'50" W, along the West line of the said Varner tract, a distance of 5894 52 feet to Galveston Bay,
THENCE Easterly along Galveston Bay, a distance of 763 feet more or less to the East line of the said Varner tract;
THENCE S 44°29'50" E, along the East line of the said Varner tract, a distance of 4832.71 feet;
THENCE S 45°30'10" W, a distance of 90.00 feet,
THENCE S 44°29'50" E, a distance of 511 10 feet;
THENCE S 65°10'10" W, a distance of 527.37 feet, to the Easterly line of the said 60 foot Roadway and Utility Easement;
THENCE S 44°29'50" E, along the Easterly line of the said 60 foot Roadway and Utility Easement, a distance of 344 60 feet to the North line of said State Highway No. 87,
THENCE S 65°10'10" W, along the Northerly line of said State Highway No. 87, a distance of 63 72 feet to the POINT OF BEGINNING, and containing a calculated (not surveyed) 80 478 Acres Save and Except those tracts conveyed to the United States of America for canal right-of-way by deeds recorded in Volume 435, Page 544 and Volume 443, Page 80 GCDR

COASTAL SURVEYING OF TEXAS, INC.
GALVESTON OFFICE
8017 HARBORSIDE DRIVE
P O BOX 877 (mailing)
GALVESTON, TX 77553
ph (409) 740-1517 fx (409) 740-0377
CRYSTAL BEACH OFFICE
975 LAZY LANE WEST
P O BOX 2742 (mailing)
CRYSTAL BEACH, TX 77650
ph (409) 684-6400 fx (409) 684-6112
WWW SURVEYGALVESTON COM

EXHIBIT 'B'



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975 LAZY LANE WEST
P.O. BOX 2742 (mailing)
CRYSTAL BEACH, TX 77650
ph (409) 684-8400 fx (409) 684-8112

WWW.SURVEYGALVESTON.COM

11-1835

2012001843

5 PGS

CERTIFIED COPY
GALVESTON COUNTY COMMISSIONERS' COURT

RE: AGENDA ITEM NO. 16

Consideration of application from Terri Varner on behalf of Varner Development, Ltd. to convey portions of the 86.208 acres in Burrell Franks Survey, Abstract No. 64 on Bolivar Peninsula by metes and bounds without revising the plat submitted by the County Engineer.

Motion to Approve by Commissioner Doyle, seconded by Commissioner O'Brien that the above action be taken by the Court.

Passed· 4-0

Aye: Commissioner Doyle, Commissioner O'Brien, Commissioner Holmes, Commissioner Clark
Nay. (None)
Absent: Judge Henry

STATE OF TEXAS §

COUNTY OF GALVESTON §

I, Dwight D. Sullivan, Clerk County Court and Ex-Officio Clerk of the Commissioners' Court of Galveston County, Texas, do hereby certify that the attached is a true and correct copy of that certain:

RE: AGENDA ITEM NO. 16

as passed by the Commissioners' Court on the 10th day of , A.D., JANUARY, 2012, REGULAR Term of Commissioners' Court and as the same appear(s) in the Commissioners' Court Records of Galveston County, Texas.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, this the 10th DAY OF JANUARY, A. D., 2012.

DWIGHT D. SULLIVAN, Clerk County Court
and Ex-Officio Member of the Commissioners'
Court of Galveston County, Texas

By: Brandy Chapman
Brandy Chapman, Deputy

APPLICATION FOR PERMISSION TO CONVEY BY METES AND BOUNDS PROPERTY DESCRIPTIONS, PORTIONS OF PREVIOUSLY PLATTED LOTS, WITHOUT REVISING THE PLAT

THE COMMISSIONERS COURT
OF GALVESTON COUNTY, TEXAS

TO THE HONORABLE COMMISSIONERS' COURT OF GALVESTON COUNTY, TEXAS

NOW COMES Terri Varner on behalf of VARNER DEVELOPMENT, Ltd., and files this Petition and Application for permission to convey, by metes and bounds property descriptions, portions of the 86.208 Acres in the BURRELL FRANKS SURVEY, Abst. No. 64, without revising the plat. There shall be no changes in the streets, drainage or any other lines as presently reflected in the Plat. In support thereof, Petitioner would respectfully show into the Court the following, to wit:

A copy of a survey, with a metes and bounds property description, depicting:

1) TRACT A: 5.730 ACRES out of the 86 208 Acres in the BURRELL FRANKS SURVEY, Abst. No. 64
2) TRACT B: 80.478 ACRES out of the 86.208 Acres in the BURRELL FRANKS SURVEY, Abst. No. 64, attached hereto as EXHIBIT "A" and EXHIBIT "B".

1. Only the 86.208 Acres in the BURRELL FRANKS SURVEY, Abst. No.64, is to be involved in these conveyances. Petitioner is the sole owner of the 86.208 Acres in the BURRELL FRANKS SURVEY, Abst. No. 64

2. The proposed revision will not interfere with the established rights of any owner of any other part of the subdivided land, save and except the lands of said VARNER DEVELOPMENT, Ltd., Petitioner herein.

3. Petitioner is willing and prepared to pay to the County any appropriate administrative cost or fees which may be incurred in the processing of the Application and Petition.

4. The petitioner understands that approval of this metes and bounds document does not guarantee approval of water well or sewer permits or building permits and that water, sewer and building permits are separate issues.

5. The petitioner understands that if the development exceeds 5000 gpd, it will have to use something other than a septic system for wastewater disposal as per OSSF Permit No. ON8851 and the petitioner acknowledges that any change or expansion or additions to the existing permitted structures requires building permits from Galveston County and the Galveston County Health District.

WHEREFORE, Petitioner prays that upon final hearing hereof, this Honorable Court adopt an Order granting permission to the Petitioner to convey a portion of the 86.208 Acres in the BURRELL FRANKS SURVEY, Abst. No. 64 all as per the survey plat and metes and bounds property description shown in Exhibit "A" and Exhibit "B" attached hereto, and that this Honorable Court enter such further orders and take such further action as may be proper.

EXECUTED this 20th day of December 2011.

Terri Varner

Terri Varner
VARNER DEVOLPMENT, Ltd
91 Trinity Oaks Circle
Spring, Texas 77381

THE STATE OF TEXAS

COUNTY OF GALVESTON

BEFORE ME, the undersigned authority on this day personally appeared Petitioner Terri Varner, on behalf of VARNER DEVELOPMENT, Ltd., to me to be the person whose name is subscribed to the above and foregoing instrument and acknowledged to me that he executed the same for the purposes and consideration therein expressed.

WITNESSED MY HAND AND SEAL OF OFFICE this the 20th day of December 2011.

Kenda J. Gorman

Notary Public-State of Texas

MENDA J. GORMAN
Notary Public, State of Texas
My Commission Expires
May 13, 2014

APPROVED

BY: Kent Clark 1/10/12

~~MARK HENRY~~ Kenneth Clark Date
Acting County Judge

ATTEST:

DWIGHT D. SULLIVAN
County Clerk
11-1635 VARNER M&B Application

By: Brandy Chapman Deputy
Brandy Chapman

Exhibit "A"

TRACT A – 2275 Hwy 87

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COMMENCING at the Southwest corner of the said Varner tract, as recorded in 2005047089, said point being in the Northerly line of State Highway No. 87;
THENCE N65°10'10" E, along the North line of said State Highway No. 87 and the Southerly line of the said Varner tract also being a 60 foot Roadway and Utility Easement as recorded in CCFN 9425887 GCDR, a distance of 63.72 feet to the POINT OF BEGINNING;
THENCE N 44°29'50" W, along the Easterly line of the said 60 foot Roadway and Utility Easement, a distance of 344.60 feet;
THENCE N 65°10'10" E, a distance of 527 37 feet,
THENCE N 44°29'50" W, a distance of 511.10 feet;
THENCE N 45°30'10" E, a distance of 90 00 feet to the East line of the said Varner tract;
THENCE S 44°29'50" E, along the East line of the said Varner tract, a distance of 887.87 feet to the North line of State Highway No 87;
THENCE S 65°10'10" W, along said State Highway No. 87, a distance of 622.95 feet to the POINT OF BEGINNING and containing 5.730 Acres.

TRACT B – 2245 Hwy 87

A tract or parcel out of the Burrell Franks Survey, Galveston County, Texas, being part of that certain tract or parcel conveyed to VARNER DEVELOPMENT, LTD., as recorded in County Clerk File Number (CCFN) 2005047089 Galveston County Deed Records (GCDR), and being more particularly described by metes and bounds as follows;
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THENCE S 44°29'50" E, a distance of 511.10 feet,
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THENCE S 44°29'50" E, along the Easterly line of the said 60 foot Roadway and Utility Easement, a distance of 344.60 feet to the North line of said State Highway No. 87;
THENCE S 65°10'10" W, along the Northerly line of said State Highway No. 87, a distance of 63.72 feet to the POINT OF BEGINNING, and containing a calculated (not surveyed) 80.478 Acres Save and Except those tracts conveyed to the United States of America for canal right-of-way by deeds recorded in Volume 435, Page 544 and Volume 443, Page 80 GCDR.

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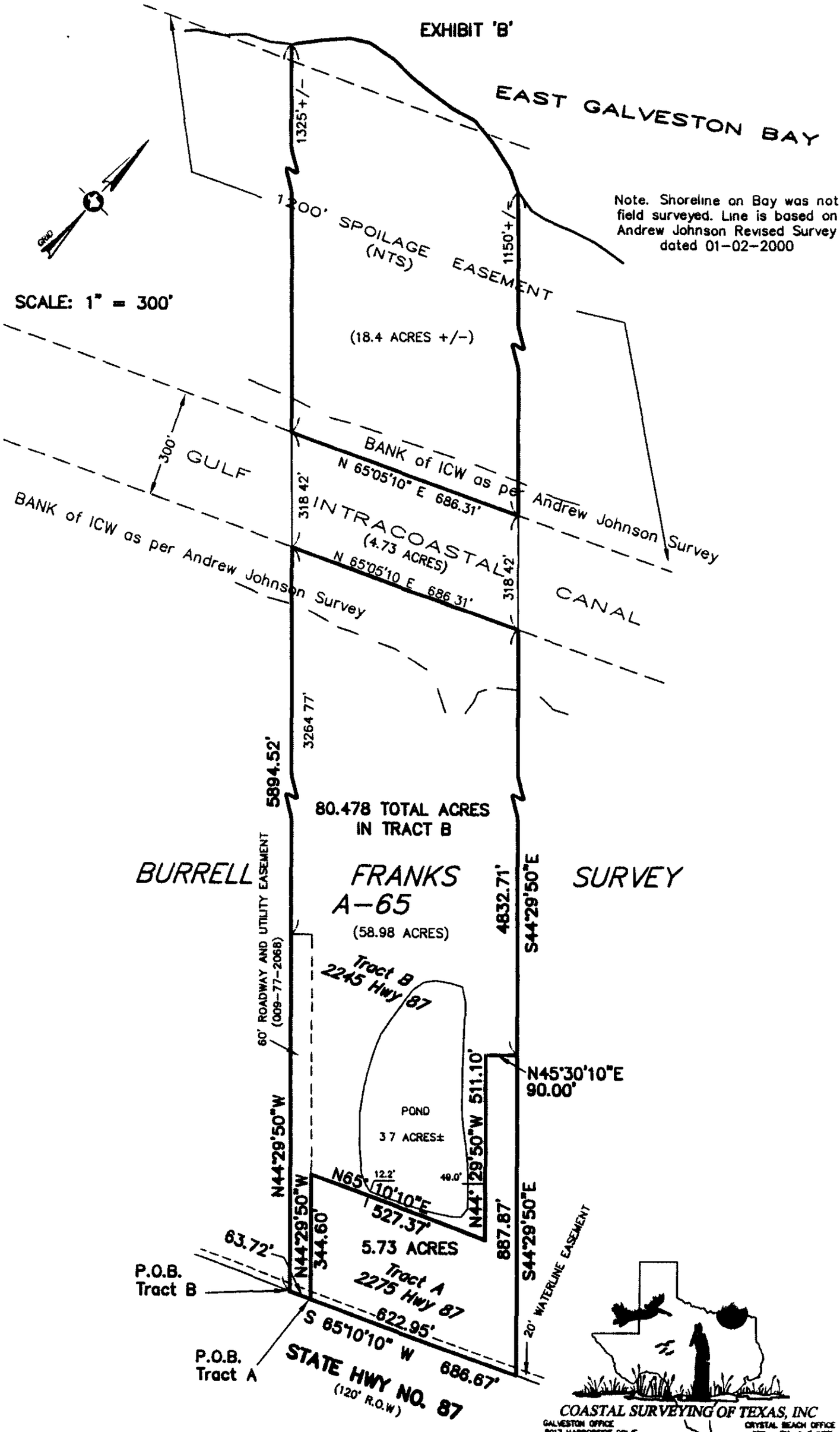


EXHIBIT 'B'
EAST GALVESTON BAY
Note. Shoreline on Bay was not field surveyed. Line is based on Andrew Johnson Revised Survey dated 01-02-2000
1325'+/-
1150'+/-
1200' SPOILAGE EASEMENT (NTS)
SCALE: 1" = 300'
(18.4 ACRES +/-)
300'
GULF
BANK of ICW as per Andrew Johnson Survey
N 65°05'10" E 686.31'
318.42'
INTRACOASTAL CANAL
(4.73 ACRES)
N 65°05'10 E 686.31'
318.42'
BANK of ICW as per Andrew Johnson Survey
3264.77'
5894.52'
80.478 TOTAL ACRES IN TRACT B
BURRELL FRANKS SURVEY
A-65
(58.98 ACRES)
60' ROADWAY AND UTILITY EASEMENT (009-77-2068)
Tract B
2245 Hwy 87
4832.71'
S44°29'50"E
N45°30'10"E
90.00'
POND
3.7 ACRES±
N44°29'50"W 511.10'
N44°29'50"W
344.60'
N65°10'10"E
527.37'
12.2'
49.0'
5.73 ACRES
887.87'
S44°29'50"E
20' WATERLINE EASEMENT
63.72'
P.O.B. Tract B
Tract A
2275 Hwy 87
622.95'
S 65°10'10" W 686.67'
P.O.B. Tract A
STATE HWY NO. 87
(120' R.O.W.)
COASTAL SURVEYING OF TEXAS, INC
GALVESTON OFFICE
CRYSTAL BEACH OFFICE

FILED AND RECORDED

OFFICIAL PUBLIC RECORDS

20120001843

January 11, 2012 02 58 36 PM

FEE $28 00

Dwight D Sullivan, County Clerk

Galveston County, TEXAS

AGENDA ITEM #17

GALVESTON COUNTY ENGINEERING DEPARTMENT

Change Order No 2
Texas City 6th Street Reconstruction

Owner Galveston County
Contractor RW Lucas Construction LLC
Engineer Brown & Gay Engineers, Inc

Contract Number 1079
Purchase Order Number C109524
Bid Number B111042

Work Being Changed

Dispose of 600 yards of contaminated soil which was excavated from the old roadway subgrade and add two 2 inch short water service wet connectors.

CHANGE IN CONTRACT PRICE		CHANGE IN CONTRACT TIME	
Original Contract Price	$3,095,871 14	Original Contract Time	300 Days
Net Change From Previous Change Orders	$29,394 20	Net Change From Previous Change Orders	0 Days
Contract Price Prior To This Change Order	$3,125,265 34	Contract Time Prior To This Change Order	300 Days
Net Increase/Decrease Of This Change Order	$155,087 20	Net Increase/Decrease Of This Change Order	0 Days
Contract Price With All Approved Change Orders	$3,280,352 54	Contract Time With All Approved Change Orders	300 Days

RECOMMENDED

By D. M Fitzgerald Date 12-21-11
Engineer (County Engineer)

APPROVED
County Of Galveston

By [signature] Date January 10, 2012
~~Mark Henry, County Judge~~
Kenneth Clark, Acting County Judge

Attest _____
Dwight Sullivan, County Clerk
By: Brandy Chapman Deputy
Brandy Chapman

ACCEPTED
Contractor

By Dustin Johnson Date 12-21-11
Contractor (Authorized Signature)

Dustin Johnson
Printed Name

Robertson, Elizabeth

From Fitzgerald, Mike
Sent Tuesday, December 13, 2011 3 28 PM
To Robertson, Elizabeth
Subject· FW 6th Street Contaminated Soil
Attachments: 20111213144206872 pdf

From: Englebert, Scott R [mailto·srenglebert@terracon com]
Sent: Tuesday, December 13, 2011 2·58 PM
To: Fitzgerald, Mike
Cc: wfrench@browngay com
Subject: 6th Street Contaminated Soil

Mike,

Attached is an update on the contaminated soil area

To be very conservative I have assumed that 6-inches will be cut and hauled off in all areas where the existing paving has not been removed I do not think all areas in the remaining PPCA will be contaminated, but this is the only way to cover ourselves

Based on these calcs the total amount of soil removed from the site would be 480 cubic yards I understand a contingency is typically added onto the calculated amount If we were to add 25% contingency, this would bring our total to 600 cubic yards

600 yards at $250/yard = $150,000

I do not think the site will produce near 600 yards of contaminated soil that would need to be disposed of, but this appears to be the only way to cover ourselves at this time

Wes,
Mike is preparing a change order as I write this email so please respond with any comments/concerns as soon as possible

Thanks,
Scott

Scott Englebert, E.I T
Project Engineer I League City
Terracon Consultants, Inc.
Texas Registration No F-3272
511 League City Parkway, Suite F I League City, Texas 77573
P 281 557 2900 x 114 I F 281 557 2990
srenglebert@terracon.com I www terracon.com

Terracon provides geotechnical, environmental, construction materials, and facilities consulting engineering services delivered with responsiveness, resourcefulness, and reliability

Private and confidential as detailed here (www.terracon.com/disclaimer) If you cannot access hyperlink, please e-mail sender

Terracon

PROJECT 16th STREET CONTAMINATED SOILS Page of

JOB NO 9111088 Date 12/13/2011 Comp By SCOTT E. CHECKED BY

SECTION 1 - SOUTH BOUND LANE

330' (length) x 50' (ROW width) x 0.5' (6-inch CUT) = 8250 ft³

8250 ft³ ≅ 305 yd³

SECTION 2 - NORTH BOUND LANE

200' (length) x 33' (ROW width minus sidewalk) x 0.5' (6-inch cut) = 3300 ft³

3300 ft³ ≅ 125 yd³

SECTION 3 - 9th Avenue SEC

50' (length) x 50' (width) x 0.5' (6-inch cut) = 1250 ft³

1250 ft³ ≅ 50 yd³

PROJECT TOTAL = 480 yd³ (ESTIMATE)

Two 2 inch wet service water connects

@ 2543.60 EA

2 x 2543.60 = 5087.20

Form P-331

Match Line 42+00 See Sheet 27
4th Ave N
(100' R O W)
Match Line 38+00 See Sheet 25

AGENDA ITEM #18

THE COUNTY OF GALVESTON

RUFUS CROWDER, CPPB
PURCHASING AGENT

COUNTY COURTHOUSE
722 Moody (21st Street)
Fifth (5th) Floor
GALVESTON, TEXAS 77550
(409) 770-5371

GWEN MCLAREN, CPPB
ASST PURCHASING AGENT

January 2, 2012

Honorable County Judge
And Commissioners' Court
County Courthouse
Galveston, Texas

Re **RFP #B122005, Hitchcock Boat Ramp Concession**

Gentlemen,

On December 20, 2011 proposals were opened for RFP #B122005, Hitchcock Boat Ramp Concession, at which time one (1) proposal was received from Waters Edge Bar and Bait

The Director of Parks and Senior Services recommends that you award the contract to Waters Edge Bar and Bait and to begin negotiating the final agreement on terms and conditions to be brought back to the Court

Your consideration in this matter will be greatly appreciated

Respectfully submitted,

Rufus G Crowder, CPPB
Purchasing Agent
County of Galveston

Attachments

Dennis J. Harris, Sr.
Director

Galveston County Department of Parks & Senior Services

www.galvestonparks-seniors.org

December 28, 2011

To Rufus Crowder, Purchasing Agent, CPPB
Galveston County Purchasing Department

From Dennis J Harris, Director
Department of Parks & Senior Services

Subject: Agenda Item - Recommendation RFP No. B122005
Hitchcock Boat Ramp Concession

On Tuesday, December 20, 2011, proposals were opened for operation and management of the Hitchcock Boat Ramp Concession The Parks Department management staff has carefully reviewed the proposal and feel that Deleon and Erskins Investments LLC doing business as "Waters Edge Bar and Bait" will offer the best opportunity for the management of this facility The proposer proposes to make needed building improvements in the initial phase of the agreement with subsequent long-term improvements being completed based upon the feasibility of its net revenues

We are requesting that this item be placed on the Commissioner's Court Tuesday, January 10, 2012 agenda to authorize the County to begin negotiating the final agreement on terms and conditions to be considered on a subsequent Commissioner's Court agenda for execution.

Attached you will find the proposal and evaluation criteria. Should you need any additional information please feel free to contact me.

DENNIS J HARRIS

cc Harvey Bazaman County Attorney County Legal Department
Andy Hansen Park Operations/Trades Manager
Earl Hearne Administrative Services Manager

Attachment

Evaluation Criteria for Hitchcock Boat Ramp Concession
RFP Bid # B122005

Required Information	% of Score	**Evaluator Dennis J. Harris**	**Evaluator Earl Hearne**	**Evaluator Andy Hansen**			
Deleon and Erskins Investments LLC.							
Competence	25	X 4 = 100	X 4 = 100	X 4 = 100			
Creativity	15	X 3 = 45	X 4 = 60	X 3 = 45			
Quality	20	X 3 = 60	X 4 = 80	X 4 = 80			
Revenue	20	X 3 = 60	X 3 = 60	X 4 = 80			
Completeness	20	X 4 = 80	X 5 = 100	X 4 = 80			
Totals	**100**	345	400	385			

***** Scoring Criteria 5 = Very High, 4 = High, 3 = Medium, 2 = Low, 1 = Very Low

Dennis J Harris 12/28/11
Evaluator and Date

Earl Hearne 12/29/11
Evaluator and Date

Andy Hansen 12/29/11
Evaluator and Date

Waters Edge Bar and Bait

Waters Edge Bar and Bait

Attn: Rufus Crowder, CPPB

Purchasing Agent

Galveston County

Submittal for Request for Proposal

RFP#BI22005

Hitchcock Boat Ramp Concession

DeLeon and Erskins Investments LLC

Jesse Deleon/Dannon Erskins

PO Box 125, Hitchcock, TX 77563

(409) 938-9012/(281) 705-6571

RFP #B122005
OPEN: 12/20/2011
2:00PM

Response to

Request for Proposal
RFP #B122005

HITCHCOCK BOAT RAMP CONCESSION

Attn: Rufus Crowder, CPPB
Purchasing Agent
Galveston County
722 Moody (21st Street)
Fifth (5th) Floor
Galveston Texas 77550
(409) 770-5372

Mr Crowder,

I would like to thank you for the opportunity for my company (DeLeon and Erskins Investments LLC) to bid on the open RFP #B122005 for the lease on the Hitchcock Boat Ramp Concession. All information requested in the RFP is included in the package within If any additional information is required, please do not hesitate to call or email Attached herein are the following documents

- Hitchcock Boat Ramp Concession-Concession Proposal Form
- Attachment 1 – Additional proposed property improvements
- Attachment 2 – Proposed insurance quote
- Purchasing Department – Vendor Qualification Packet
    - PEID
    - W-9
    - CIQ

Thank you for your consideration,

Dannon Erskins, Owner

RFP #B122005
OPEN: 12/20/2011
2 00PM

HITCHCOCK BOAT RAMP
CONCESSION
CONCESSION PROPOSAL
FORM

1 This is a proposal to operate a bait camp and food and beverage concession at the Hitchcock Boat Ramp (yes or no)
Yes

2 Name under which concession will operate if proposal is selected and contract entered into
Waters Edge Bar and Bait

3 Name of Owner/Operator
Jesus J DeLeon and Dannon G Erskins are the Owner and Operator of DeLeon and Erskins Investments LLC

4 Type of Business (Corporation, Partnership, Sole Proprietorship) **Corporation**

5 I, the undersigned, agree, if awarded the Concession Agreement by the County, to furnish the services and items listed on the attached proposal forms, at the prices quoted, and according to the terms and provisions of the Concession Agreement attached to this RFP as mutually modified My proposal and the prices quoted herein shall remain firm for a period of thirty (30) days from the date of the proposal opening I am authorized to agree to abide by the terms and conditions of this RFP and the Concession Agreement I understand that being tentatively named as the successful proposer does not guarantee to me that the County will execute a final Concession Agreement with me Rather, I understand that the County may terminate this RFP process at any time short of actually executing the final Concession Agreement without any liability to me

Signature _____ Date **12-14-2011**

6 Address of Concession Owner/Operator
7803 2nd Street
Hitchcock, TX 77563

7 Telephone Number **409-748-9912** Tax ID Number **801424656**

8 Fax Number **N/A**

9 Monthly Flat Rate Bid in Consideration for this RFP **$400 00**
(To be paid as stated in RFP)

10 Proposed Hours of Operation (7 days per week required)
Monday – Saturday 10am to 12 midnight
Sunday Noon to 12 midnight

11 List all items you are proposing to sell/rent with proposed prices (Attach additional page if necessary)

Items	Proposed Price
General Package Foods (Pizzas, Subs, Sandwiches Chips)	$1 00 to $6 00 range
Beer and Wine	$2 00
Soft Drinks	$1 00
Frozen Shrimp and other bait	$4 00
Miscellaneous Fishing Tackle	$1 00 to $5 00
ICE	$2 00/10 lb bag

12 List all officers and members of your organization or enterprise

Jesus (Jesse) J DeLeon – Owner
Dannon G Erskins – Owner
JoAnne Kershaw - Manager

13 Describe your experience in operating bait camps and food and beverage concessions This should include the length of time in business, your staff size, your understanding of the importance of senior management's continuity and involvement throughout the contract, and previous and current operations that are similar in nature to this project

Jesse DeLeon and myself (Dannon Erskins) created DeLeon and Erskins Investments LLC in May of 2011 in order to provide a gateway to invest monies in additional ventures separate from our full time positions as senior managers of a major construction firm based in Houston. Jesse and myself have not operated a food and beverage concession or bait shop previously, but we have vast experience as managers with cost and budget management, project management and the management of personnel. We have managed projects from small to as large as $100 million (+/- 1500 people) and fully understand the logistics of operating a concession business with respect to budget, financial stability, direct interaction of the business, and involvement in the community. As business owners and resident of Hitchcock, we understand the importance of being involved with every aspect of the business and will serve in that role for the completion of the contract term. Our estimated staff will consist of approximately 8-10 residents of Galveston County. We have also negotiated the hiring of the previous manager (JoAnne Kershaw) to handle the day to day operations of the business.

14 Provide a summary of how you intend to provide the services requested by this RFP Please describe a staffing plan and chain of responsibility for resolving any problems that may arise at the concession

Our primary purpose for securing the site is to operate a food and beverage concession and bait camp facility in which food, drinks, and fishing bait and supplies will be sold. The facility will remain open 7 days a week providing these services to the community. The current facility has been in business for approximately 15 years and we intend hire the previous manager for the last 5 years as our manager. JoAnne, as manager of approximately 8 people, will report to the owners (Jesse DeLeon and Dannon Erskins) as an employee for any and all licensing, financial support for the business, contracts, agreements, hiring, payroll and etc. We have also opened a local bank account for this purpose at Texas State bank with a secured line of credit. In addition, we have also been issued a Sells tax number and have the appropriate quotations for all insurances required to operate the facility. Once the lease is signed, we will be able to apply for a liquor license.

15 Provide a list of at least three references that can attest to your ability to fulfill the requirements of this RFP and Concession Agreement (List name, address, telephone number)

Name	Rodney Shaver	Danny Erskins	Scott Tanley	Mae Kershaw
Address 1	601 Jefferson St	10522 Fawnview Dr	601 Jefferson St	PO Box 5
Address 2	KT-3195		KT-3193	
City, State, Zip Code	Houston, TX 77002	Houston, TX 77070	Houston, TX 77002	Hitchcock, TX 77563
Phone	(713) 594-7061	(281) 970-6956	(713) 504-1780	(409) 771-0008

16 Provide any additional information, if any, that should be considered in evaluating your proposal If there is none, state, "There is no additional information we wish to present "

- **We would like to evaluate the possibility of extending the contract extensions to two (2) additional three (3) year extensions if possible in order to protect and recover our initial investment and permanent improvements to the property**
- **See *Attachment I* for a proposed improvement plan for the building. The proposed plan is our initial evaluation of improvement that we would like to make to the facility but are not guaranteed or committed in any manner.**

17 List all trade fixtures and personal property items to be supplied by the proposer that will **not** become the property of the County at the expiration or early termination of the Concession Agreement

- **Any and all merchandise placed on site for sale.**
- **Any and all equipment not permanently mounted to the building**
  - **Ice Machines**
  - **Coolers**
  - **Bait Boxes**
  - **Aeration tanks**
  - **Tables, chairs, pool tables and games, vending machines, etc.**

18 Attach a Separate Sheet if you are proposing alternatives to the requirements set forth in this RFP Although the County is seeking proposals as specified in this RFP, reasonable alternatives will be considered For example, the County will entertain allowing the successful applicant to construct boat stalls upon the Concession Premises

- **See *Attachment I* for a proposed improvement plan for the building. The proposed plan is our initial evaluation of improvement that we would like to make to the facility but are not guaranteed or committed in any manner.**

OPEN 12/20/2011

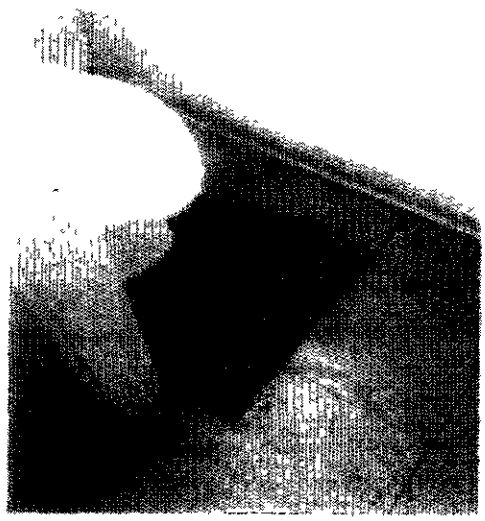
Attachment 1

Proposed Property Improvements

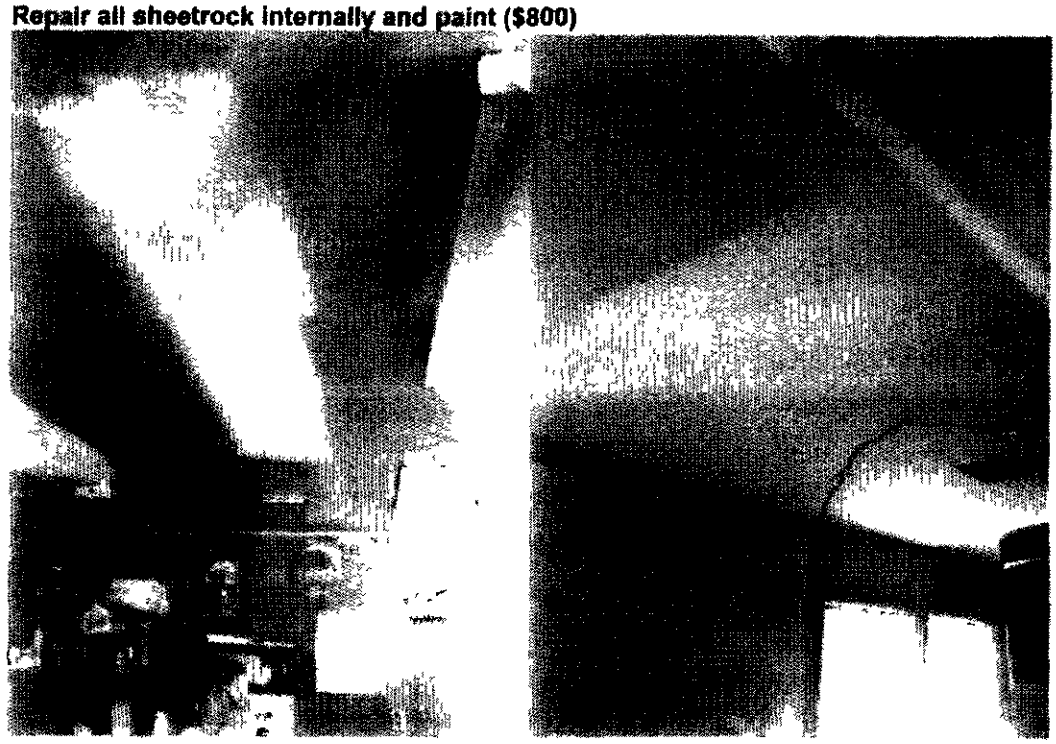
We are considering several capital improvements to the facility and property The items for improvement are listed below and will be completed at the expense of Waters Edge Bar and Bait All repairs will be submitted for approval in accordance with the contract

- **Blown-in insulation in all walls, which are currently not insulated. ($2000)**
  (Currently, walls and roof are not insulated)

- **Replace the flooring ($3,600)**

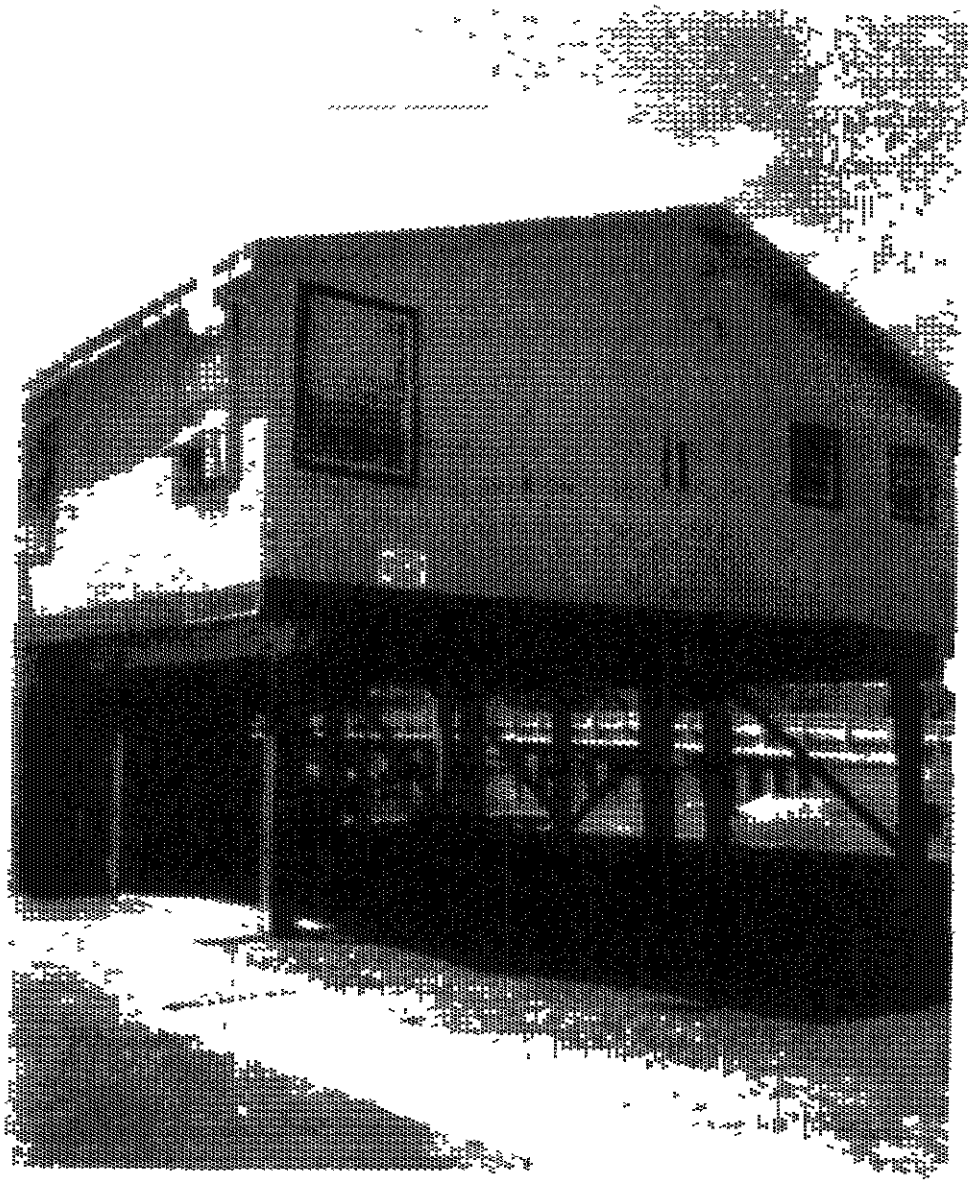


- **Repair all sheetrock internally and paint ($800)**



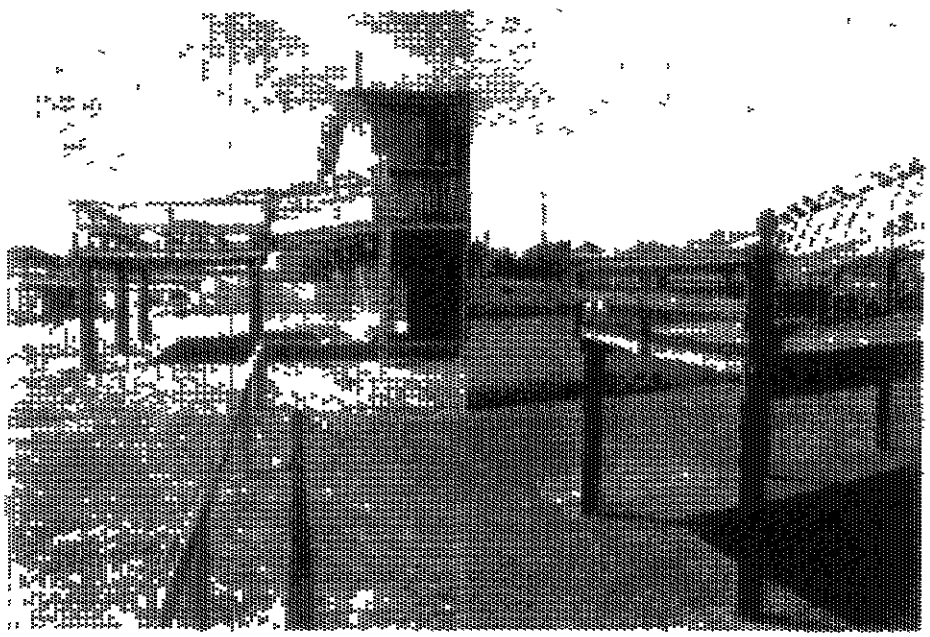
- Repace all lights and fans ($400)

- Paint and repair all exterior siding and soffit ($1000)

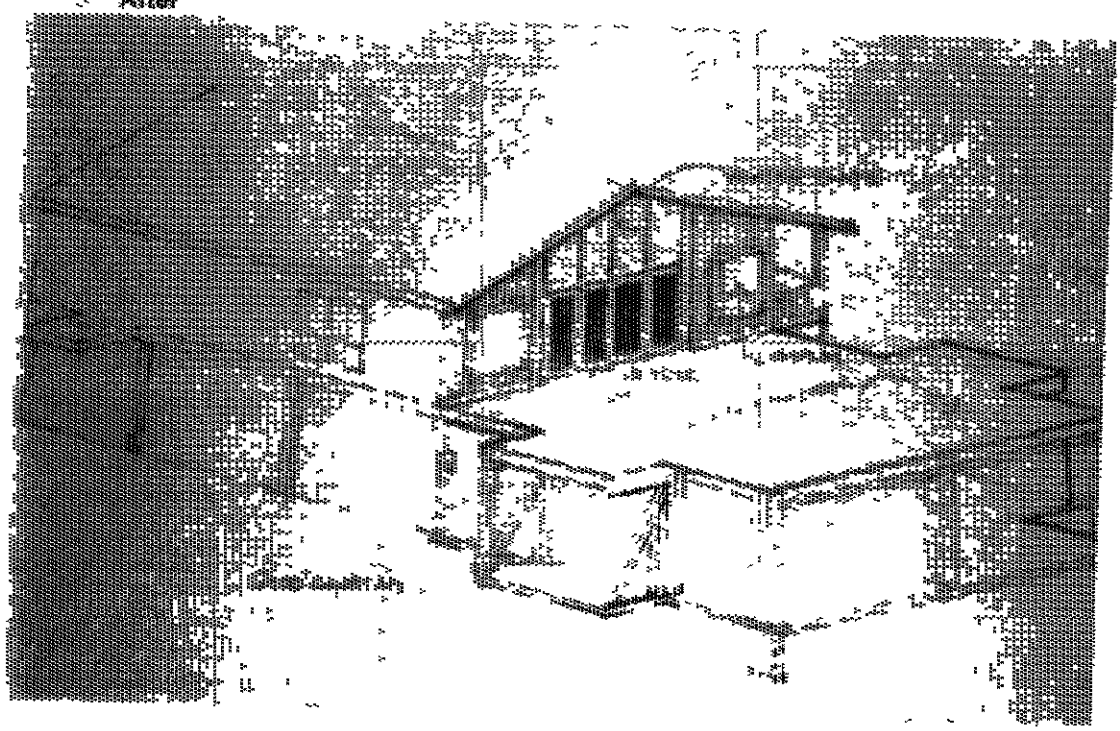


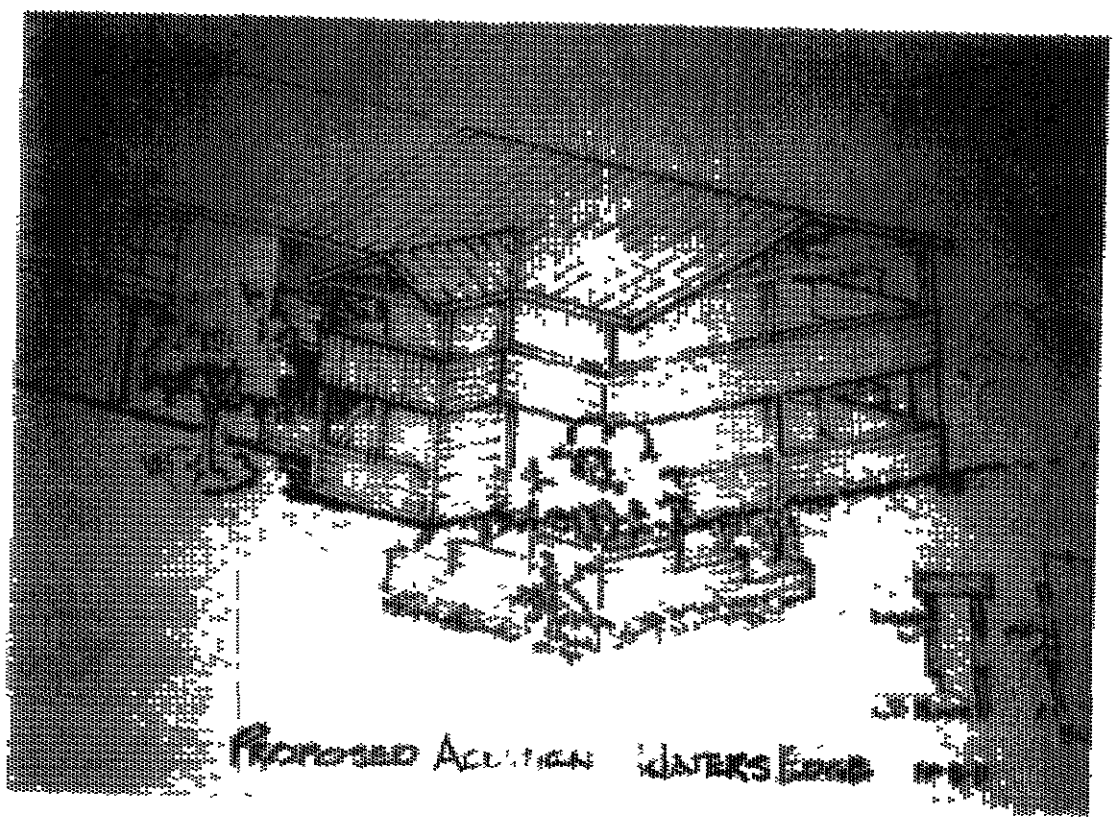
- **Remove old deck and install a new deck approximately 30' x 20' on the west side of the building ($15,000) A before and after (conceptual drawing) is attached.**

  - **Before**



After





Please consider our proposal and possible improvement plan indicated above The potential revisions are completely based upon detailed estimates construction permits and return on investment feasibility and are not guaranteed or committed at any time

RFP #B122005
OPEN: 12/20/2011
2:00PM

Attachment 2

Preliminary Insurance Proposal

GIA
1892
INSURANCE
SINCE 1892

August 8, 2011

Waters Edge Bar & Bait
Dannon Erskins & Jesse Deleon
7827 2nd ST
Hitchcock TX 77563

Re Proposal for Commercial Package and Windstorm

Dear Mr Erskins

THANK YOU FOR YOUR BUSINESS!

We are pleased to enclose a presentation for a Commercial Package covering the Gerneral Liability, Contents, and Liquor Liability, and a Commercial Windstorm Policy for the property located at 7827 2md Street, Hitchcock, TX We would like to point out that this presentation outlines a few of the coverage and/or limitation features of the coverage line(s) being presented, others may apply. We strongly encourage you to review the presentation closely and call us should you have any questions or concerns *Please remember that the extent of any insurance provided to you is at all times governed by the complete terms and conditions of the issued policy itself* *This presentation does not constitute coverage. You must sign and return all required documentation along with payment for the premium before a request for coverage can be made to the insurance company*

We would also like to remind you that your exposure to a loss may exceed your current limits Higher limits may be available.

GIA offers a full line of insurance products including Life and Health insurance as well as Financial Products to help meet all of your insurance needs

If you have ANY questions concerning this presentation or any other insurance matter, please let us know

Sincerely,

Deidre S Stevens

Deidre S Stevens

Enclosure

6025 Heards Lane, Galveston TX 77551 1102-B South Friendswood Dr, Friendswood TX 77546
P O Box 16767, Galveston TX 77552-6767
409-740-1251 • 800-364-6166 • 281-442-1892 • FAX 409-740-0513
www.gia-tx.com

GIA

Galveston Friendswood
6025 Heards Lane, Galveston TX 77551
P O Box 16767, Galveston TX 77552-6767

Phone (409)740-1251 / (281) 442-1892 Fax (409) 740-0513

INVOICE

All premiums payable on or
before effective date of policy___

ACCOUNT NO DATE
00022300 / August 8, 2011

Waters Edge Bar & Batt
Dannon Erskins & Jesse Deleon
7827 2nd ST
Hitchcock, TX 77563

INSURED
NAME

$_____
PAYMENT ENCLOSED

PROPOSED EFFECTIVE DATE	PROPOSED EXPIRATION DATE	QUOTE / POLICY #	DESCRIPTION	AMOUNT
TBD	TBD	TBD	Commercial Package	$2640 58
TBD	TBD	TBD	Commercial Windstorm	$158 00
			PLEASE MAKE CHECK PAYABLE TO GIA	
Payment and signed documents must be returned to GIA before a request for coverage can be made to the Insurance Company				
			TOTAL ESTIMATED AMOUNT DUE	$2798 58

BUSINESS INSURANCE PROPOSAL

FOR

WATERS EDGE BAR & BAIT
DANNON ERSKINS & JESSE DELEON

AUGUST 8, 2011

PRESENTED BY:

GIA 1892
INSURANCE
SINCE 1892

6025 HEARDS LANE, GALVESTON TX 77551
1102-B SOUTH FRIENDSWOOD DR, FRIENDSWOOD TX 77546
P O BOX 16767, GALVESTON TX 77552-6767
(409) 740-1251 (281) 442-1892
FAX (409) 740-0513

Please remember that the extent of any insurance provided to you is at all times governed by the complete terms and conditions of the issued policy itself

This presentation does not constitute coverage. You must sign and return all required documentation along with payment for the premium amount due before a request for coverage can be made to the Insurance Company

From June through November insurance companies may stop binding coverage when a 'tropical disturbance' enters the Gulf of Mexico or Caribbean Sea. In these cases, coverage quoted in this proposal cannot be put in effect until the company lifts its binding restrictions

_____ Initials

BUSINESS INSURANCE PLAN

PACKAGE POLICY
PROPERTY SECTION

Company	Scottsdale Insurance Co
AM Best Rating	A+XV
Policy Term	TBD
Estimated Premium	$2640 58
	Rates are not guaranteed They are set by the company and subject to change

Location #1 7827 2nd St , Hitchcock, TX

* Building Value	Contents Value	ICC	Business Income	Other
$None Quoted	$20,000	N/A	Available-Not Quoted	

Deductible $1000 00

Coverage:
Fire, Extended Coverage
Special Extended Coverage including theft
Replacement Cost Valuation
80% Coinsurance clause applies

Important Exclusions: Exclusion of Loss Due to Virus or Bacteria, Water Exclusion
(Others May Apply) Endorsement, Theft Exclusion, Windstorm or Hail Exclusion,

Special Conditions: Your policy contains exclusions that apply when any portion of the covered property is vacant for longer than 60 days. Please contact our agency should **any portion** of your property become vacant It may be necessary to arrange appropriate additional coverage

25% Minimum Earned Premium Applies
$250 00 Non-Refundable Policy Fee is Included

Notice regarding values: We are pleased to assist you with your own final determination of the values you decide to insure Please refer to the policy for specific terms, conditions, limitations, and exclusions

_____ Initials

BUSINESS INSURANCE PLAN

PACKAGE POLICY (CONT'D)
GENERAL LIABILITY COVERAGE

Estimated Premium	Included *Rates are not guaranteed They are set by the company and subject to change*

Location(s) of premises. 7827 2nd St , Hitchcock, TX

Description of operations: Bar and Bait sales

Limits **

$	1,000,000	Each Occurrence Limit
$	2,000,000	Products/Completed Operations Aggregate
$	1,000,000	Personal Injury/Advertising Liability
$	2,000,000	General Liability Aggregate
$	100,000	Fire Damage Legal Liability
$	5,000	Medical Expenses
$	25,000	Assault & Battery each claim
$	50,000	Assault & Battery Aggregate

Deductible: $0 Bodily Injury, Property Damage, Personal Injury & Advertising Injury
Applies separately per claim, including loss adjustment expense

Subject to: Final Audit Adjustment of the Premium Basis listed below that was used to determine the annual estimated premium for this presentation

Premium Basis: Payroll =
Square Footage =
Gross Receipts = Liquor and and Bar Sales $62,000
Gross Receipts = Bait Sales $200

Special Conditions: *25% Minimum Earned Premium clause*
100% Earned – Additional Insured / Waiver of Subrogation Premiums

GL coverage is premises-driven. All applicable locations MUST be listed.

Important Exclusions: (Others May Apply)	Recording & Distribution of Material in Violation Exclusion, Athletic/Sports Participants Exclusion, Limiation of Coverage to Designated Premises/Project, Exclusion of Certified Acts of Terrorism, Exclusion of Certified Acts of Terrorism and other Acts, Known Injury or Damage Exclusion-Personal & Advertising Injury, Nuclear Energy Liability Exclusion, Exclusion of Certified Acts of Terrorism, Lead Contamination Exclusion, Employment Related Practices Exclusion, Nuclear Energy Liability Exclusion-Broad Form, Punitive or Exemplary Damage Exclusion, Asbestos Exclusion, Fungi or Bacteria Exclusion, Punitive Exclusion,
Contingent upon:	Favorable Inspection

***** Notice regarding higher liability limits:*** Your exposure to a liability loss may exceed your limits and even those quoted here. Higher liability limits may be available Please let us know if you would like additional information or a quote

_____ Initials

BUSINESS INSURANCE PLAN

WINDSTORM & HAIL

Company	Texas Windstorm Insurance Association (TWIA)
Policy Term	TBD
Estimated Premium	$158 00
	Rates are not guaranteed They are set by the company and subject to change

Location	7827 2nd St , Hitchcock, TX
Building	$None Quoted
Contents	$20,000
Business Income	$ _____ per day for ____ days-Available-Not Quoted
ICC*	$N/A
Deductible(s)	$1,000
	168 hours for Business Income-If Written

Covers	Direct damage from the Perils of Windstorm & Hail
	80% Coinsurance applies
	Replacement Cost Valuation
	Increased Cost of Construction/Ordinance & Law * - N/A

**ICC Increased Cost of Construction/Ordinance or Law – Additional building coverage in the event the insured has to rebuild or repair to current building codes after a loss*

Signs (attached or detached), fencing, flag poles, light poles and outbuildings must be scheduled with a premium paid in order to be covered

180-day minimum retained premium Applies
Business Income Premium is NOT refundable

***** Notice regarding values:*** We are pleased to assist you with your own final determination of the values you decide to insure Please refer to the policy for specific terms, conditions, limitations, and exclusions

Texas Windstorm Insurance Association (TWIA) / National Flood Insurance Program (NFIP) - State & Federal programs with uniform rates. Differences in premiums from different agents indicate a difference in coverage and/or rating information. Contact us for an explanation.

IMPORTANT NOTICE

Waters Edge Bar & Bait Dannon Erskins & Jesse Deleon _____ **Initials**

IF YOUR POLICY IS CANCELLED BEFORE 180 DAYS, YOU COULD SURRENDER A SIGNIFICANT PORTION OF YOUR PREMIUM

Your TWIA windstorm policy is subject to a minimum retained premium equal to the greater of 180 days of the annual policy term or $100, unless one of the 6 exceptions listed below applies If your policy cancels within 180 days of the effective date of the policy, TWIA will keep the remaining portion of the premium necessary to cover 180 days of the policy period and no coverage will be provided beyond the date of your cancellation Any portion of the premium in excess of $100 and beyond the minimum retained premium of 180 days will be refunded to you on a pro rata basis

If you finance your policy through a premium finance company and your policy cancels within 180 days of the effective date of the policy, you will owe TWIA any unpaid balance of the 180-day minimum retained premium resulting from your cancellation. You will not be eligible for windstorm coverage through the Association until any balance due has been paid. Payment of the unpaid balance does not provide coverage for any damage that may have occurred between the date of cancellation and the payment of the balance ***In addition, TWIA will not reinstate a cancelled policy. A new policy will need to be applied for with the premium paid in full.***

Exceptions to the 180-day minimum retained premium rule (subject to a $100 minimum premium): Your windstorm policy is not subject to a 180-day minimum retained premium under the following circumstances

1. Replacement of the Association policy with similar coverage in the voluntary market,
1. Change in majority interest, including sale of the property to an unrelated party,
2. Foreclosure of the property insured in the Association policy,
3. Death of the policyholder;
4. Total loss of the property insured, including demolition, or
5. Builder's risk policies

If any of the above exceptions occur, a $100 minimum retained premium still applies Any portion in excess of the earned premium beyond the minimum retained premium of $100 will be refunded to you on a pro rata basis

PLEASE READ YOUR POLICY

This notice is not a substitute for actual policy language and is only meant to remind the policyholder of the policy's cancellation provisions. Read the policy's cancellation provisions and/or contact your agent for guidance before deciding to cancel coverage.

Texas Windstorm Insurance Association
5700 South MoPac Expressway, Building E Suite 530 Austin, Texas 78749 • P O Box 99090 Austin, Texas 78709-9090
512 899-4900 / Fax 512-899-4950

GIA
1892
INSURANCE
SINCE 1892

Hurricane Season begins June 1 and ends November 30 Although we are never ready to experience a major storm, we must all be prepared Please review your insurance policies and contact us if you have any questions or need to make any changes We ask that you do this as soon as possible When there is a named storm within specified coordinates, insurance companies will not write new nor increase current property coverage

Hurricane Ike taught us many lessons Most importantly that both windstorm and flood insurance is needed by everyone in our area and all residents and business owners should have a current inventory of their contents

As your insurance agent, we are committed to being here for you after a storm, any storm GIA has developed a full Catastrophe plan that begins with evacuation for our employees so that once the storm has passed, regardless of the conditions, we will be available to handle your claims

Based upon our Hurricane Ike evacuation experience, in the future we will close early to help our employees avoid major traffic congestion However, we will not close until we can no longer bind new insurance coverage or make changes due to the proximity of the hurricane

After the storm, depending on the damage, we will be taking claims from our Galveston or Friendswood offices If we suffer significant damage to our building, we will be operating out of a mobile office trailer Our trailer can accommodate all of our 38 associates and provide us full access to our customer and company files

Our mobile office will be set up in Galveston if possible If not, we plan to operate out of our Friendswood location Regardless of our location, we can be contacted at our regular phone numbers We will relocate our servers and phones to our backup server facility in College Station if needed Just as during Hurricane Ike, we will be available for you to contact us before, during & after the storm These procedures will apply to non-hurricane related catastrophes that affect our office and island as well

For all property claims, especially after a significant hurricane hits our area, please take the following steps

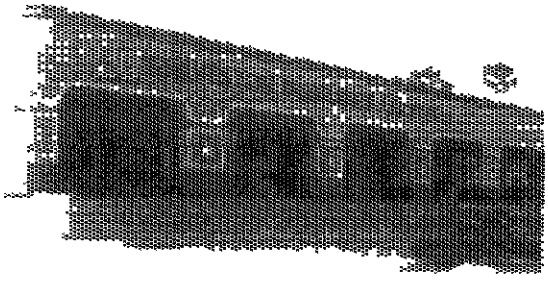
- Contact us direct to report your claim
- Make temporary repairs only and keep all receipts
- Take pictures of the damage
- Make sure you leave us your cell phone number if you leave a message
- You must obtain a WPI-8 form from your contractor for all structural repairs

We are proud to be your insurance agent and we know that the time you will count on us the most will be when you have a claim At GIA, we have worked hard to be here for you, *Before and After* the storm!

Sincerely,

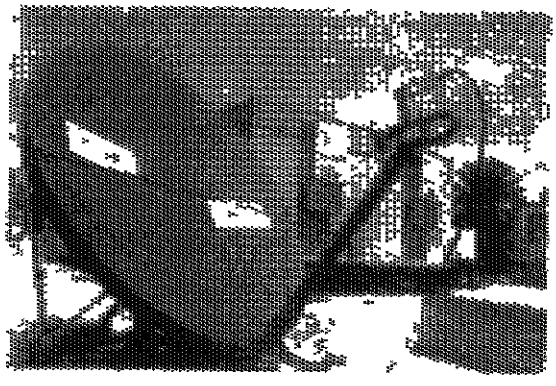
Garry P Kaufman, President

6025 Heards Lane, Galveston TX 77551 1102-B South Friendswood Dr, Friendswood TX 77546
P O Box 16767, Galveston TX 77552-6767
409-740-1251 • 800-364-6166 • 281-442-1892 • FAX 409-740-0513
www.gia-tx.com



6025 HEARDS LANE GALVESTON, TX 77551

1102-B SOUTH FRIENDSWOOD DR FRIENDSWOOD, TX



* Mobile Office Provided by Agility Recovery Solutions

*Agility Recovery Solutions products are available to our Commercial Clients.
Contact us about this valuable service today!

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SINCE 1893

Home * Business * Auto
Life * Health * Financial Products

PREMIUM ASSIGNMENT CORPORATION

PREMIUM FINANCE AGREEMENT

B072622

Texas
P O Box 3066 - 3522 Thomasville Rd
Tallahassee, FL 32315
Phone 850-907-5610

☐PERSONAL ☒COMMERCIAL ☒NEW ☐AGENCY RENEWAL ☐ADD'L PREMIUM

THIS AGREEMENT, made effective the 1 day of September 2011, between

WATERS EDGE BAR & BAIT
(Name of Borrower/Insured exactly as it appears in financed policies) SSN OR TAX # _____

ADDRESS **7827 2ND ST.**

CITY **HITCHCOCK** STATE **TX** ZIP **77563** PHONE # **(281) 705-6571**

hereinafter called the Borrower, and Premium Assignment Corporation, a Florida Corporation hereinafter called Lender, for the purpose of financing the purchase of insurance policies described in the Scheduled Policies of Insurance listed in page 3 to this Agreement.

TOTAL PRICE OF PREMIUMS	- CASH DOWN PAYMENT	= PRINCIPAL BALANCE OWED ON PREMIUMS	+ DOC STAMPS & SERVICE FEE (if applicable)	= TOTAL AMOUNT FINANCED	+ FINANCE CHARGE (Amount credit costs over term of loan)	= TOTAL OF PAYMENTS (Amount paid if all payments made as scheduled)	ANNUAL PERCENTAGE RATE
2,640.58	847.65	1,792.93	0.00	1,792.93	102.57	1,895.50	12.29

SELECT BILLING OPTION: ☒Payment Book ☐Monthly Invoice YOUR PAYMENT SCHEDULE WILL BE:	Amount of Monthly Payment	Number of Payments	Date First Payment is Due
Each monthly payment due on same day of each succeeding month until paid in full	189.55	10	10/1/2011

FOR VALUE RECEIVED, BORROWER PROMISES TO PAY to the order of Lender at the address given at the top of this page, the Total Amount Financed and all sums shown above, including interest at the Annual Percentage Rate and other charges as described hereinafter, pursuant to the terms stated below and in page 2 of this Agreement.

1. **SECURITY FOR PAYMENT:** To secure payment of all sums due under this Agreement, Borrower grants Lender a security interest in any unearned premiums or other sums which may become payable under the Scheduled Policies of Insurance shown on page 3

2. **LIMITED POWER OF ATTORNEY** BORROWER IRREVOCABLY APPOINTS LENDER AS ATTORNEY-IN-FACT TO CANCEL THE SCHEDULED POLICIES OF INSURANCE AFTER BORROWER DEFAULTS IN MAKING PAYMENTS UNDER THIS AGREEMENT

3. **NOTICE TO BORROWER.** (1) Do not sign this Agreement before you read it, or if it contains any blank space (other than as provided on the next page), (2) You are entitled to have and should retain a completely filled in copy of this Agreement, and (3) BY SIGNING BELOW BORROWER AGREES TO THE PROVISIONS ABOVE AND ALL OF THE TERMS WHICH APPEAR ON THE SECOND PAGE OF THIS AGREEMENT AND ACKNOWLEDGES RECEIPT OF COPIES OF PAGES 1, 2 AND 3 OF THIS AGREEMENT and (4) The undersigned Agency may receive compensation from Lender for aiding in the preparation of this Agreement and payment of the financed premiums

SIGNATURE OF ALL INSURED[S] NAMED IN POLICIES OR AUTHORIZED AGENT OF INSURED[S], AS PERMITTED BY LAW:

_____ X _____ _____ _____
Date Name and Title Date Name and Title

PRODUCER'S REPRESENTATIONS & WARRANTIES:

The undersigned Producer represents and warrants that: (A) The Cash Down Payment shown above has been paid by or on behalf of the Borrower (B) The Total Price of Premiums shown above has been or will be used to purchase insurance policies shown in the Scheduled Policies of Insurance on page 3 of this Agreement Any portion of the Total Price of Premiums received by Producer that is not used to purchase such insurance policies, as well as any refunds or credits on such policies, shall be promptly paid to Lender (C) To the best of the undersigned's knowledge and belief, Borrower is not subject to any bankruptcy or insolvency proceedings and Producer has no reason to believe that Borrower is insolvent (D) The Borrower's signature(s) is (are) genuine and authorized, or to the extent permitted by applicable law, the Producer has been authorized by Borrower to sign this Agreement on Borrower's behalf (E) Producer has delivered or will deliver a copy of this Agreement to Borrower **Producer agrees that the Representations & Warranties above, as well as those on page 3 of this Agreement, are a binding contract between Producer and Lender.**

PRODUCER / AGENCY

Name GALVESTON INS ASSOCIATES
Address PO BOX 16767
GALVESTON , TX 77552

8/8/2011
Date

PRODUCER'S SIGNATURE

PREMIUM ASSIGNMENT CORPORATION

IN CONSIDERATION of the payment by Lender of the Principal Balance Owed on Premiums shown on page 1 to the insurance companies named in the Scheduled Policies of Insurance shown on page 3 (or the agents of such companies) the Borrower agrees

4 ACCEPTANCE DATE This Agreement is binding upon its acceptance by Lender Acceptance shall occur upon payment of the Principal Balance Owed on Premiums to the insurance companies named in the Scheduled Policies of Insurance, or the agents of such companies

5 PAYMENTS Borrower shall make payments directly to Lender in the amounts and at the same time specified on page 1 of this Agreement Payments shall be made at Lender's address given at the top of page 1 or such other address as Lender may direct in writing Payments made to any other address, person, firm, corporation or insurance agency (including but not limited to the Producer) shall not constitute payment to Lender Payments received after cancellation of the Scheduled Policies of Insurance shall be credited to the unpaid balance due under this Agreement and shall not constitute reinstatement of the cancelled policies nor shall it constitute a waiver by Lender of any rights

6. LATE CHARGES If a payment is more than 10 days late, Borrower agrees to pay a late charge of 5% of each delinquent or unpaid installment, unless prohibited by applicable law

7 DEFAULT/CANCELLATION A default shall occur if Borrower fails to pay any sums required by this Agreement in a timely manner, including interest and Late Charges, or if Borrower fails to carry out any other obligations under this Agreement After default, any unpaid balance of the Total Amount Financed may become immediately due and payable in full at the option of Lender, and Lender may enforce its security interest and its rights under the Limited Power of Attorney Interest will continue to accrue on the unpaid balance at the Annual Percentage Rate or maximum rate allowed by applicable law, at the option of Lender, until all balances owed under this Agreement are paid Lender may request cancellation of all or any of the Scheduled Policies of Insurance at the earliest time after default permitted by applicable law

8. EXCESS INTEREST OR FEES It is the intent of the Lender that no interest, fee or charge in excess of that permitted by applicable law will be charged, taken or become payable under this Agreement In the event it is determined that Lender has taken, charged or accrued interest, fees or charges in excess of that permitted under law, such excess shall be returned to Borrower or credited against the sum due Lender hereunder

9 REFUNDS The Borrower will receive a refund of the finance charge if the account is prepaid in full prior to the last installment due date The refund shall be computed according to applicable law (Rule of 78's)

10 SHORTAGE OR OVERAGE OF RETURNED PREMIUM If Lender does not receive unearned premiums or other funds after cancellation or expiration of the Scheduled Policies of Insurance in an amount sufficient to pay the unpaid balance due under this Agreement, Borrower agrees to pay the deficiency to Lender on demand Interest shall accrue on the deficiency at the Annual Percentage Rate, or the maximum rate allowed by applicable law, at the option of Lender If the unearned premiums received by Lender are more than the amount due under this Agreement, the excess shall be returned to Borrower within the time allowed by applicable law Borrower has no right to any excess of less than the minimum amount required to be paid by applicable law

11. ATTORNEYS FEES/COURT COSTS Borrower agrees to pay all attorneys fees, expenses and costs incurred by Lender in collecting amounts due from Borrower under this Agreement, including attorneys fees incurred on appeal and in bankruptcy, unless prohibited or limited by applicable law

12. LENDER RELATIONSHIP Borrower acknowledges that (a) Lender is not an insurance agent nor an insurance company, (b) This Agreement is a financing agreement and not an insurance policy or guarantee of insurance coverage, (c) Lender has played no part in the selection or structuring of the financed insurance policies, (d) Lender has no obligation to request reinstatement of any insurance policies properly cancelled after a default under this Agreement, and (e) The decision of whether to reinstate insurance coverage is made solely by the insurance companies providing coverage, not Lender

13. ADDITIONAL PREMIUMS Lender may advance to Producer, as Borrower's agent, or to an insurance company any additional premiums that may become due, less normal down payment, adding the advanced amount, plus any finance charge, to Borrower's balance under this Agreement However, any additional premium which is owed to the insurance company(ies) named in the Scheduled Policies of Insurance as a result of any misclassification of risk which is not paid in full or financed in this Agreement may result in cancellation of the coverage by the insurance company for nonpayment of premium Lender's payment shall not be applied by the insurer to pay for any additional premium owed by Borrower as a result of any misclassification of risk

14. LENDER LIABILITY Lender is not responsible for any damages resulting from cancellation of the Scheduled Policies of Insurance by Lender, as long as the cancellation was done in accordance with applicable law Borrower shall be responsible for Lender's reasonable attorneys fees and expenses for any unsuccessful action filed by Borrower seeking damages for improper cancellation Lender's liability for breach of this Agreement shall be limited to the Principal Balance Financed under this Agreement, if permitted by applicable law

15. RETURNED CHECKS Borrower agrees to pay a returned check fee of $20, as allowed by applicable law, for each of Borrower's checks returned to Lender for insufficient funds or because the insured has no account in the payor bank

16 WARRANTIES OF BORROWER Borrower warrants that (a) Each of the Scheduled Policies of Insurance have been issued or a binder has been issued, (b) Borrower has not and will not assign or encumber any unearned premium of the Scheduled Policies of Insurance or grant a power of attorney to cancel the Scheduled Policies of Insurance to anyone other than Lender until all sums due under this Agreement are paid in full, (c) Lender may assign all its rights under this Agreement as allowed by applicable law (d) No proceeding in bankruptcy or insolvency has been instituted by or against Borrower or is contemplated by Borrower and (e) No insurance financed by this Agreement was purchased for personal, family or household purposes, unless so indicated on page 1

17. INTEREST CALCULATION Interest is computed on an annual basis of 12 months of 30 days on the balance of the policy Amount Financed, from the effective date of each insurance policy for which premiums are being advanced to the date when all sums due under this Agreement are paid

18. BLANK SPACES Borrower agrees that if any policy financed by this Agreement has not been issued at the time the Agreement is signed the names of the insurance companies issuing the financed policies the policy numbers and the due date of the first installment may be inserted in the Agreement after it is signed

19 GOVERNING LAW The Parties agree that the law of the state in which this Agreement is executed shall control the interpretation of the Agreement and the rights of the parties, unless the Agreement is executed in a state without premium finance laws in which case the law of the State of Florida shall govern

20. SAVINGS AND MERGER CLAUSE The Parties agree that if one or more portions of this Agreement are found to be invalid or unenforceable for any reason, the remaining portions shall remain fully enforceable The parties also agree that this Agreement contains the entire agreement between the parties regarding the subject matter herein and supersedes any prior discussions

21 FINANCING OPTION Entry into this financing arrangement is not a condition of obtaining insurance You may opt to pay the premium for such insurance without financing such premium, or to obtain financing from some other source if you choose

PREMIUM ASSIGNMENT CORPORATION

State TX

SCHEDULED POLICIES OF INSURANCE

V8(0)G8I2 09

WATERS EDGE BAR & BAIT
7827 2ND ST
HITCHCOCK, TX 77563
(281) 705-6571

B072622

GALVESTON INS ASSOCIATES 15335
PO BOX 16767
GALVESTON , TX 77552
(409) 740-1251

Premium	Down Payment	Unpaid Balance	Doc Stamps/Fees	Amt. Financed	Finance Charges	Total / Payments
2,640.58	847 65 *(32 10 %)*	1,792 93	0 00	1,792 93	102 57	1,895 50

Payment	Payments	Rate	First Due	Type	Status	Contract Type
189 55	10	12 29 %	10/1/2011	BOOK	NEW	COMMERCIAL

EFF DATE / EXP DATE		COMPANY / BROKER	CITY	ST	CO. #	TYPE / MEP	POLICY NO.	TOTAL PREMIUM
9/1/2011	CO	SCOTTSDALE INS CO	SCOTTSDALE	AZ	82802	PKG	TBD	2,267 00
9/1/2012	MGA	MYRON STEVES INS	HOUSTON	TX	61515	25 00 %		
							Taxes/Fees	373 58
							Total	2,640 58

Created By 15335DS Auth Code

ADDITIONAL REPRESENTATIONS & WARRANTIES OF PRODUCER

(F) All information provided above is complete and correct in all respects and the policies listed above are or will be in force on the stated Effective Date and delivered by Producer to the Borrower, except for assigned risk or residual market policies

(G) If any information listed above is or becomes incomplete or inaccurate, Producer shall promptly provide correct information to Lender

(H) The Producer is an authorized policy issuing agent of the companies issuing the policies listed above or is the authorized agent of the MGA or broker placing the coverage directly with the insuring company, **except those policies indicated with an "X"**

(I) None of the policies listed above are subject to reporting or retrospective rating provisions All policies subject to audit, minimum or fully earned premium provisions are indicated below

Policy No and Prefix No

(J) Except as indicated above, all Scheduled Policies of Insurance can be cancelled by Borrower or Lender on 10 days notice and the unearned premiums will be computed pro rata or on the standard short rate table

(K) If any Scheduled Policies of Insurance are subject to audit, Producer and Borrower have made good faith determination that the deposit, provisional or initial premiums are not less than the anticipated premiums to be earned for the full term of the policy(ies)

(L) Upon cancellation of any of the Scheduled Policies of Insurance, Producer shall remit to Lender the full amount of the unearned premium, including unearned commission, as well as any other payments or credits received by Producer, up to the unpaid balance due under this Agreement, within 15 days of receipt from the insuring company

DOCUMENTARY STAMPS REQUIRED BY LAW IF ANY ARE AFFIXED TO MONTHLY JOURNAL AND CANCELLED.

AGENDA ITEM #19

THE COUNTY OF GALVESTON

RUFUS G. CROWDER, CPPB
PURCHASING AGENT

COUNTY COURTHOUSE
722 Moody (21st Street)
Fifth (5th) Floor
GALVESTON, TEXAS 77550
(409) 770-5371

GWEN MCLAREN, CPPB
ASST PURCHASING AGENT

January 2, 2012

Honorable County Judge
And Commissioners' Court
County Courthouse
Galveston, Texas

Re Request authorization to issue an RFP to acquire Contract and Management Services for the IT Department

Gentlemen,

It is requested that the Commissioners' Court authorize the Purchasing Agent to issue an RFP to acquire contract and management services for the IT Department

Your consideration in this matter will be greatly appreciated

Respectfully submitted,

Rufus G Crowder, CPPB
Purchasing Agent
County of Galveston

AGENDA ITEM #20

Galveston County, Texas
Consideration of Budget Amendments for
Tuesday, January 10, 2012
As Submitted by the Budget Officer

Fiscal Year	Amendment #	Description
2012	12-021-0110-A	**Sheriff's Office** –Request to transfer budget from Self Insurance Reserve Fund to cover the replacement of wrecked Sheriff's patrol vehicle
2012	12-023-0110-C	**Engineering Department** – Request to transfer budget from Caroline Street to Texas City 6th Street Project for Change Order No 2 – R W Lucas Construction LLC Contract
2012	12-024-0110-D	**Engineering Department** – Request to budget revenue and expenditure for Change Order No 7 - Conrad Construction Co , Ltd (Add turn lane improvements - Melody Lane – FM 2351)
2012	12-025-0110-E	**Information Technology** –Request to transfer budget from Budgeted Fund Balance Reserves to Cellular Phone to cover cellular phone costs for new employee in Veterans Services Division

Approved by _____
Mel Trammell, Director of
Finance and Administration

Date 1/4/2012

AGENDA ITEM #20a

COUNTY OF GALVESTON

REQUEST FOR BUDGET AMENDMENT/TRANSFER

Department	Sheriff's Office	Amendment No 12 021 0110-A
Date Submitted	December 20 2011	(Assigned by Budget Office)

COMMISSIONER'S COURT ACTION

Please complete the following form in its entirety and submit to the Budget Office at least eleven (11) days prior to the first regularly scheduled Tuesday Commissioners Court meeting date each month Emergency amendments will be processed at the earliest available Court meeting date If information on this form is incomplete, the amendment will be returned to your office for completion It is suggested that the department requesting the amendment be present on the date of its submittal to the Court for action

THIS PORTION MUST BE FILLED OUT

GENERAL EXPLANATION

Request to transfer budget from the Self Insurance Reserve Fund to purchase replacement vehicle which was totaled in car wreck

This budget amendment does not increase the budget for FY 2012

Transfer FROM	Account Description	Amount Annualized	Auditor Use Only Acct Balance Sufficient? (Y/N)
Acct No Self Insurance Reserve Fund 6130-151431-5491507	Line Item Claims Sheriff Autos	$ 25,000	
TOTAL Transfer Amount		$ 25,000	

Transfer TO	Account Description	Amount Annualized	Auditor Use Only Acct Balance Sufficient? (Y/N)
Acct No General Fund 1101-211101-5742000	Line Item Capital Outlay - Vehicles	$ 25,000	
TOTAL Transfer Amount		$ 25,000	

ADDITIONAL COMMENTS

This is a budget request from the Sheriff's Department to replace a vehicle (Unit #3814) which was totaled in a collision

The vehicle which needs to be replaced is a 2008 Crown Victoria Police Interceptor

	Claims Sheriff Vehicles
Original Adopted 2012 budget	$ 75,000
Claims Sheriffs Vehicles - Unit #3109	$ (5,750)
Claims - Sheriffs Vehicles - Unit #3814	$ (25,000)
Remaining Budget in Account	$ 44,250

1/3/12

Departmental Authorization Date

N/A Date

Human Resources Department

1/3/2012

Budget Office Authorization Date

AUDITOR'S REVIEW

This budget amendment has been reviewed for validity of accounts and sufficiency of account balances used for budget transfer

Reviewed by _____ Date _____

Auditor s Remarks

COMMISSIONERS COURT APPROVAL

Date Submitted _____ Date Approved 1/10/12

AGENDA ITEM #20c

COUNTY OF GALVESTON

REQUEST FOR BUDGET AMENDMENT/TRANSFER

Department	Engineering Department	Amendment No 12-023-0110-C
Date Submitted	December 21, 2011	(Assigned by Budget Office)

COMMISSIONER'S COURT ACTION

Please complete the following form in its entirety and submit to the Budget Office at least eleven (11) days prior to the first regularly scheduled Tuesday Commissioners Court meeting date each month Emergency amendments will be processed at the earliest available Court meeting date If information on this form is incomplete, the amendment will be returned to your office for completion It is suggested that the department requesting the amendment be present on the date of its submittal to the Court for action

THIS PORTION MUST BE FILLED OUT

GENERAL EXPLANATION

Budget request to transfer funds from Caroline Street to 6th Street in order to cover Change Order #2 to the R W Construction LLC contract

This budget amendment does not increase the budget for FY 2012

Transfer FROM	Account Description	Amount Annualized	*Auditor Use Only* Acct Balance Sufficient? (Y/N)
Acct No Unlimited Tax Road Bonds, Series 2009A 3312-312112-5731140	Line Item Caroline Street	155,088	
TOTAL - Transfer Amount		$ 155,088	

Transfer TO	Account Description	Amount Annualized	*Auditor Use Only* Acct Balance Sufficient? (Y/N)
Acct No Unlimited Tax Road Bonds, Series 2009A 3312-312111-5731173	Line Item 6th Street	155,088	
TOTAL - Transfer Amount		$ 155,088	

ADDITIONAL COMMENTS

This budget request is to fund the R W Construction LLC contract - Change Order 2 for the 6th Street project in Texas City which is to be submitted to the Commissioners Court for approval on January 10, 2012

	Caroline Street	6th Street, Texas City
Beginning Budget as of 10/01/2011	$187,265	$3,005,316
Expenditures and encumbrances to date	2,642	3,005,316
Change Order No 2	-155,088	155,088
Remaining Budget upon approval	$29,535	$155,088

Departmental Authorization — Date 1-3-12

N/A — Date

Human Resources Department

Budget Office Authorization — Date 1/3/2012

AUDITOR'S REVIEW

This budget amendment has been reviewed for validity of accounts and sufficiency of account balances used for budget transfer

Reviewed by _____ Date _____

Auditor's Remarks

COMMISSIONERS COURT APPROVAL

Date Submitted _____ Date Approved 1/10/12

AGENDA ITEM #20d

COUNTY OF GALVESTON

REQUEST FOR BUDGET AMENDMENT/TRANSFER

Department	Engineering	Amendment No 12-024-0110-D
Date Submitted	December 20, 2011	(Assigned by Budget Office)

COMMISSIONER'S COURT ACTION

Please complete the following form in its entirety and submit to the Budget Office at least eleven (11) days prior to the first regularly scheduled Tuesday Commissioners Court meeting date each month Emergency amendments will be processed at the earliest available Court meeting date If information on this form is incomplete, the amendment will be returned to your office for completion It is suggested that the department requesting the amendment be present on the date of its submittal to the Court for action

THIS PORTION MUST BE FILLED OUT

GENERAL EXPLANATION

Request to budget revenue and expenditure for Change Order No 7 - Conrad Construction Co Ltd which adds turn lane improvements on the Melody Lane project - FM2351

This budget amendment does increase the budget for FY 2012

Transfer FROM	Account Description	Amount Annualized	*Auditor Use Only* Acct Balance Sufficient? (Y/N)
Acct No Unlimited Tax Road Bonds, Series 2009A 3312-000000-4900018	Line Item Proceeds for the Melody Lane Project	17,456	___
TOTAL - Transfer Amount		$17,456	

Transfer TO	Account Description	Amount Annualized	*Auditor Use Only* Acct Balance Sufficient? (Y/N)
Acct No Unlimited Tax Road Bonds, Series 2009A 3312-312111-5731128	Line Item Melody Lane	17,456	___
TOTAL - Transfer Amount		$17,456	

ADDITIONAL COMMENTS

This budget request is for the Change Order No 7 - Conrad Construction Co , Ltd which includes the turn lane improvements on the Melody Lane project - FM 2351 is to be presented to Commissioners Court for approval on January 10, 2012 A check has been received for the turn lane improvements in the amount of $17,455 25

Melody Lane Project	
Beginning Budget as of 10/01/2011	$1,774,141
2012 Expenditures and Encumbrances to-date	$1,631,969
Change Order No 7 Budget Amendment	$17,456
Remaining Budget after approval	$159,628

Mike Fitzgerald 1-3-12
Departmental Authorization Date

N/A Date
Human Resources Department

Budget Office Authorization 1/3/2012 Date

AUDITOR'S REVIEW

This budget amendment has been reviewed for validity of accounts and sufficiency of account balances used for budget transfer

Reviewed by _____ Date _____

Auditor's Remarks

COMMISSIONERS COURT APPROVAL

Date Submitted _____ Date Approved 1/10/12

AGENDA

ITEM

#20e

COUNTY OF GALVESTON

REQUEST FOR BUDGET AMENDMENT/TRANSFER

Department	Information Technology	Amendment No 12-025-0110-E
Date Submitted	January 4, 2012	(Assigned by Budget Office)

COMMISSIONER'S COURT ACTION

Please complete the following form in its entirety and submit to the Budget Office at least eleven (11) days prior to the first regularly scheduled Tuesday Commissioners Court meeting date each month Emergency amendments will be processed at the earliest available Court meeting date If information on this form is incomplete, the amendment will be returned to your office for completion It is suggested that the department requesting the amendment be present on the date of its submittal to the Court for action

THIS PORTION MUST BE FILLED OUT

GENERAL EXPLANATION

Request to budget cellular phone for new employee in the Veterans Services Division/Community Services Department

This budget amendment does increase the budget for FY 2012

Transfer FROM	Account Description	Amount Annualized	*Auditor Use Only* Acct Balance Sufficient? (Y/N)
Acct No General Fund 1101-920180-5930010	Line Item Budgeted Fund Balance	1,700	
TOTAL - Transfer Amount		$ 1,700	

Transfer TO	Account Description	Amount Annualized	*Auditor Use Only* Acct Balance Sufficient? (Y/N)
Acct No General Fund 1101-159100-5492111	Line Item Phone Cellular	1,700	
TOTAL - Transfer Amount		$ 1,700	

ADDITIONAL COMMENTS

This request from Information Technology Department is for additional budget in the line item - Phone Cellular for the following expenditures for a new employee in the Veterans Services Division / Community Services Department

Cost of Black Berry	$200
Monthly Cost	$1,000
Air Card	$500
Total Expenditures	$1,700

Upon approval, the remaining budget in the Budgeted Fund Balance Reserves is $20,031,500

Departmental Authorization — Date

N/A — Date

Human Resources Department

Budget Office Authorization — Date 1/4/2012

AUDITOR'S REVIEW

This budget amendment has been reviewed for validity of accounts and sufficiency of account balances used for budget transfer

Reviewed by _____ Date _____

Auditor's Remarks

COMMISSIONERS COURT APPROVAL

Date Submitted _____ Date Approved 1/10/12

Information Technology

EQUIPMENT REQUEST FORM

Email to Shelle Fite or Fax: 409-770-6214

Name: F. W. Furleigh **Date:** 01/03/2012

Department: Veteran Services **Location:** 600 59th St, Rm 4300

Title: Veteran Service Officer

STANDARD SETUP REQUEST? (CPU, Monitor, Keyboard, Mouse) YES NO

EQUIPMENT REQUESTED: (IF other than standard setup)
Blackberry Cellular Phone and Laptop Air-Card

JUSTIFICATION: (Detailed Business Reason for request)
To enable the Assistant County Veteran Service Officer to conduct business outside of the office in Homes, Nursing Homes and during various programs such as the monthly visit to the Crystal Beach Annex, Legal Advise Clinics, and other Outreach programs.

SUBMITTED BY: F W. Furleigh DATE 01/03/2012

DEPT HEAD NAME F W Furleigh DATE 01/03/2012

DEPT HEAD SIGNATURE: F W. Furleigh DATE 01/03/2012

--Forward to Information Technology after Department Head approval—

Please be specific with justification, the more detail the better we will be able to determine the appropriate equipment for your needs

---Below is for IT use Only---

User ⇨ Coordinator ⇨ IT Admin ⇨ IT Management

APPROVED _____ DENIED _____ SIGNATURE_____ DATE_____

EQUIPMENT CHOSEN _____

Comments (Add another sheet if needed)

Approval 29725 Details

First Name *	Jeffrey
Last Name *	Gottlob
Organization	Veterans
Location	Justice Center Courts
Department Section	Veterans
Phone Number	4097662475
Voice Mail	☑
Start Date	10/27/2011 7:00 AM
Replacing ex employee?	☐
Ex Employee	
Profile Match	
Email	☑
Internet	☑
Citrix	☐
Netmotion	☐
JIMS	☐
CMS	☐
IX03	☐
JP	☐
Accurint	☐
IAMS	☐
ODYSSEY	☐
OSSI	☐
TLETS	☐
IFAS	☑
TAXC	☐
Computer	☑
Non Standard Equpment	I already have a laptop, docking station, and portable printer which were originally assigned to my volunteer, Danny Richards He is no longer with the County The full computer name is
Computer Justification	Mr Gottlob will be a Veteran Benefits Counselor He will need to access to the internet and my 'H' and 'W' drives
Priority	Priority 2 (7-9 mi as requested)
Type	Service Request
Early Request-Prior Start Date	☐
Early Req Just	
Mobile Device	Blackberry
Air Card	☑
Justification for Communications Device	

	A large portion of his Veteran/Widow contacts will be through the out-reach programs at special events at remote locations and in Homes and Nursing Homes
Desk Phone	☐
Additional Instruction	His Outlook Calendar will have to be shared with Terri Phillips and me, and he will need Voice Mail set on the above telephone

Submit | Submit Later | Delete | Cancel

Approval 31019 Details

Customer	Furleigh Frank
Telephone	(409) 766-2448
Organization	Veterans
Location	Justice Center Courts
Air Card	☑
Computer	☐ (Standard setup w/CPU, Monitor, Mouse, Keyboard)
Non Standard Computer Equipment	☐ (If selected please describe in detail below)
Non Standard Equpment	Please list any non-standard computer equipment requested here
Mobile Device	☐ (If selected, choose a mobile device type below)
Mobile Device Type	
Justification for Equipment (Required)	This air card is for the Laptop/Desktop computer used by Mr Gottlob, the assistant Veteran Service Officer He will be conducting various outreach efforts at Nursing Homes and other

Submit | Submit Later | Delete | Cancel

AGENDA ITEM #21

Chapman, Brandy

From: Simsen, John
Sent: Monday, January 09, 2012 9 25 AM
To. Chapman, Brandy
Subject. FW Section 2

See attached replacement section 2 They just eliminated Page 11, and intend just to use the signature page in Section 1

I have two large originals I will deliver before court tomorrow They will be identical to what you have, but also include copies of the actual grant application (big), for your complete file

From: Kathy Hopkins [mailto:Kathy.Hopkins@twdb.state.tx.us]
Sent: Monday, January 09, 2012 8:56 AM
To: Simsen, John
Subject: Section 2

John,

Below is the updated Section 2 (10 pages). Please let me know if you need any additional information.

Thanks,
Kathy H.

Texas Water Development Board

P O Box 13231, 1700 N Congress Ave
Austin, TX 78711-3231, www twdb state tx us
Phone (512) 463-7847, Fax (512) 475-2053

January 6, 2012

John Simsen
Emergency Management Coordinator
Galveston County
1353 FM 646, Suite 201
Dickinson, Texas 77539

RE FEMA Severe Repetitive Loss (SRL) Grant Contract between the Texas Water Development Board (TWDB) and Galveston County (County), TWDB Contract No 1200011417

Dear Mr Simsen.

Please find enclosed two originals of the FEMA SRL Grant Contract between the TWDB and the County. The deadline for execution of this contract is **January 25, 2012**. The total cost of this project is $34,475,996 76 TWDB funding will not exceed the lesser of $31,028,396 97 or 90% of the project cost.

Please obtain the proper signature for each copy of the contract and return to the attention of Contract Administration at the address shown above within 30 days from receipt of this letter The TWDB will execute and sign the contracts upon their return and deliver one copy to you for your records

In addition, a Payee Application Form and Vendor Direct Deposit Authorization Form are enclosed for your information and use In order to expedite payment, TWDB encourages all grant recipients to use Direct Deposit.

Please note SUBCONTRACTOR expenses cannot be reimbursed until the SUBCONTRACTOR templates have been approved by the TWDB

If you have any questions concerning the contract, please contact Kathy Hopkins, the TWDB's designated Contract Manager for this project, at (512) 463-6198

Sincerely,

Melanie Callahan

Melanie Callahan
Executive Administrator

Enclosures

c Kathy Hopkins, TWDB

Our Mission

To provide leadership, planning, financial assistance, information, and education for the conservation and responsible development of water for Texas

Board Members

Edward G Vaughan, Chairman
Joe M Crutcher, Vice Chairman
Thomas Weir Labatt III, Member
Lewis H McMahan, Member
Billy R Bradford Jr , Member
Monte Cluck, Member

Melanie Callahan, Executive Administrator

S U S A N

C O M B S

Application for Texas Identification Number

TEXAS COMPTROLLER *of* PUBLIC ACCOUNTS

Fiscal Management
Austin, TX 78774-0100

Who Must Submit This Application -

This application must be submitted by every person (sole owner, individual recipient, partnership, corporation or other organization) who intends to bill agencies of the state government for goods, services provided, refunds, public assistance, etc The Texas Identification Number (TIN) will be required on all maintenance submitted by state agencies The use of this number on all billings will reduce the time required to process billings to the State of Texas.

Note: To expedite processing of this application, please return the completed application to the state agency with which you are conducting business. It is not necessary for the payee to sign or complete this form. The state agency representative may complete the form for the payee.

For Assistance -

For assistance in completing this application, please call the Texas Comptroller's office at (800) 531-5441, ext. 6-8138 The Austin number is (512) 936-8138

Notice to State Agencies -

When this form is used to set up additional mail codes, Sections 1, 2 and 5 must be completed State agencies may refer to the Texas Identification Number System (TINS) Guide at https://fmx.cpa.state.tx.us/fmx/pubs/tins/tinsguide for additional information

General Instructions -

- Do not use dashes when entering Social Security, Employer Identification or Comptroller's assigned numbers
- Disclosure of your Social Security number is required This disclosure requirement has been adopted under the Federal Privacy Act of 1974 (5 U S C.A sec. 552a(note)(West 1977), the Tax Reform Act of 1976 (42 U S C.A sec 405(c)(2)(C) (West 1992), TEX GOV'T CODE ANN sec. 403.055 (Vernon 2005) and TEX GOV'T CODE ANN sec. 403 056 (Vernon 2005) Your Social Security number will be used to help the Texas Comptroller of Public Accounts administer the state's tax laws and for other purposes See Op Tex Att'y Gen No H-1255 (1978)

Specific Instructions -

Section 1 - Texas Identification Number

EIN For all ownership codes other than Individual Recipient listed in Section 3, enter a 9-digit Employer Identification Number (EIN) issued by the Internal Revenue Service

SSN For Individual Recipient or Sole Owner without an EIN, enter your 9-digit Social Security number (SSN) issued by the Social Security Administration

Comptroller Assigned Number FOR STATE AGENCY USE ONLY A Comptroller Assigned Number is an ID number that is given to a state agency that needs to pay either a foreign entity or a foreign individual who does not have an EIN or SSN

Are you currently reporting any Texas tax to the Comptroller's office such as sales tax or franchise tax? If "YES," enter Texas Taxpayer Number

Section 2 - Payee Information

Items 4 through 8 - Enter the complete name and mailing address where you want payments to be received Names of individuals must be entered first name first Each line cannot exceed 50 characters including spaces If the name is more than 50 characters, continue the name in Item 5 and begin the address in Item 6

Item 9 - Enter the city, state and ZIP Code

Item 10 - Enter payee telephone number

SIC code, Security type code and Zone code FOR STATE AGENCY USE ONLY

Section 3 - Ownership Codes

Item 11 - Check the box next to the appropriate ownership code and enter additional information as requested Please check only one box in this section The Secretary of State's office may be contacted at (512) 463-5555 for information regarding Texas file numbers

Section 4 - Payment Assignment

Item 12 - Use when one payee is assigning payment to another payee When setting up an assignment payment, fill out this section completely and include a copy of the assignment agreement between the assignee and the assignor

Section 5 - Comments and Identification

Item 13 - Enter any additional information that may be helpful in processing this application Items 14 and 15 are for identification purposes Always complete the identification section, including comments and authorized signature

Under Ch 559 Government Code, you are entitled to review, request and correct information we have on file about you, with limited exceptions in accordance with Ch 552 Government Code To request information for review or to request error correction, contact us at the address or phone numbers listed on this form

AP-152
(Rev 4-11/14)

Application for Texas Identification Number

• *See instructions on back*

For Comptroller's use only

1 Is this a new account? ☐ YES Mail Code 000 Complete Sections 1 - 5 ☐ NO Enter Mail Code ____ Complete Sections 1, 2 & 5 Agency number ____

Section 1

2 **Texas Identification Number (TIN)** - Indicate the type of number you are providing to be used for your TIN

☐ 1 - Employer Identification Number (EIN)

☐ 2 - Social Security number (SSN) Enter the number indicated ☐ ____ ☐

☐ 3 - Comptroller's assigned number (FOR STATE AGENCY USE ONLY)

3 Are you currently reporting any Texas tax to the Comptroller's office such as sales tax or franchise tax?

☐ YES ☐ NO If "YES," enter Texas Taxpayer Number ____

Section 2

Payee Information ***(Please type or print)***

4 Name of payee (Individual or business to be paid)

5 Mailing address where you want to receive payments

6 *(Optional)*

7 *(Optional)*

8 *(Optional)*

9 City State ZIP Code ____ – ____

10 Payee telephone number *(Area code and number)* ( ) – SIC code Security type code (0, 1, 2) Zone code

Section 3

11 **Ownership Codes** - Check only one code by the appropriate ownership type that applies to you or your business

☐ **I** - Individual Recipient (not owning a business)

☐ **S** - Sole Ownership (Individual owning a business) If checked, enter the owner's name and Social Security number (SSN)

Owner's name ____

SSN 2 ____ ☐

☐ **P** - Partnership If checked, enter two partner's names and Social Security numbers (SSN) If a partner is a corporation, use the corporation's Employer Identification Number (EIN)

Name ____

SSN/EIN ☐ ____ ☐

Name ____

SSN/EIN ☐ ____ ☐

☐ **N** - Other If checked, explain ____

☐ **L** - Texas Limited Partnership If checked, enter the Texas File Number ____

☐ **T** - Texas Corporation If checked, enter the Texas File Number ____

☐ **A** - Professional Association If checked, enter the Texas File Number ____

☐ **C** - Professional Corporation If checked, enter the Texas File Number ____

☐ **O** - Out-of-State Corporation

☐ **G** - Governmental Entity

☐ **U** - State agency / University

☐ **F** - Financial Institution

☐ **R** - Foreign (out of U S A)

Section 4

12 Payment Assignment? ☐ YES ☐ NO *Note A copy of the assignment agreement between payees must be attached*

Assignee name ____

Assignee TIN ____ Assignment date ____

Section 5

13 Comments ____

14 sign here Authorized signature *(Applicant or authorized agent)* ____ Date ____

15 Agency name ____ Prepared by ____ Phone (Area code and number) ____

Payment Request Checklist

This completed checklist must be submitted with each payment request

Requests for payment must include the following:

☐	TWDB Contract Number	
☐	Progress Report	
☐	**Contractor's** Invoice Number (Attach Invoice)	
☐	Beginning (date) to ending (date) for this billing period	
☐	Total expenses shown on invoice for this billing period including in-kind	
☐	Total amount of in-kind services	
☐	Less Total Local Share for this billing period (if applicable)	
☐	Total BOARD's share of the total study costs for this billing period	$ -
☐	Amount of retainage to be withheld by the BOARD for this billing period;	
☐	Total costs to be reimbursed by the BOARD for this billing period	$ -

Do the services performed for this reimbursement request cross State Fiscal Years?
(This does not pertain to political subdivisions)

☐ **No**

☐ **Yes - If Yes, expenses must be broken down by Fiscal Year for Professional Services Contracts (NOTE: State Fiscal Year begins September 1st and ends August 31st)**

☐ Spreadsheet posting all expenses by task and expense category for all Contractor and Subcontractor costs

☐ Report total for Contractor Salaries, Fringe, Overhead, Profit and Other Expenses

☐ Backup documentation for Contractor's expenses (receipts required)

☐ Copies of all Subcontractor(s) invoices

☐ Backup documentation for all Subcontractor(s) invoiced expenses

☐ Proof of payment to Subcontractor(s)

Has any individual Task or Expense categories exceeded the original category budget by more than 35% of the total amount authorized by this Contract?

☐ Yes - please include request for budget amendment along with budget changes

☐ No

Have all contracts or agreements between the CONTRACTOR and subcontractor(s), and between such subcontractor(s) and any other subcontractor(s), for this CONTRACT been approved by TWDB?

☐ Yes

☐ No - please attach a copy of each subcontract agreement

Name and Title, Address, Phone Number and Email Address of person who prepared this request

Name and Title _____

Address _____

City, State, ZIP _____

Phone Number _____

Email Address _____

Certification:

Expenses submitted for this billing period are a true and correct representation of amounts paid for work performed directly related to this contract.

CONTRACTOR(S) Authorized Representative

_____
Signature Date

Printed Name and Title of Above Authorized Signature

If you need assistance with this form, please contact your TWDB Contract Manager or TWDB Contract Payments at (512) 463-1793

Revised 04/14/10

IN-KIND SERVICES

TWDB CONTRACT NO._____

Expenses were performed from _____ to _____

Description of services performed: _____

_____

Employee Classification	Rate/Hr	No of Hours	Total Cost
Engineer	$		$
Clerical	$		$
TOTAL	$_____		$_____

Expenses	Rate per Copy, Call, etc	Total Cost
Reproduction		$
Communications		$
Tech/Computer Services		$
Travel (attach expense report & receipts)		$
TOTAL		$_____

Break down all In-Kind Expenses in the Task and Expense Budgets

Task 1	
Task 2	
Task 3	
Task 4	
Task 5	
Task 6	
Total	

Salaries and Wages	
Fringe	
Travel	
Subcontract Services	
Tech/Computer Services	
Communications	
Reproduction	
Overhead	
Profit	
Administration	
Total	

Attach a brief progress report of what work was performed

Certification,
Expenses submitted for this billing period are a true and correct representation of amounts paid for work performed directly related to this contract.

_____ _____

CONTRACTOR(S) authorized representative Date

74 176 (Rev 1 11/10)

Vendor Direct Deposit / Advance Payment Notification Authorization

This form may be used by vendors or individual recipients
- *to receive payments from the state of Texas by direct deposit*
- *to change or cancel existing direct deposit information*

For Comptroller's Use Only

For State Agency Use
- ☐ **Advance Payment Notification**
- ☐ **International Payments Verification**
- ☐ **Interagency Transfer**

Transaction Type

SECTION 1

- ☐ New setup *(Sections 2 3 4 and 5 - Section 6 is optional)*
- ☐ Change financial institution *(Sections 2 3 4 and 5 - Section 6 is optional)*
- ☐ Change account number *(Sections 2 3 4 and 5 - Section 6 is optional)*
- ☐ Change account type *(Sections 2 3 4 and 5 - Section 6 is optional)*
- ☐ Cancellation *(Sections 2 and 4 - Sections 7 and 8 for state agency use)*

Payee Identification

SECTION 2

Social Security Number (SSN) or Employer Identification Number (EIN)	Mail code *(If not known, leave blank)*
Payee name *(Business/Individual)*	Phone number ( ) ext
Mailing address	City / State / ZIP code

Financial Institution *(Completion by financial institution is recommended)*

SECTION 3

Financial institution name	City	State
Routing transit number *(9 digits)*	Customer account number *(maximum 17 characters)*	Type of account ☐ Checking ☐ Savings
Financial representative name *(optional)*	Title *(optional)*	
Financial representative signature *(optional)*	Phone number *(optional)* ( ) ext	Date *(optional)*

Authorization for Setup, Changes or Cancellation *(required)*

SECTION 4

I authorize the Texas Comptroller of Public Accounts to deposit my payments from the state of Texas to my financial institution electronically
I understand that the Texas Comptroller of Public Accounts will reverse any payments made to my account in error

I further understand that the Texas Comptroller of Public Accounts will comply at all times with the National Automated Clearing House Association's rules *(For further information on these rules, please contact your financial institution)*

sign here ▶ Authorized signature	Printed name	Date

International Payments Verification *(required)*

SEC 5

Will these payments be forwarded to a financial institution outside the United States? ☐ YES ☐ NO

Authorization for Advance Payment Notification Setup *(optional)*

SECTION 6

I authorize the Texas Comptroller of Public Accounts to send an e-mail notification one business day prior to the payment posting to my account
I understand that notifications may include payment information that is considered confidential and therefore exempt from public disclosure

Contact name *(Please print)*	Contact phone number ( ) ext
E-mail address	

Cancellation by Agency *(for state agency use)*

SEC 7

Reason	Date

Authorized Signature *(for state agency use)*

SECTION 8

sign here ▶ Signature	Date
Phone number ( ) ext	Agency number **580**
Agency name **Texas Water Development Board**	

Please return your completed form to

Texas Water Development Board
Accounts Payable/Direct Deposit Program
1700 N. Congress Avenue, Suite 524
Austin, TX 78701-1436

Phone (512) 475-2079

Instructions for Vendor Direct Deposit / Advance Payment Notification Authorization

Under Ch 559, Government Code, you are entitled to review, request and correct information we have on file about you, with limited exception in accordance with Ch 552 Government Code To request information for review or to request error correction, contact us at (800) 531-5441 ext 6-6057

Section 1 Select the appropriate transaction type(s)

Section 2 Provide the Social Security Number or Employer Identification Number (EIN)

Section 3 Completion by financial institution is recommended
Important Your direct deposit account information may be different from the account information printed on your checks It is recommended that you contact your financial institution to confirm your direct deposit account information
Note A prenote test will be sent to your financial institution for the account information entered into the Comptroller's system The prenote test is for a period of six banking days, and it is sent to your financial institution to verify your account information If no further action is required by your financial institution, your direct deposit instructions will become effective when the six banking day prenote time frame has expired

Section 4 Must be completed in its entirety, and no alterations to the authorization language will be accepted

Section 5 **If you receive state payments by direct deposit which are forwarded from a United States financial institution to a financial institution outside the United States, please contact the Texas Comptroller of Public Accounts at (512) 936-8138 and FAX your form to (512) 475-5424 or send to tins.mail@cpa.state.tx.us.**

Section 6 Provide the contact name, phone number and e-mail address to which payment notifications are to be sent Notifications are sent for direct deposit payments only, and e-mails are sent one business day prior to the deposit

Submit the completed form to the state agency with which you are conducting business. If the agency is unknown, please call (512) 936-8138 to obtain contact information.

For State Agency Use

Section 7 Provide reason for cancellation request

Section 8 Must be completed if submitting form to the Comptroller's office for international payment verification, advance payment notification or interagency transfer processing Indicate requested action using the "For State Agency Use" box located at the top of the form

If an international payments verification, advance payment notification or interagency transfer is requested by the agency, select the desired action(s) in the box on the upper right corner of the form and submit the form to the Comptroller's office State agencies should complete the direct deposit setup or change prior to submitting the form to the Comptroller's office

SUBCONTRACT APPROVAL CHECKLIST

☐ **CONTRACT DATES** (corresponds with the dates of the Prime Agreement)

☐ **SUBCONTRACT AMOUNT** (corresponds with the amount listed in the subcontract category of the Prime Agreement)

☐ **TERMS OF REIMBURSEMENT** (no lump sum payments; the Board does not reimbursement "handling costs" (mark-ups) on any expenses; and all travel is reimbursed at the current rate for state employees which can be found at:
http.//window state tx.us/comptrol/texastra html

☐ **SCOPE OF WORK** (corresponds with the scope of the Prime Agreement)

☐ **TASK BUDGET**

☐ **EXPENSE BUDGET (approvable without but must be received prior to first reimbursement)**

☐ **SUBCONTRACT IS SIGNED (approvable without but must be received prior to first reimbursement)**

☐ **STATE AUDITOR CLAUSE**

By executing this Contract, the SUBCONTRACTOR accepts the authority of the State Auditor's Office, under direction of the legislative audit committee, to conduct audits and investigations in connection with any and all state funds received pursuant to this contract. The SUBCONTRACTOR shall comply with and cooperate in any such investigation or audit. The SUBCONTRACTOR agrees to provide the State Auditor with access to any information the State Auditor considers relevant to the investigation or audit. The SUBCONTRACTOR also agrees to include a provision in any subcontract related to this contract that requires the SUBCONTRACTOR to submit to audits and investigation by the State Auditor's Office in connection with any and all state funds received pursuant to the subcontract.

☐ **FINANCIAL RECORDS**

The SUBCONTRACTOR (S) and its contracted parties shall maintain satisfactory financial accounting documents and records, including copies of invoices and receipts, and shall make them available for examination and audit by the EXECUTIVE ADMINISTRATOR of the BOARD Accounting by the SUBCONTRACTOR (S) and its contracted parties shall be in a manner consistent with generally accepted accounting principles.

☐ **OWNERSHIP**

The BOARD shall have unlimited rights to technical or other data resulting directly from the performance of services under this CONTRACT It is agreed that all reports, drafts of reports, or other material, data, drawings, computer programs and codes associated with this CONTRACT and developed by the SUBCONTRACTOR (S) or its contracted parties pursuant to this CONTRACT shall become the joint property of the SUBCONTRACTOR (S) and the BOARD These materials shall not be copyrighted or patented by the SUBCONTRACTOR (S) or by any consultants involved in this CONTRACT unless the EXECUTIVE ADMINISTRATOR of the BOARD approves in writing the right to establish copyright or patent; provided, however, that copyrighting or patenting by the SUBCONTRACTOR (S) or its SUB-SUBCONTRACTORs will in no way limit the BOARD's access to or right to request and receive or distribute data and information obtained or developed pursuant to this CONTRACT. Any material subject to a BOARD copyright and produced by the SUBCONTRACTOR (S) or BOARD pursuant to this CONTRACT may be printed by the SUBCONTRACTOR (S) or the BOARD at their own cost and distributed by either at their discretion The SUBCONTRACTOR (S) may otherwise utilize such material provided under this CONTRACT as it deems necessary and appropriate, including the right to publish and distribute the materials or any parts thereof under its own name, provided that any BOARD copyright is appropriately noted on the printed materials

The SUBCONTRACTOR (S) and its contracted parties agree to acknowledge the BOARD in any news releases or other publications relating to the work performed under this CONTRACT.

☐ **NO DEBT AGAINST THE STATE**

This SUBCONTRACT and Agreement shall not be construed as creating any debt by or on behalf of the State of Texas and the BOARD, and all obligations of the State of Texas are subject to the availability of funds. To the extent the performance of this SUBCONTRACT transcends the biennium in which this SUBCONTRACT is entered into, this SUBCONTRACT is specifically contingent upon the continued authority of the BOARD and appropriations therefore.

☐ **LICENSES, PERMIT, AND INSURANCE**

For the purpose of this CONTRACT, the SUBCONTRACTOR (S) will be considered an independent SUBCONTRACTOR and therefore solely responsible for liability resulting from negligent acts or omissions The SUBCONTRACTOR (S) shall obtain all necessary insurance, in the judgment of the SUBCONTRACTOR (S), to protect themselves, the CONTRACTOR, the BOARD, and employees and officials of the BOARD from liability arising out of this CONTRACT The SUBCONTRACTOR (S) shall indemnify and hold the BOARD and the State of Texas harmless, to the extent the SUBCONTRACTOR (S) may do so in accordance with state law, from any and all losses, damages, liability, or claims therefore, on account of personal injury, death, or property damage of any nature whatsoever caused by the SUBCONTRACTOR (S), arising out of the activities under this CONTRACT

The SUBCONTRACTOR (S) shall be solely and entirely responsible for procuring all appropriate licenses and permits, which may be required by any competent authority for the SUBCONTRACTOR (S) to perform the subject work.

REGIONAL WATER PLANNING CONTRACT ONLY

☐ **OWNERSHIP**

"It is agreed that all reports, drafts of reports, or other material, data, drawings, computer programs and codes associated with this contract and developed by the (Name of Subcontractor) pursuant to this contract shall become the joint property of the REGIONAL WATER PLANNING GROUP, (Name of CONTRACTOR), (Name of Subcontractor), and the Texas Water Development Board. These materials shall not be copyrighted or patented by the (name of Subcontractor). (Name of Subcontractor) agrees that neither the Regional Water Planning Group nor the Texas Water Development Board are parties to this contract and agrees that that these entities have no liability under the terms of this contract. The Texas Water Development Board is solely a third-party beneficiary under this contract."

☐ **COMPLIANCE WITH BOARD RULES AND STATE LAW**

The SUB-CONTRACTOR (S) shall comply with BOARD rules and adhere to all requirements in state law pertaining to the procurement of professional services.

Form **W-9**
(Rev October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester Do not send to the IRS

Print or type
See Specific Instructions on page 2

Name (as shown on your income tax return)

Business name if different from above

Check appropriate box ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership
☐ Limited liability company Enter the tax classification (D=disregarded entity, C=corporation P=partnership) ▶
☐ Other (see instructions) ▶

☐ Exempt payee

Address (number, street, and apt or suite no)

Requester's name and address (optional)

City state and ZIP code

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box The TIN provided must match the name given on Line 1 to avoid backup withholding For individuals, this is your social security number (SSN) However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3 For other entities it is your employer identification number (EIN) If you do not have a number, see How to get a TIN on page 3

Note If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter

Social security number
: :
or
Employer identification number
:

Part II Certification

Under penalties of perjury, I certify that

1 The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and

2 I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and

3 I am a U S citizen or other U S person (defined below)

Certification instructions You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return For real estate transactions, item 2 does not apply For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification but you must provide your correct TIN See the instructions on page 4

Sign Here | Signature of U S person ▶ | Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA

Use Form W-9 only if you are a U S person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to

1 Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2 Certify that you are not subject to backup withholding, or

3 Claim exemption from backup withholding if you are a U S exempt payee If applicable, you are also certifying that as a U S person, your allocable share of any partnership income from a U S trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income

Note If a requester gives you a form other than Form W-9 to request your TIN you must use the requester s form if it is substantially similar to this Form W-9

Definition of a U S person For federal tax purposes, you are considered a U S person if you are

- An individual who is a U S citizen or U S resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301 7701-7)

Special rules for partnerships Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax Therefore, if you are a U S person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U S status and avoid withholding on your share of partnership income

The person who gives Form W-9 to the partnership for purposes of establishing its U S status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases

- The U S owner of a disregarded entity and not the entity

- The U S grantor or other owner of a grantor trust and not the trust, and
- The U S trust (other than a grantor trust) and not the beneficiaries of the trust

Foreign person If you are a foreign person, do not use Form W-9 Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities)

Nonresident alien who becomes a resident alien Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U S tax on certain types of income However, most tax treaties contain a provision known as a "saving clause " Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U S resident alien for tax purposes

If you are a U S resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U S tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items

1 The treaty country Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien

2 The treaty article addressing the income

3 The article number (or location) in the tax treaty that contains the saving clause and its exceptions

4 The type and amount of income that qualifies for the exemption from tax

5 Sufficient facts to justify the exemption from tax under the terms of the treaty article

Example. Article 20 of the U S -China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States Under U S law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years However, paragraph 2 of the first Protocol to the U S -China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments This is called "backup withholding " Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators Real estate transactions are not subject to backup withholding

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return

Payments you receive will be subject to backup withholding if

1 You do not furnish your TIN to the requester,

2 You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3 The IRS tells the requester that you furnished an incorrect TIN,

4 The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5 You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding See the instructions below and the separate Instructions for the Requester of Form W-9

Also see Special rules for partnerships on page 1

Penalties

Failure to furnish TIN If you fail to furnish your correct TIN to a requester, you are subject to a penalty of $50 for each such failure unless your failure is due to reasonable cause and not to willful neglect

Civil penalty for false information with respect to withholding If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a $500 penalty

Criminal penalty for falsifying information Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment

Misuse of TINs If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form

Sole proprietor Enter your individual name as shown on your income tax return on the "Name" line You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line

Limited liability company (LLC) Check the "Limited liability company" box only and enter the appropriate code for the tax classification ("D" for disregarded entity, 'C" for corporation, "P" for partnership) in the space provided

For a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Regulations section 301 7701-3, enter the owner's name on the "Name" line Enter the LLC's name on the 'Business name" line

For an LLC classified as a partnership or a corporation, enter the LLC s name on the Name" line and any business trade, or DBA name on the 'Business name' line

Other entities Enter your business name as shown on required federal tax documents on the 'Name" line This name should match the name shown on the charter or other legal document creating the entity You may enter any business, trade, or DBA name on the Business name" line

Note You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc)

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status then check the "Exempt payee" box in the line following the business name, sign and date the form

Generally, individuals (including sole proprietors) are not exempt from backup withholding Corporations are exempt from backup withholding for certain payments, such as interest and dividends

Note If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding

The following payees are exempt from backup withholding

1 An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),

2 The United States or any of its agencies or instrumentalities,

3 A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,

4 A foreign government or any of its political subdivisions, agencies, or instrumentalities, or

5 An international organization or any of its agencies or instrumentalities

Other payees that may be exempt from backup withholding include

6 A corporation,

7 A foreign central bank of issue,

8 A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,

9 A futures commission merchant registered with the Commodity Futures Trading Commission,

10 A real estate investment trust,

11 An entity registered at all times during the tax year under the Investment Company Act of 1940,

12 A common trust fund operated by a bank under section 584(a),

13 A financial institution,

14 A middleman known in the investment community as a nominee or custodian, or

15 A trust exempt from tax under section 664 or described in section 4947

The chart below shows types of payments that may be exempt from backup withholding The chart applies to the exempt payees listed above, 1 through 15

IF the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 13 Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over $600 required to be reported and direct sales over $5,000[1]	Generally exempt payees 1 through 7[2]

[1] See Form 1099-MISC Miscellaneous Income and its instructions

[2] However the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f) even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding medical and health care payments attorneys fees and payments for services paid by a federal executive agency

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN) Enter it in the social security number box If you do not have an ITIN, see How to get a TIN below

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN However, the IRS prefers that you use your SSN

If you are a single-member LLC that is disregarded as an entity separate from its owner (see Limited liability company (LLC) on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN If the LLC is classified as a corporation or partnership, enter the entity's EIN

Note See the chart on page 4 for further clarification of name and TIN combinations

How to get a TIN If you do not have a TIN, apply for one immediately To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www ssa gov You may also get this form by calling 1-800-772-1213 Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN You can apply for an EIN online by accessing the IRS website at www irs gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business You can get Forms W-7 and SS-4 from the IRS by visiting www irs gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN sign and date the form, and give it to the requester For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments The 60-day rule does not apply to other types of payments You will be subject to backup withholding on all such payments until you provide your TIN to the requester

Note Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon

Caution A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8

Part II Certification

To establish to the withholding agent that you are a U S person, or resident alien, sign Form W-9 You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise

For a joint account, only the person whose TIN is shown in Part I should sign (when required) Exempt payees, see Exempt Payee on page 2

Signature requirements Complete the certification as indicated in 1 through 5 below

1 Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983 You must give your correct TIN, but you do not have to sign the certification

2 Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983 You must sign the certification or backup withholding will apply If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form

3 Real estate transactions You must sign the certification You may cross out item 2 of the certification

4 Other payments You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations)

5 Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions You must give your correct TIN, but you do not have to sign the certification

What Name and Number To Give the Requester

For this type of account	Give name and SSN of
1 Individual	The individual
2 Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account [1]
3 Custodian account of a minor (Uniform Gift to Minors Act)	The minor [2]
4 a The usual revocable savings trust (grantor is also trustee)	The grantor-trustee [1]
b So-called trust account that is not a legal or valid trust under state law	The actual owner [1]
5 Sole proprietorship or disregarded entity owned by an individual	The owner [3]
For this type of account	**Give name and EIN of**
6 Disregarded entity not owned by an individual	The owner
7 A valid trust, estate, or pension trust	Legal entity [4]
8 Corporate or LLC electing corporate status on Form 8832	The corporation
9 Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10 Partnership or multi-member LLC	The partnership
11 A broker or registered nominee	The broker or nominee
12 Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

[1] List first and circle the name of the person whose number you furnish If only one person on a joint account has an SSN that person s number must be furnished

[2] Circle the minor's name and furnish the minor's SSN

[3] You must show your individual name and you may also enter your business or DBA name on the second name line You may use either your SSN or EIN (if you have one) but the IRS encourages you to use your SSN

[4] List first and circle the name of the trust, estate, or pension trust (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title) Also see Special rules for partnerships on page 1

Note If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund

To reduce your risk

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer

Call the IRS at 1-800-829-1040 if you think your identity has been used inappropriately for tax purposes

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels may be eligible for Taxpayer Advocate Service (TAS) assistance You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059

Protect yourself from suspicious emails or phishing schemes Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft

The IRS does not initiate contacts with taxpayers via emails Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs gov You may also report misuse of the IRS name, logo, or other IRS personal property to the Treasury Inspector General for Tax Administration at 1-800-366-4484 You can forward suspicious emails to the Federal Trade Commission at spam@uce gov or contact them at www consumer gov/idtheft or 1-877-IDTHEFT(438-4338)

Visit the IRS website at www irs gov to learn more about identity theft and how to reduce your risk

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest dividends and certain other income paid to you mortgage interest you paid the acquisition or abandonment of secured property cancellation of debt or contributions you made to an IRA or Archer MSA or HSA The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return The IRS may also provide this information to the Department of Justice for civil and criminal litigation and to cities states, the District of Columbia and U S possessions to carry out their tax laws We may also disclose this information to other countries under a tax treaty to federal and state agencies to enforce federal nontax criminal laws or to federal law enforcement and intelligence agencies to combat terrorism

You must provide your TIN whether or not you are required to file a tax return Payers must generally withhold 28% of taxable interest dividend and certain other payments to a payee who does not give a TIN to a payer Certain penalties may also apply

STATE OF TEXAS

TWDB Contract No. 1200011417

COUNTY OF TRAVIS

Severe Repetitive Loss
Project Grant
Galveston County

This Contract (hereinafter CONTRACT) is entered into by and between the TEXAS WATER DEVELOPMENT BOARD, the Grantee serving as the administrator of the Federal Emergency Management Agency's Severe Repetitive Loss Program, and **Galveston County**, the Subgrantee.

SECTION I. SPECIFIC CONDITIONS AND EXCEPTIONS TO STANDARD AGREEMENT

ARTICLE I. DEFINITIONS: For the purposes of this CONTRACT, the following terms or phrases shall have the meaning ascribed therewith.

A TWDB - The Texas Water Development Board, or its designated representative

B. FEMA - Federal Emergency Management Agency

C SRL – Severe Repetitive Loss

D CONTRACTOR – Galveston County

E. EXECUTIVE ADMINISTRATOR - The Executive Administrator for the TWDB or their designated representative

F. PARTICIPANTS – Homeowners as defined in Exhibit B, the original grant application

G REQUIRED INTERLOCAL AGREEMENT(S) – N/A

H FEMA APPROVAL DATE – September 27, 2011

I TWDB APPROVAL DATE –August 18, 2011

J. PROJECT AREA – The project area is more specifically defined in Exhibit B, the original grant application

K. DEADLINE FOR CONTRACT EXECUTION – January 25, 2012

L. CONTRACT EFFECTIVE DATE – September 23, 2011

M PROJECT COMPLETION DATE – September 11, 2014

N. TOTAL PROJECT COSTS - $34,475,996.76

O. FEDERAL SHARE OF THE TOTAL PROJECT COSTS - Not to exceed $31,028,396 97 or 90% of eligible expenses

P LOCAL SHARE OF THE TOTAL PROJECT COSTS – $3,447,599 79 or 10% of eligible expenses

Q. PAYMENT REQUEST SUBMISSION SCHEDULE – Monthly

R. OTHER SPECIAL CONDITIONS AND EXCEPTIONS TO STANDARD AGREEMENT OF THIS CONTRACT –

1 All costs must be incurred during the period of performance unless pre-award costs are approved. A total of $850,000 80 in pre-award expenses is approved for reimbursement under this contract.

2 In accordance to Section II, Article VII, TWDB shall distribute advances equal to ten (10) percent of the FEDERAL SHARE OF THE TOTAL PROJECT COSTS. No advances shall be released until the Galveston County Standard Operating Procedures entitled, "Severe Repetitive Loss (SRL) Home Elevation Project 2011" is approved by the TWDB.

3 Section II, Article VII, Item 2, the additional paragraph is added.

The CONTRACTOR shall develop standard subcontract/agreement templates for use by each (1) individual homeowner, and (2) elevation engineering firm subcontracted under this agreement The CONTRACTOR shall submit the standard subcontract/agreement templates to the EXECUTIVE ADMINISTRATOR for review and approval prior to use or execution of any documents with individual homeowners or elevation engineering firms. Any subsequent modifications to the approved template must also be submitted for review and approval by the EXECUTIVE ADMINISTRATOR prior to use The CONTRACTOR and its SUBCONTRACTOR shall maintain all agreements entered into relating to the work under this CONTRACT. CONTRACTOR shall make such documents available for review and/or approval by the EXECUTIVE ADMINISTRATOR or any other authorized entity of the State of Texas, upon request.

4 The CONTRACTOR shall submit the required FEMA SRL homeowner's consultation agreement(s) to TWDB's designated Contract Manager prior to the final mitigation offer to the homeowner

5 Section II, Article VII, Item 6 shall be replaced as follows:
The CONTRACTOR shall submit to the EXECUTIVE ADMINISTRATOR monthly documentation for incurred expenses regardless whether the previous advance has been totally expended The CONTRACTOR shall include a copy of the Request for Advance Checklist, as well as the most recent written performance report described in Article IX,

Item 1 of this Section and the documentation listed in Article VII, Item 7 When the expenses total more than the most recent advance, another advance shall be released at that time. Any expenses incurred by the CONTRACTOR above the amount of the previous advance shall be reimbursed to the CONTRACTOR based on the percentage of the FEDERAL SHARE OF THE TOTAL PROJECT COSTS of this CONTRACT.

6 The CONTRACTOR shall meet with the TWDB'S designated Contract Manager on a bi-weekly basis to discuss the progress of the project as well as any issues.

IN WITNESS WHEREOF, the parties have caused this CONTRACT to be duly executed in duplicate originals.

TEXAS WATER DEVELOPMENT BOARD

Melanie Callahan
Executive Administrator

Date 01/13/12

GALVESTON COUNTY

The Honorable ~~Mark Henry~~ **Kenneth Clark**
Acting Galveston County Judge

Date **January 10, 2012**

Attest:
Dwight D Sullivan
County Clerk
By: Brandy Chapman **Deputy**
Date 1/10/12 **Brandy Chapman**

SECTION II. STANDARD AGREEMENT

ARTICLE I. RECITALS

WHEREAS, the CONTRACTOR applied through the TWDB for a FEMA project grant under the SRL program to mitigate specific flood problems as identified in Exhibit B, the original grant application which is incorporated herein and made a permanent part of this CONTRACT;

WHEREAS, the CONTRACTOR and PARTICIPANTS will commit cash and/or in-kind services to pay for the LOCAL SHARE OF THE TOTAL PROJECT COSTS,

WHEREAS, the CONTRACTOR is the entity who will receive grant funds and will be responsible for the execution of this CONTRACT and compliance with SRL requirements;

WHEREAS, on the FEMA APPROVAL DATE, FEMA approved the CONTRACTOR'S application for financial assistance;

NOW, THEREFORE, the TWDB and the CONTRACTOR agree as follows:

ARTICLE II. AGREEMENTS

1. The United States of America, through the Director of FEMA, has agreed to fund to the CONTRACTOR, through the TWDB, the FEDERAL SHARE OF THE TOTAL PROJECT COSTS. By acceptance of the funds awarded, the CONTRACTOR agrees to abide by the terms and conditions of this CONTRACT as set forth in this document and the documents identified therein and made a part hereof by reference, including the Federal laws and rules listed in Exhibit A.

2 Services and activities provided under this CONTRACT shall be in accordance with requirements of the Texas Government Code, Chapter 742, which provides for state coordination of local applications for Federal funds.

ARTICLE III. PERIOD OF PERFORMANCE

The period of performance of this CONTRACT shall be from the CONTRACT EFFECTIVE DATE to the PROJECT COMPLETION DATE, unless otherwise amended.

ARTICLE IV. FEDERAL LAWS AND RULES THAT APPLY

FEMA requires all grant recipients to comply with Federal laws and rules. These Federal laws and rules are listed in Exhibit A, which is incorporated herein and made a permanent part of this CONTRACT CONTRACTOR will comply with all Federal laws and rules listed in Exhibit A. Copies of those Federal laws and rules are available upon request

ARTICLE V. GENERAL TERMS AND CONDITIONS

The specific terms and conditions of this CONTRACT are as follows:

1 The TWDB shall reimburse the CONTRACTOR for costs determined by FEMA to be allowable, allocable, and reasonable in accordance with OMB Circular A-87; Cost Principles for State and Local Governments.

2. The CONTRACTOR shall follow matching or cost sharing requirements found in 44 CFR Part 13 24, of the Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments.

3 The project will be administered by the CONTRACTOR as per the Hazard Mitigation Assistance (HMA) Unified Guidance in effect when the application (EXHIBIT B) was submitted to FEMA which is available at www fema gov

4. The CONTRACTOR shall transfer to the TWDB, for return to FEMA, the appropriate share, based on the Federal support percentage, of any refund, rebate, credit or other accounts arising from the performance of this CONTRACT, along with accrued interest, if any. The CONTRACTOR shall take necessary action to effect prompt collection of all monies due or which may become due and to cooperate with the TWDB and FEMA in any claim or suit in connection with the amounts due.

5 Prior to the start of any construction activity, the CONTRACTOR shall ensure that all applicable Federal, State, and local permits and clearances are obtained.

6. Copyright The CONTRACTOR is free to copyright any original work developed in the course of or under this CONTRACT The TWDB and FEMA reserve a royalty-free nonexclusive and irrevocable right to reproduce, publish, or otherwise use, and to authorize others to use, the work for governmental purposes Any publication resulting from work performed under this CONTRACT shall include an acknowledgement of FEMA financial support and a statement that the publication does not necessarily reflect the views of FEMA or the TWDB.

7 No subsequent grants/cooperative agreements, monetary increase amendments or time extension amendments will be approved unless all overdue financial or performance reports have been submitted by the CONTRACTOR to the TWDB. Exceptions to this policy can by approved only by FEMA

8 The CONTRACTOR agrees by accepting funds under this CONTRACT to comply with all provisions of 44 CFR 13 32, Equipment FEMA Form 20-18, Government Property form, is to be used to report Government Property Instructions on which property items are to be reported should be provided in writing by FEMA

9. No Debt Against the State This CONTRACT does not create any debt by or on behalf of the State of Texas and the TWDB. The TWDB'S obligations under this CONTRACT are contingent upon the availability of appropriated funds and the continued legal authority of the TWDB to enter into this CONTRACT

10 Independent Contractor and Insurance. For the purposes of this CONTRACT, the CONTRACTOR will be considered an independent contractor and, therefore, solely responsible for liability resulting from negligent acts or omissions and shall act in an individual capacity and not as agents, employees, partners, joint ventures or associates of one another. The employees or agents of one party shall not be deemed or construed to be the employees or agents of the other party for any purposes whatsoever. The CONTRACTOR shall obtain all necessary insurance, in the judgment of the CONTRACTOR, to protect itself, from liability arising out of this CONTRACT

11 Procurement Laws. The CONTRACTOR shall comply with applicable State of Texas procurement laws, rules and policies, including but not limited to competitive bidding and the Professional Services Procurement Act, Government Code, Chapter 2254, relating to contracting with persons whose services are within the scope of practice of: accountants, architects, landscape architects, land surveyors, medical doctors, optometrists, professional engineers, real estate appraisers, professional nurses, and certified public accountants.

12. Right to Audit The CONTRACTOR and its Subcontractors shall maintain all financial accounting documents and records, including copies of all invoices and receipts for expenditures, relating to the work under this CONTRACT CONTRACTOR shall make such documents and records available for examination and audit by the Executive Administrator or any other authorized entity of the State of Texas. CONTRACTOR'S financial accounting documents and records shall be kept and maintained in accordance with generally accepted accounting principles for a minimum of three years following the completion of the contract. By executing this CONTRACT, the CONTRACTOR accepts the authority of the Texas State Auditor's Office to conduct audits and investigations in connection with all state funds received pursuant to this CONTRACT The CONTRACTOR shall comply with directives from the Texas State Auditor and shall cooperate in any such investigation or audit. The CONTRACTOR agrees to provide the Texas State Auditor with access to any information the Texas State Auditor considers relevant to the investigation or audit. The CONTRACTOR also agrees to include a provision in any Subcontract related to this CONTRACT that requires the Subcontractor to submit to audits and investigation by the State Auditor's Office in connection with all state funds received pursuant to the Subcontract.

13 Force Majeure. Unless otherwise provided, neither CONTRACTOR nor the TWDB nor any agency of the State of Texas, shall be liable to the other for any delay in, or failure of performance, of a requirement contained in this CONTRACT caused by force majeure. The existence of such causes of delay or failure shall extend the period of performance

until after the causes of delay or failure have been removed provided the non-performing party exercises all reasonable due diligence to perform Force majeure is defined as acts of God, war, strike, fires, explosions, or other causes that are beyond the reasonable control of either party and that by exercise of due foresight such party could not reasonably have been expected to avoid, and which, by the exercise of all reasonable due diligence, such party is unable to overcome. Each party must inform the other in writing with proof of receipt within five (5) business days of the existence of such force majeure or otherwise waive this right as a defense.

14. Severance Provision - Should any one or more provisions of this CONTRACT be held to be null, void, voidable, or, for any reason whatsoever, of no force and effect, such provision(s) shall be construed as severable from the remainder of this CONTRACT and shall not affect the validity of all other provisions of this CONTRACT which shall remain in full force and effect.

15 Registration Requirement. Pursuant to the FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT OF 2006, Pub. L 109-282, the CONTRACTOR will be required to obtain a Data Universal Numbering System (DUNS) Number and register with Central Contractor Registration (CCR), and maintain current registration at all times during which this Agreement is in effect

ARTICLE VI. STANDARDS OF PERFORMANCE.

1 Personnel. CONTRACTOR shall assign only qualified personnel to perform the services required under this CONTRACT CONTRACTOR shall be responsible for ensuring that any Subcontractor utilized shall also assign only qualified personnel. Qualified personnel are persons who are properly licensed to perform the work and who have sufficient knowledge, skills and ability to perform the tasks and services required herein according to the standards of performance and care for their trade or profession.

2. Professional Standards CONTRACTOR shall provide the services and deliverables in accordance with applicable professional standards. CONTRACTOR represents and warrants that it is authorized to acquire Subcontractors with the requisite qualifications, experience, personnel and other resources to perform in the manner required by this CONTRACT.

3 Antitrust CONTRACTOR represents and warrants that neither CONTRACTOR nor any firm, corporation, partnership, or institution represented by CONTRACTOR, or anyone acting for such firm, corporation, partnership, or institution has (1) violated the antitrust laws of the State of Texas under the Texas Business & Commerce Code, Chapter 15, of the Federal antitrust laws; or (2) communicated directly or indirectly the proposal resulting in this CONTRACT to any competitor or other person engaged in such line of business during the procurement process for this CONTRACT

4. Conflict of Interest. CONTRACTOR represents and warrants that CONTRACTOR has no actual or potential conflicts of interest in providing the deliverables required by this CONTRACT to the State of Texas and the TWDB. CONTRACTOR represents that the provision of services under this CONTRACT will not create an appearance of impropriety. CONTRACTOR also represents and warrants that, during the term of this CONTRACT, CONTRACTOR will immediately notify the TWDB, in writing, of any potential conflict of interest that could adversely affect the TWDB by creating the appearance of a conflict of interest

5 CONTRACTOR represents and warrants that neither CONTRACTOR nor any person or entity that will participate financially in this CONTRACT has received compensation from the TWDB or any agency of the State of Texas for participation in the preparation of specifications for this CONTRACT CONTRACTOR represents and warrants that it has not given, offered to give, and does not intend to give at any time hereafter, any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor or service to any public servant in connection with this CONTRACT.

6 Proprietary and Confidential Information. CONTRACTOR warrants and represents that any information that is proprietary or confidential, and is received by CONTRACTOR from the TWDB or any governmental entity, shall not be disclosed to third parties without the written consent of the TWDB or applicable governmental entity, whose consent shall not be unreasonably withheld

7 Public Information Act. CONTRACTOR acknowledges and agrees that all documents, in any media, generated in the performance of work conducted under this CONTRACT are subject to public disclosure under the Public Information Act, Government Code, Chapter 552. CONTRACTOR shall produce all documents upon request of the TWDB within two (2) business days when the documents are required to comply with a request for information under the Public Information Act.

8 Accurate and Timely Record Keeping CONTRACTOR warrants and represents that it will keep timely, accurate and honest books and records relating to the work performed and the payments received under this CONTRACT according to generally accepted accounting standards. Further, CONTRACTOR agrees that it will create such books and records at or about the time the transaction reflected in the books and records occurs

9. Dispute Resolution. The CONTRACTOR and the TWDB agree to make a good faith effort to resolve any dispute relating to the work required under this CONTRACT through negotiation and mediation as provided by Government Code, Chapter 2260 relating to resolution of certain contract claims against the state The CONTRACTOR and the TWDB further agree that they shall attempt to use any method of alternative dispute resolution mutually agreed upon to resolve any dispute arising under this CONTRACT if this CONTRACT is not subject to Chapter 2260.

10. Contract Administration The TWDB shall designate a contract manager for this CONTRACT The contract manager will serve as the point of contact between the TWDB and CONTRACTOR. The TWDB'S contract manager shall supervise the TWDB'S review of CONTRACTOR'S technical work, deliverables, draft reports, the final report, payment requests, schedules, financial and budget administration, and similar matters. The contract manager does not have any express or implied authority to vary the terms of the CONTRACT, amend the CONTRACT in any way or waive strict performance of the terms or conditions of the CONTRACT.

ARTICLE VII. DISTRIBUTING GRANT FUNDS

1. The TWDB agrees to compensate and reimburse the CONTRACTOR in a total amount not to exceed the FEDERAL SHARE OF THE TOTAL PROJECT COSTS for costs incurred and paid by the CONTRACTOR pursuant to performance of this CONTRACT The CONTRACTOR will contribute local matching funds in sources and amounts defined as the LOCAL SHARE OF THE TOTAL PROJECT COSTS The TWDB shall reimburse the CONTRACTOR for one hundred percent (100%) of FEDERAL SHARE OF THE TOTAL PROJECT COSTS's of each invoice up to ninety percent (90%) of the total FEMA share pending the CONTRACTOR'S performance and TWDB'S review and approval of project completion according to the specific close-out requirements for SRL, at which time the TWDB shall pay the remaining ten percent (10%) to the CONTRACTOR

   Notwithstanding the above referenced paragraph, the TWDB may provide advance funds to the CONTRACTOR in order to minimize the time elapsing between the transfer of funds and their disbursement by the CONTRACTOR. Such advance shall be in compliance with FEMA regulations, including but not limited to 44 CFR §13.21(c). The CONTRACTOR understands and agrees that it has no right to such advances, but that TWDB, in its sole discretion, may from time to time agree to advance payments.

2 Requests for advance or reimbursement of SUBCONTRACTOR expenses will only be considered where such subcontracts or agreements have been approved by the EXECUTIVE ADMINISTRATOR as described herein. The EXECUTIVE ADMINISTRATOR must provide written review and approval of contracts or agreements between the CONTRACTOR and SUBCONTRACTOR(s) and between such SUBCONTRACTORS and any other SUBCONTRACTORS prior to CONTRACTOR finalizing such subcontracts or agreements. The purpose of this review is solely to ensure that the subcontracts and agreements are consistent with this CONTRACT and that the rights of the TWDB are protected. CONTRACTOR understands that CONTRACTOR should obtain its own legal review of subcontracts and agreements that CONTRACTOR enters into CONTRACTOR agrees that the TWDB assumes no legal obligations under its subcontracts or agreements and is merely a third-party beneficiary of the same Each subcontract or agreement shall include a detailed budget estimate with specific cost details for each task or specific item of work to be performed by the

SUBCONTRACTOR and for each category of reimbursable expenses. The subcontracts shall conform to the terms of the CONTRACT and include provisions which require SUBCONTRACTOR compliance with TWDB rules. The CONTRACTOR must adhere to all requirements in state law and TWDB rules pertaining to the procurement of professional services. Subcontracts for surveying activities will not be required.

3 The CONTRACTOR shall submit advance or payment requests and the required documentation for reimbursement according to the PAYMENT REQUEST SUBMISSION SCHEDULE and in accordance with the approved task and expense budgets contained in Exhibit C to this CONTRACT

4. The CONTRACTOR has budget flexibility within task and expense budget categories to the extent that the resulting change in amount in any one task or expense category does not exceed 10% of the total authorized amount by this CONTRACT. Larger deviations shall require approval by EXECUTIVE ADMINISTRATOR or designee and FEMA (as per 44 CFR Part 13.30 of the Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments) which will be documented through an Approved Budget Memorandum to the TWDB contract file The CONTRACTOR will be required to provide written explanation for the overage and reallocation of the task and expense amount.

5. Once the CONTRACTOR chooses the advance method for distribution of grant funds and submits a Request for Advance Checklist to the EXECUTIVE ADMINISTRATOR, TWDB will advance to the CONTRACTOR the amount shown in Section I, Item R, but not to exceed forty-five percent of the FEDERAL SHARE OF THE TOTAL PROJECT COSTS

6 When CONTRACTOR has incurred expenses sufficient to reconcile the advance received, the CONTRACTOR will submit a Request for Advance Checklist to the EXECUTIVE ADMINISTRATOR for another advance of the FEDERAL SHARE OF THE TOTAL PROJECT COSTS The CONTRACTOR will attach to the Request for Advance Checklist, the most recent written performance report described in Article IX, Item 1 of this Section and the documentation listed in Item 7 below Any expenses incurred by the CONTRACTOR above the amount of the previous advance will be reimbursed to the CONTRACTOR based on the percentage of the FEDERAL SHARE OF THE TOTAL PROJECT COSTS of this CONTRACT.

7 For reimbursement, the CONTRACTOR will submit a Payment Request Checklist and the documentation listed below, according to the PAYMENT REQUEST SUBMISSION SCHEDULE The Payment Request package will include the following:

a. The most recent written performance report required by Article IX, Item 1 of this Section,

b Summary of total expenses incurred and amounts paid, including the following information:

- Contractor's Vendor Identification Number;
- TWDB Contract Number;
- The reimbursement period: beginning (date) through ending (date);
- TOTAL PROJECT COSTS for the reimbursement period broken down by budget categories contained in Exhibit C, and
- Certification, signed by the CONTRACTOR'S authorized representative, that the expenses submitted for the reimbursement period are a true and correct representation of amounts paid for work performed directly related to this CONTRACT,

c. For direct expenses paid by the CONTRACTOR and by outside SUBCONTRACTORS -- copies of invoices to the CONTRACTOR showing the tasks that were performed; the percent and cost of each task completed, a total cost figure for each direct expense category contained in Exhibit C; and the total dollar amount paid to and due to the SUBCONTRACTORS. Any payments of expenses which the CONTRACTOR withholds from a SUBCONTRACTOR for the purposes of retainage, shall be considered to have been paid by the CONTRACTOR for purposes of determining expenses paid under the previous sentence, and

d For CONTRACTOR expenses (not SUBCONTRACTORS) - a statement showing the tasks that were performed, the percent and cost of each task completed, and a total cost figure for each direct expense category contained in Exhibit C.

e. For travel and subsistence expenses of the CONTRACTOR and SUBCONTRACTORS·

- names, dates, work locations, time periods at work locations, itemization of subsistence expenses of each employee, limited, however, to travel expenses authorized for state employees by the General Appropriations Act, Tex. Leg Regular Session, 2011, Article IX, Part 5, as amended or superseded,
- other transportation costs -- copies of invoices or receipts covering tickets or transportation or, if not available, names, dates, and points of travel of individuals; and
- all other allowable expenses -- all Associated back-up (invoices, equipment logs, time sheets, etc.) will be retained by CONTRACTOR for a minimum of three years following contract close out, consistent with Federal Audit Requirements

8 No later than forty-five (45) days after the PROJECT COMPLETION DATE, the CONTRACTOR will provide a final reconciliation of expended amounts under the CONTRACT

9 Within thirty (30) days of the EXECUTIVE ADMINISTRATOR's final accounting of the amounts expended by the CONTRACTOR and the amounts advanced by the TWDB to the CONTRACTOR, the CONTRACTOR will refund to the TWDB any advances not used for expenses approved by the EXECUTIVE ADMINISTRATOR. If the amounts expended by the CONTRACTOR exceed the amounts advanced by the TWDB, the EXECUTIVE ADMINISTRATOR will provide such differences to the CONTRACTOR, if not in excess of the FEDERAL SHARE OF THE TOTAL PROJECT COSTS

10 The CONTRACTOR is responsible for any food or entertainment expenses incurred by its own organization or that of its SUBCONTRACTORS, outside that of the travel expenses authorized and approved by the State of Texas under this CONTRACT

ARTICLE VIII. FINANCIAL REPORTS

1 Quarterly. The CONTRACTOR shall submit an original Financial Status Report Form 269 (FEMA Form 20-10) to the TWDB'S contract manager within fifteen (15) days following the end of each quarter of the project.

2. Final Report. The CONTRACTOR shall submit an original Final Financial Status Report Form 269 (FEMA Form 20-10) to the TWDB'S contract manager within forty-five (45) days after project completion.

ARTICLE IX. PERFORMANCE REPORTING

1 Quarterly The CONTRACTOR shall submit an original quarterly Performance Report (FEMA Form 20-22, Narrative Statement Report form) and any supporting documentation to the TWDB'S contract manager within fifteen (15) days following the end of each quarter in accordance with Article V, Item 3

2. Final Report. The CONTRACTOR shall submit an original final Performance Report (FEMA Form 20-22, Narrative Statement Report form) and any supporting documentation which details all the work performed under the CONTRACT according to the specific close-out requirements according to Article V, Item 3 The report shall be submitted to the TWDB'S contract manager within forty-five (45) days following project completion.

ARTICLE X. AMENDMENT, TERMINATION, AND STOP ORDERS

1. This CONTRACT may be altered or amended by mutual written consent or terminated by the EXECUTIVE ADMINISTRATOR at any time by written notice to the CONTRACTOR. Upon receipt of such termination notice, the CONTRACTOR shall, unless the notice directs otherwise, immediately discontinue all work in connection with the performance of this CONTRACT and shall proceed to cancel promptly all existing orders insofar as such orders are chargeable to this CONTRACT The CONTRACTOR shall submit a statement showing in detail the work performed under this CONTRACT to the date of termination The TWDB shall then pay the CONTRACTOR promptly that proportion of the prescribed fee, which applies to the work, actually performed under this CONTRACT, less all payments that have been previously made. Thereupon, copies of all work accomplished under this CONTRACT shall be delivered to the TWDB.

2 The EXECUTIVE ADMINISTRATOR may issue a Stop Work Order to the CONTRACTOR at any time. Upon receipt of such order, the CONTRACTOR shall

discontinue all work under this CONTRACT and cancel all orders pursuant to this CONTRACT, unless the order directs otherwise If the EXECUTIVE ADMINISTRATOR does not issue a Restart Order within 60 days after receipt by the CONTRACTOR of the Stop Work Order, the CONTRACTOR shall regard this CONTRACT terminated in accordance with the foregoing provisions

3 If termination of the CONTRACT occurs, the procedures described in 44 CFR Part 13, Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments will be followed

ARTICLE XI. CORRESPONDENCE, REPORTS, AND REIMBURSEMENTS

All correspondence, reports, and reimbursements related to this CONTRACT shall be made to the following addresses:

For the TWDB.

Contract Issues:
Texas Water Development Board
Attention. Contract Administration
P O Box 13231
Austin, Texas 78711-3231
Email contracts@twdb state.tx us

Payment Request Submission:
Texas Water Development Board
Attention: Accounts Payable
P O Box 13231
Austin, Texas 78711-3231
Email: invoice@twdb state tx us

Physical Address:
Stephen F Austin State Office Building
1700 N Congress Avenue
Austin, Texas 78701

For the CONTRACTOR:

Contract Information:
John Simsen
Emergency Management Coordinator
Galveston County
1353 FM 646, Suite 201
Dickinson, Texas 77539
Phone: 281-309-5002
Fax: 888-534-5607
E-mail: John.Simsen@co.galveston tx us

Payment Information:
Connie Nicholson
Galveston County Office of Finance and Administration
Galveston County Grants Coordinator
1353 FM 646, Suite 202
Dickinson, Texas 77539
Phone 281-534-8442
Cell Phone: 409-682-3193
E-mail: connie nicholson@co galveston tx us

EXHIBIT A
FEDERAL LAWS AND RULES

FEMA, through its Grant Agreement with the Texas Water Development Board, requires all grant recipients to comply with the following Federal laws and rules:

1. 44 CFR, Part 13 Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments
2 44 CFR, Part 7 Nondiscrimination in Federal Assistance Programs
3 44 CFR, Part 10: Environmental Considerations
4 44 CFR, Part 14: Administration of Grants: Audits of State and Local Governments
5. 44 CFR, Part 17: Government-wide Debarment and Suspension (non-procurement) and Government-wide Requirements for Drug-Free Workplace
6 44 CFR, Part 18: New Restrictions on Lobbying
7. 44 CFR, Subchapter B - Insurance and Hazard Mitigation
8 44 CFR, Subchapter C - Fire Prevention and Control
9. 44 CFR, Subchapter D - Disaster Assistance
10 44 CFR, Subchapter E - Preparedness
11. 44 CFR Section 205 6 - Funding Techniques
12. Public Law 95-224 - Federal Grant and Cooperative Agreement Act of 1997
13. Public Law 101-336 - The Americans With Disabilities Act
14 Executive Order 12372 - Intergovernmental Review of the FEMA Programs and Activities
15 OMB Circular A-102 - Uniform Administrative Requirements for Grants and Cooperative Agreements with State and Local Governments
16. OMB Circular A-87 - Cost Principles for State and Local Governments
17 OMB Circular A-110 - Uniform Administrative Requirements for Grants and Cooperative Agreements with Institutions of Higher Education, Hospitals, and Other Non-Profit Organizations
18. OMB Circular A-21 - Cost Principles for Educational Institutions
19 OMB Circular A-133 - Audits of Institutions of Higher Education and Other Non-Profit Organizations
20 OMB Circular A-122 - Cost Principles for Non-Profit Organizations
21 OMB Circular A-123 - Internal Control System
22. OMB Circular A-50 - Audit Follow-up
23 FEMA Manual 2700.1 - Advance Financing Payment Systems

EXHIBIT B
ORIGINAL GRANT APPLICATION

SEVERE REPETITIVE LOSS (SRL) PROGRAM
GRANT APPLICATION

1. Name of Applicant (legal nature of entity) and vendor identification number (federal tax number).

Galveston County, Texas 74-6000908

2. Address (Street, City, Zip):

1353 FM646, Suite 201, Dickinson, TX 77539

3. Is the applicant a current (not on probation) NFIP participating community? (Yes or No), and what is the CRS rating of the applicant?

Yes, Galveston County is a NFIP participating community. Galveston County does not participate in CRS at this time.

4 .Point-of-Contact or Official Representative (Name and Title):

John Simsen ; Galveston County Emergency Management Coordinator

5. Phone Number: 281-309-5002

6. Fax Number: 888-534-5607

7. Demonstrate that the applicant has the legal authority to plan for and control flooding, and has zoning and building code jurisdiction over the project area:

The applicant has the legal authority to plan for and control flooding and has zoning and building code jurisdiction over the project area. The document that provides the legal authority for these items is the Floodplain Management Regulations for Galveston County, which was adopted in 2002 and is attached to this document.

8. Project Narrative (provide the project narrative on separate pages as an attachment):

This should be an executive summary of the information provided in detail by the narrative statement prepared for Form 20-22. Describe the need and the objectives of the proposed project, the approach, results or benefits of the project, and the proposed project schedule (also provide a map indicating the project location, relation to the 100-year flood plain, and the area effected by the project). Include such information as: the number of structures effected by the project; evidence of the nature of repetitive losses to the structures over the past 10 years; demonstrate the project will result in a long-term solution to the problem and/or a decrease in NFIP related claims; refer to the Multi-Hazard Mitigation Plan, is the proposed project in conformance; is there a multi-objective purpose to the project; etc.

Please see attached pages.

9. Please provide documentation that the "consultation process" has been conducted.

Due to the time constraints of application development and the deadline for submission, the consultation agreements have not been completed by the time of submission of this application. After submission, the County will proceed with consultation agreements to notify all the property owners that his or her property has been selected for the program, to collect sufficient information about the property, and also advise that there are potential consequences of declining a mitigation offer. Once the consultation process has taken place, the County will submit all information to the state for further review.

10. Please provide the following as attachments to the application: **(or refer to e-grant submittal)**

Attachments Provided (yes or no?)	
Multi-Hazard Mitigation Plan	YES
Federal form 424*	YES
Evidence of Local Financial Participation	YES
Federal Form 20-22 and attached narrative statement*	YES
Federal Form 20-15*	YES

*Federal Forms are all found in this spreadsheet [form20-22]. Use the tabs at the bottom to access the form needed.

11. Estimated Cost of Proposed Project: $ 33,051,318.40

12. ***FEMA Funding Requested (federal share is maximum 90%): $29,746,186.56***

13. ***How Does Applicant Propose to Finance Non-Federal Share of Project? (Local share, 10%, 3rd party in-kind service can be no more than 5%)***

The County intends that the 10 % will be borne by the participating homeowners by them providing 10% of the funding necessary to complete the elevation projects. Although not anticipated, if cost overruns occur that cannot be covered by the grant, the homeowners will provide greater than the required 10% cost share. Each homeowner will have signed a statement of voluntary participation, which includes an acknowledgement that they will be responsible for the 10% local match.

14. ***Has applicant ever received an FMA or SRL project grant before?***

No, Galveston County has never received an FMA or SRL project grant before.

15. ***Signature:***

16. ***Title: John Simsen; Galveston County Emergency Management Coordinator***

17. ***Date:*** 5/9/11

Please return completed application form and attachments to:

Texas Water Development Board
Attn. Ms. Kathy Hopkins
1700 N. Congress Avenue
P.O. Box 13231
Austin, Texas 78711-3231

Galveston County

FEMA Severe Repetitive Loss (SRL) Elevation Program
Applicant Funding Certification

Galveston County hereby certifies that we have the capability to meet the financial obligations of the 10 percent cost share under this Severe Repetitive Loss Grant Program Application. The County intends that the 10 percent parcel specific project costs will be borne by the participating homeowners and the County will provide 10 percent of the admin and pre-award costs from the general fund. Although not anticipated, if cost overruns occur that cannot be covered by the grant, the homeowners and County will provide greater than the required 10 percent cost share. Each homeowner has signed a statement of voluntary participation, which includes an acknowledgement that they will be responsible for the 10 percent local match.

Authorized Representative: Mark Henry

Title: Galveston County Judge

Signature: Mark Henry

Date: 5/12/11

Subgrant Project Application

Application Title: Galveston County Elevation Application - SRL 2011
Subgrant Applicant: Galveston County Emergency Management
Application Number: SRL-PJ-06-TX-2011-008
Application Year: 2011
t Type: Project Application
ess: 1353 FM646 West, Suite 201, Dickinson, TX 77539-0000

Contact Information

Point of Contact Information

Title	Mr.
First Name	John
Middle Initial	
Last Name	Simsen
Title	Emergency Management Coordinator
Agency/Organization	Galveston County Emergency Management
Address 1	1353 FM646 West, Suite 201
Address 2	
City	Dickinson
State	TX
ZIP	77539
Phone	281-309-5002 Ext.
Fax	888-534-5607
Email	john.simsen@co.galveston.tx.us

Alternate Point of Contact Information

Title	Mr.
First Name	Thad
Middle Initial	J
Last Name	Leugemors
Title	Galveston County SRL Project Manager
Agency/Organization	Science Applications International Corporation (SAIC)
Address 1	2301 Lucien Way
Address 2	Suite 120
City	Maitland
State	FL
ZIP	32751
Phone	407-375-1298 Ext.
Fax	321-441-8501
Email	thad.j.leugemors@saic.com

Community Information

Please provide the name of each community that will benefit from this mitigation activity

ate	County Code	Community Name	CID Number	CRS Community	CRS Rating	State Legislative District	US Congressional District
TX	485470_OBM0Z0EDJ	GALVESTON COUNTY*	485470	N		485470	14

Enter Community Profile information below. Help

Galveston County is located on the Gulf Coast in the state of Texas within the Houston–Sugar Land–Baytown metropolitan area. The county is located on the plains of the Texas Gulf Coast in the southeastern part of the state. The county is bounded on the northeast by Galveston Bay and on the northwest by Clear Creek and Clear Lake. Much of the county covers Galveston Bay, and is bounded to the south by the Galveston Seawall and beaches on the Gulf of Mexico. According to the U.S. Census Bureau, the county has a total area of 873 square miles (2,261 km²), of which, 396 square miles (1,032 km²) of it is land and 474 square miles (1,229 km²) of it (54.35%) is water. As of the census of 2000, there were 250,158 people, 94,782 households, and 68,157 families residing in the county. The population density was 628 people per square mile (242/km²). There were 111,733 housing units at an average density of 280 per square mile (108/km²). The racial makeup of the county was 72.69% White, 15.44% Black or African American, 0.47% Native American, 2.10% Asian, 0.04% Pacific Islander, 7.18% from other races, and 2.08% from two or more races. 17.98% of the population was Hispanic or Latino of any race.

Comments

Attachments

State	TX
Community Name	GALVESTON COUNTY*
County Name	TEXAS
County Code	GALVESTON COUNTY
City Code	485470
FIPS Code	167 Help
CID Number	485470 Help
CRS Community	N
CRS Rating	
State Legislative District	485470
US Congressional District	14
I or FHBM available?	Yes
munity Status	PARTICIPATING Help
Community participates in NFIP?	Yes
Date entered in NFIP	04-08-1971
Date of most recent Community Assistance Visit (CAV)?	11-05-1998 Help

Mitigation Plan Information

Is the entity that will benefit from the proposed activity covered by a current FEMA-approved multi-hazard mitigation plan in compliance with 44 CFR Part 201?	Yes

If Yes, please answer the following:

What is the name of the plan?	Galveston County Hazard Mitigation Plan
What is the type of plan?	Local Multi/Jurisdictional Multihazard Mitigation Plan
When was the current multihazard mitigation plan approved by FEMA?	04-18-2011
Describe how the proposed activity relates to or is consistent with the FEMA-approved mitigation plan.	The proposed activity is consistent with Goal 2 of the Galveston County Hazard Mitigation Plan, to develop hazard mitigation policies and programs designed to reduce the impact of natural and human caused hazards on people and property. This goal and objective also is consistent with the action to reduce the repetitive losses to the NFIP. By elevating the flood prone structures out of harms way, it will prevent future flooding and damages to these areas.

If No or Not Known, please answer the following:

Does the entity have any other mitigation plans adopted?	Yes

If Yes, please provide the following information.

Plan Name	Plan Type	Date Adopted	Attachment
Bolivar Peninsula Flood Mitigation Plan	FMA or CRS Plan	01-28-2002	Bolivar Flood Mitigation Plan Final.zip

Does the State/Tribe in which the entity is located have a current FEMA-approved mitigation plan in compliance with 44 CFR Part 201?	Yes

If Yes, please answer the following:

What is the name of the plan?	Texas Mitigation Plan - Standard
What is the type of plan?	Standard State Multi-hazard Mitigation Plan
When was the current multihazard mitigation plan approved by FEMA?	10-26-2007
Describe how the proposed activity relates to or is consistent with the State/Tribe's FEMA-approved mitigation plan.	The proposed activity is consistent with the State's FEMA Approved Mitigation plan to reduce the number of repetitive and Severe Repetitive Loss Properties in the State of Texas.

If you would like to make any comments, please enter them below.

The Galveston County Hazard Mitigation Plan was approved by FEMA 4/18/2011, and is in the process of being adopted by the jurisdictions. Final adoption is anticipated before June 1, 2011

To attach documents, click the *Attachments* button below.

Galveston/Update-FINAL-APA.pdf

Mitigation Activity Information

Help

What type of activity are you proposing?

202.1 - Elevation of Private Structures - Riverine
202.2 - Elevation of Private Structures - Coastal

If you selected Other or Miscellaneous, above, please specify:

Title of your proposed activity:

Galveston County Elevation Application - SRL 2011

Are you doing construction in this project?

Yes

If you would like to make any comments, please enter them below

Attachments.

Problem Description

Please describe the problem to be mitigated. Include the geographic area in your description.

As a result of localized flooding, tropical storms and hurricanes, many areas in Galveston County have been affected from damaging and repetitive flooding. This project is needed to reduce NFIP claims, economic loss and disruption resulting from the repeated flooding of residential structures in these areas. GEOGRAPHIC LOCATION: The project locations spread throughout the County of Galveston but all are located within jurisdictional boundaries. Specific project locations can be found on the project location maps and on the attached index spreadsheet.

Enter the Latitude and Longitude coordinates for the project area.

Latitude:	29 29
Longitude:	94 79

Attachments.

Hazard Information

Select hazards to be mitigated	Coastal Storm, Flood, Hurricane, Tropical Cyclones
If other hazards, please specify	
If you would like to make any comments, please enter them below	

Attachments:

FIRM Information

Is the project located within a hazard area:	Floodplain,Other identified high hazard area
If other identified high hazard area, please specify:	Localized Flooding, Hurricanes, Tropical Storms
Is there a Flood Insurance Rate Map (FIRM) or Flood Hazard Boundary Map (FHBM) available for your project area?	Yes
Enter FIRM Panel Number:	Multiple FIRM Panels are included in this project. They are included on the T-props spreadsheet.
Is the project site marked on the map?	Hard copy provided
Select Flood Zone Designation	Area of minimal flood hazards (C, X), Area of moderate flood hazards (B, X)

Scope of Work

What are the goals and objectives of this activity?

The goal of this activity is to reduce flood damage and NFIP claims to vulnerable residential homes in Galveston County, Texas. This mitigation project will result in elevation projects reduce or eliminate the flooding of residential homes by elevating them above the base flood elevation (BFE) or alternative height. By elevating these homes, this will eliminate claims to the NFIP, decrease the burden of insurance premiums and create more disaster resistant communities within Galveston County

Briefly describe the need for this activity

All of the structures included in the application are flood prone structures located in multiple cities in Galveston County These areas have experienced chronic and repetitive flooding in the past ten years and will continue to experience additional losses if these structures are not mitigated.

Describe the problems this activity will address.

This activity will address and reduce flood damage and NFIP claims to vulnerable homes.

Describe the methodology for implementing this activity

After identifying the need for the project, the County of Galveston (County) determined that submitting an application for elevation of flood prone homes through the FEMA SRL was in the best interest of the communities of the County The County resolved to submit the SRL elevation application, and they involved all willing participants of the cities in the jurisdiction, who are included on this application. After this decision, it was determined that the services of a professional disaster recovery consultant were needed to properly complete the application and submit it within the allotted time frame, and to manage and execute the grant once approved. Science Applications International Corporation (SAIC), which had been competitively procured and approved by the County Commissioners Court through an RFP process, will manage all aspects of this project. This will include parcel-specific and overall project management. SAIC will provide labor and the necessary resources to allow a dedicated staff to manage the project from application completion to closeout. Taking into account County interest in elevations, prior flood losses,and depth and proximity near and in the floodplain, 220 properties were identified for this application that were preliminarily eligible for elevation. Galveston County has only two alternatives to this option; acquisition and demolition. These homes sit deep in the floodplain and/or are damaged structurally but are sound enough to withstand elevation; therefore, acquisition is not a desirable alternative. Not taking action is not an acceptable alternative because it leaves the homes and residents in harm's way If no action is taken it is anticipated that these homes will continue to experience losses. The affected citizens would be burdened with tremendous expenditures of repair and relocation as a result of future flood losses. Elevating these structures would result in the best reduction of flood costs for the private citizens, NFIP, and emergency services.

If you would like to make any comments, please enter them below

Attachments.

Enter Work Schedule

Description Of Task	Starting Point	Unit Of Time	Duration	Unit Of Time	Work Complete By
Grant Approved – Begin Project Management and Contracting for Engineering Services	1	MONTHS	2	MONTHS	SAIC and Galveston County SRL Team
Contract for Elevation Services	2	MONTHS	3	MONTHS	SAIC and Galveston County SRL Team
Owners of Impending Elevation Projects	2	MONTHS	4	MONTHS	SAIC and Galveston County SRL Team
,late Elevation Projects	3	MONTHS	23	MONTHS	SAIC and Galveston County SRL Team
Estimate the total duration of the proposed activity:			24	MONTHS	

Properties

Damaged Property Address:			
Address line 1	4730 JAMAICA COVE Rd		
Address line 2			
City	JAMAICA BEACH		
County	Galveston		
State	TX		
ZIP	77554		
Owner Information:			
First Name	STEVEN M		
Middle Name			
Last Name	MOTYKA		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	9369 JAMAICA BEACH Rd		
Address line 2			
Other (PO Box, Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77554		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4192-0014-0009-000
Property Tax Identification Number	R124642
Latitude	29 192
Longitude	-94.978
Does this property have an NFIP Policy Number	Yes
Policy Number	99999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	133,660.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0.92
Repetitive Loss Structure	Yes
Property Locator Number	0123212
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	
ABST 121 PAGE 36 LOT 9 BLK N JAMAICA BEACH SEC 5	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
JAMAICA BEACH, VILLAGE OF	481271	4812710001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	16619 JOHN SILVER Rd		
Address line 2			
City	JAMAICA BEACH		
County	Galveston		
State	TX		
ZIP	77554		
Owner Information:			
First Name	GORDON W		
Middle Name			
Last Name	GUFFIN		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	1905 A HAZARD St		
Address line 2			
Other (PO Box, Route, etc)			
City	HOUSTON		
State	TX		
ZIP	77019 - 6108		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1974
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4187-0008-0010-000
Property Tax Identification Number	R124490
Latitude	29 188
Longitude	-94 978
Does this property have an NFIP Policy Number	Yes
Policy Number	2553D31618
Insurance Policy Provider	25143
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	199,010 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 223
Repetitive Loss Structure	Yes
Property Locator Number	0100448
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 121 PAGE 38 LOTS 10,12 & 14 BLK F JAMAICA BEACH	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
JAMAICA BEACH, VILLAGE OF	481271	4812710002C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	16603 JAMAICA INN Rd	
Address line 2		
City	JAMAICA BEACH	
County	Galveston	
State	TX	
ZIP	77554	
Owner Information:		
First Name	MARSHALL B	
Middle Name		
Last Name	MONROE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	PO BOX 1067	
Address line 2		
Other (PO Box, Route, etc)	1067	
City	BACLIFF	
State	TX	
ZIP	77518	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1976
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4190-0008-0016-000
Property Tax Identification Number	R124578
Latitude	29 189
Longitude	-94 978
Does this property have an NFIP Policy Number	Yes
Policy Number	4000080502
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	199,270 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 845
Repetitive Loss Structure	Yes
Property Locator Number	0124276
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	
ABST 121 PAGE 36 LOTS 16 & 18 BLK H JAMAICA BEACH SEC 3	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
JAMAICA BEACH, VILLAGE OF	481271	4812710001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	16508 TAMPICO Way		
Address line 2			
City	JAMAICA BEACH		
County	Galveston		
State	TX		
ZIP	77554		
Owner Information:			
First Name	F TARRANT		
Middle Name			
Last Name	FENDLEY		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	6118 BERWICK Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	LEAGUE CITY		
State	TX		
ZIP	77573		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1998
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4208-0000-0032-000
Property Tax Identification Number	R125080
Latitude	29 195
Longitude	-94 98
Does this property have an NFIP Policy Number	Yes
Policy Number	1150038528
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	248,910 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	2.132
Repetitive Loss Structure	Yes
Property Locator Number	0101801
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 121 PAGE 29 LOT 32 JAMAICA BEACH SEC 20	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
JAMAICA BEACH, VILLAGE OF	481271	4812710001C	04-04-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	807 AVE E	
Address line 2		
City	SAN LEON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	PHILIP III	
Middle Name		
Last Name	THARP	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	PO BOX 8916	
Address line 2		
Other (PO Box, Route, etc)	8916	
City	BACLIFF	
State	TX	
ZIP	77519	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1976
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	6240-0098-0011-001
Property Tax Identification Number	R150249
Latitude	29 49
Longitude	-94 92
Does this property have an NFIP Policy Number	Yes
Policy Number	1803165818
Insurance Policy Provider	19232
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	79,160 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 618
Repetitive Loss Structure	Yes
Property Locator Number	0002865
Number of Losses	4 or More claims since 1978

Legal Description

ABST 10 A EDWARDS LTS 11-14 BLK 98 SAN LEON E-108 FT-8TH ST

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
,o property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	4854700105C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	3806 BAYOU Cir		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	PEDRO		
Middle Name			
Last Name	MARTINEZ		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	419 OAK Rd		
Address line 2			
Other (PO Box, Route, etc)			
City	CLEAR LAKE SHORES		
State	TX		
ZIP	77565		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1970
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1515-0000-0116-000
Property Tax Identification Number	R162454
Latitude	29 452
Longitude	-95 069
Does this property have an NFIP Policy Number	Yes
Policy Number	117096396
Insurance Policy Provider	14168
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	84,070 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 391
Repetitive Loss Structure	Yes
Property Locator Number	0014445
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value

Legal Description

ABST 19 PERRY & AUSTIN LOT 116 S/D OF 162-167 BAYOU OAKS ADDN D *SBPCL 151500000116001*

Property Information II	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	48156900058	03-04-1991

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	3815 BAYOU Clr		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	HOWARD D		
Middle Name			
Last Name	TRUMP		
Phone	Home	Office	
		Ext.	
	Cell	Other	
		Ext.	
Owner's Mailing Address:			
Address line 1	3815 BAYOU Clr		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1970
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1515-0000-0113-000
Property Tax Identification Number	R162449
Latitude	29 453
Longitude	-95 068
Does this property have an NFIP Policy Number	Yes
Policy Number	9901408570
Insurance Policy Provider	28401
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	84,110 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 818
Repetitive Loss Structure	Yes
Property Locator Number	0045379
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 19 PERRY & AUSTIN LOT 113 BLK 162 BAYOU OAKS S-D	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
,ie property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	4815690005B	03-04-1991

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	3525 ELM Dr	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	JOHN III	
Middle Name		
Last Name	DELEON	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	3525 ELM Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1960
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3015-0141-0007-000
Property Tax Identification Number	R163407
Latitude	29 455
Longitude	-95 07
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00044421
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	132,660 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 67
Repetitive Loss Structure	Yes
Property Locator Number	0068705
Number of Losses	2-3 claims Cumulatively > building Fair Market Value
Legal Description	

ABST 19 PERRY & AUSTIN 110 X 245 X 285 FT OUT BLK 141 TR G ADDN D DICKINSON & IMPS

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	4815690005B	03-04-1991

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	4416 LEONETTI Lane	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	JOHN R	
Middle Name		
Last Name	BENSON	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	4416 LEONETTI Lane	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2805-0000-0023-000
Property Tax Identification Number	R205075
Latitude	29 461
Longitude	-95 022
Does this property have an NFIP Policy Number	Yes
Policy Number	8704098514
Insurance Policy Provider	21660
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	100,720 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0.924
Repetitive Loss Structure	Yes
Property Locator Number	0026495
Number of Losses	2-3 claims Cumulatively > building Fair Market Value
Legal Description	

ABST 155 P G MERRITT LOT 23 COUNTRY CLUB ESTATES UNREC

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	4815690010A	02-16-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	4423 LEONETTI Lane	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	RONALD W, Jr	
Middle Name		
Last Name	PUCEK	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	4423 LEONETTI Lane	
Address line 2		
Other (PO Box, Route, etc)	3282	
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1966
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	0155-0033-0000-000
Property Tax Identification Number	R204250
Latitude	29 461
Longitude	-95 021
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	105,170 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 665
Repetitive Loss Structure	Yes
Property Locator Number	0034285
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 155 PAGE 4 P MERRITT SUR TR 33 2.604 ACRS	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	4815690010A	02-16-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	3510 MAPLE Dr	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	CHRISTOPHER M	
Middle Name		
Last Name	SHIMEK	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	3510 MAPLE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1977
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3015-0141-0010-000
Property Tax Identification Number	R163409
Latitude	29 456
Longitude	-95 07
Does this property have an NFIP Policy Number	Yes
Policy Number	126885498
Insurance Policy Provider	28401
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	93,660 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 613
Repetitive Loss Structure	Yes
Property Locator Number	0068758
Number of Losses	4 or More claims since 1978

Legal Description

ABST 19 PERRY & AUSTIN 90 FT X 200 FT LOT 141 TR J ADDN D DICKINSON

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	4815690005B	03-04-1991

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	3605 MAPLE Dr		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	KENNETH		
Middle Name			
Last Name	CATO		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	3605 MAPLE Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4885-0000-0011-000
Property Tax Identification Number	R164895
Latitude	29 455
Longitude	-95 069
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00044600
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	105,950 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 045
Repetitive Loss Structure	Yes
Property Locator Number	0044748
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value

Legal Description

ABST 19 PERRY & AUSTIN LOT 11 ADDN D DICKINSON MAGNOLIA TERRACE

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	4815690005B	03-04-1991

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	1010 ROSEWOOD Dr	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	KELLY	
Middle Name		
Last Name	BRAUTIGAM	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	27001 AGOURA HILLS	
Address line 2		
Other (PO Box, Route, etc)		
City	CALABASAS	
State	CA	
ZIP	91301	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	6200-0000-0018-000
Property Tax Identification Number	R186978
Latitude	29 456
Longitude	-95 071
Does this property have an NFIP Policy Number	Yes
Policy Number	6500563512
Insurance Policy Provider	19070
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	127,550 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 655
Repetitive Loss Structure	Yes
Property Locator Number	0113915
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value

Legal Description

ABST 19 PERRY & AUSTIN LOTS 18 -19 SEC 1 ROSEWOOD VILLAS S-D OF BLK 127 ADDN D TO DICKINSON

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
'here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ie property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	48157900058	03-04-1991

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	3942 WAGON Rd	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	MACK P	
Middle Name		
Last Name	SULLIVAN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	3942 WAGON Rd	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1987
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3025-0000-0016-000
Property Tax Identification Number	R163602
Latitude	29 457
Longitude	-95 057
Does this property have an NFIP Policy Number	Yes
Policy Number	1150034326
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	84,260 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 669
Repetitive Loss Structure	Yes
Property Locator Number	0018649
Number of Losses	2-3 claims Cumulatively > building Fair Market Value
Legal Description	

ABST 19 PERRY & AUSTIN LOT 16 DICKINSON BAYOU PARK S-D

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	4815690010A	02-16-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	201 BLUE POINT Rd	
Address line 2		
City	CLEAR LAKE SHORES	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	ROGER	
Middle Name		
Last Name	DERICK	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	201 BLUE POINT Rd	
Address line 2		
Other (PO Box, Route, etc)		
City	CLEAR LAKE SHORES	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	0018-0083-0000-000
Property Tax Identification Number	R158494
Latitude	29 55
Longitude	-95 03
Does this property have an NFIP Policy Number	Yes
Policy Number	1150585522
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	260,910 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 782
Repetitive Loss Structure	Yes
Property Locator Number	0173446
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	
ABST 18 PAGE 14 M MULDOON SUR TR 83 186 ACS	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854810001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	631 CLEAR LAKE Rd		
Address line 2			
City	CLEAR LAKE SHORES		
County	Galveston		
State	TX		
ZIP	77565		
Owner Information:			
First Name	EDMUND BRIAN		
Middle Name			
Last Name	CHERNECKE		
Phone	Home	Office	
		Ext.	
	Cell	Other	
		Ext.	
Owner's Mailing Address:			
Address line 1	4017 AVENUE O 1/2		
Address line 2			
Other (PO Box, Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77550 - 6649		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1950
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	2620-0000-0792-000
Property Tax Identification Number	R159009
Latitude	29 544
Longitude	-95 032
Does this property have an NFIP Policy Number	Yes
Policy Number	051658220F
Insurance Policy Provider	2003
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	88,260 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 251
Repetitive Loss Structure	Yes
Property Locator Number	0018542
Number of Losses	2-3 claims Cumulatively > building Fair Market Value

Legal Description

ABST 18 PAGE 14 LOTS 792 TO 794 CLEAR LAKE SHORES

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	923 DOGWOOD Rd		
Address line 2			
City	CLEAR LAKE SHORES		
County	Galveston		
State	TX		
ZIP	77565		
Owner Information:			
First Name	EDWARD		
Middle Name			
Last Name	WATERS		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	923 DOGWOOD Rd		
Address line 2			
Other (PO Box, Route, etc)	70		
City	CLEAR LAKE SHORES		
State	TX		
ZIP	77565		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1966
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2620-0000-0755-000
Property Tax Identification Number	R158995
Latitude	29 544
Longitude	-95 032
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	80,300 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 845
Repetitive Loss Structure	Yes
Property Locator Number	0026660
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 18 PAGE 14 LOTS 755 & 756 & 757 CLEAR LAKE SHORES	

Property Information II	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	707 NARCISSUS Rd		
Address line 2			
City	CLEAR LAKE SHORES		
County	Galveston		
State	TX		
ZIP	77565		
Owner Information:			
First Name	CRAIG E		
Middle Name			
Last Name	WARD		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	707 NARCISSUS Rd		
Address line 2			
Other (PO Box, Route, etc)			
City	CLEAR LAKE SHORES		
State	TX		
ZIP	77565		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1991
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2620-0000-0297-000
Property Tax Identification Number	R158841
Latitude	29 544
Longitude	-95 034
Does this property have an NFIP Policy Number	Yes
Policy Number	028682241F
Insurance Policy Provider	2003
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	194,460 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 334
Repetitive Loss Structure	Yes
Property Locator Number	0015984
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	

ABST 18 PAGE 9 LOTS 297 THRU 300 CLEAR LAKE SHORES

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ie property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	715 OAK Rd		
Address line 2			
City	CLEAR LAKE SHORES		
County	Galveston		
State	TX		
ZIP	77565		
Owner Information:			
First Name	JERRY L		
Middle Name			
Last Name	MCGINTY		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	715 OAK Rd		
Address line 2			
Other (PO Box, Route, etc)	55693		
City	CLEAR LAKE SHORES		
State	TX		
ZIP	77565		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1976
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2620-0000-0370-000
Property Tax Identification Number	R158861
Latitude	29 544
Longitude	-95 033
Does this property have an NFIP Policy Number	Yes
Policy Number	2553SD3872
Insurance Policy Provider	25143
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	168,660 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 125
Repetitive Loss Structure	Yes
Property Locator Number	0013256
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 18 PGE 9 LOTS 370 THRU 372 CLEAR LAKE SHORES	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	8 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	202 QUEEN Rd	
Address line 2		
City	CLEAR LAKE SHORES	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	BRIAN	
Middle Name		
Last Name	KEMPEL	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	202 QUEEN Rd	
Address line 2		
Other (PO Box, Route, etc)		
City	CLEAR LAKE SHORES	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1963
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2620-0000-1824-000
Property Tax Identification Number	R159319
Latitude	29 549
Longitude	-95 031
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00002023
Insurance Policy Provider	99999
Select hazard to be mitigated*	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	115 370 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 806
Repetitive Loss Structure	Yes
Property Locator Number	0109289
Number of Losses	4 or More claims since 1978

Legal Description

ABST 18 PAGE 14 LOTS 1824 & 1823 CLEAR LAKE SHORES

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	1003 SHORE Dr	
Address line 2		
City	CLEAR LAKE SHORES	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	KEVIN C	
Middle Name		
Last Name	FUNSCH	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	1003 SHORE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	CLEAR LAKE SHORES	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1955
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2620-0000-2134-000
Property Tax Identification Number	R159418
Latitude	29 551
Longitude	-95 032
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	91,060 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 722
Repetitive Loss Structure	Yes
Property Locator Number	0017272
Number of Losses	4 or More claims since 1978

Legal Description

ABST 18 PAGE 9 N 15 FT OF E 1/2 OF LOT 2116, E 1/2 OF LOT 2117 & ALL OF LOT 2134 & 2135 & E 1/2 OF LOT 2136 CLEAR LAKE SHORES

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet

First Floor Elevation (only applicable when Property Action is Elevation)	19.0 feet
Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	130 SHORE Dr	
Address line 2		
City	CLEAR LAKE SHORES	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	JEAN	
Middle Name		
Last Name	HEMBY	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	130 SHORE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	CLEAR LAKE SHORES	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	2000
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2620-0000-1931-000
Property Tax Identification Number	R159355
Latitude	29 55
Longitude	-95 03
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00028553
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	385,190 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 871
Repetitive Loss Structure	Yes
Property Locator Number	0017529
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value

Legal Description

ABST 18 PAGE 14 LOTS 1931 THRU 1935 CLEAR LAKE SHORES

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	211 SHORE Dr		
Address line 2			
City	CLEAR LAKE SHORES		
County	Galveston		
State	TX		
ZIP	77565		
Owner Information*			
First Name	STEVEN CASEY		
Middle Name			
Last Name	SIMMS		
Phone	Home	Office	
		Ext.	
	Cell	Other	
		Ext.	
Owner's Mailing Address:			
Address line 1	211 SHORE Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	CLEAR LAKE SHORES		
State	TX		
ZIP	77565		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	2004
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2620-0000-1459-000
Property Tax Identification Number	R423709
Latitude	29 549
Longitude	-95 036
Does this property have an NFIP Policy Number	Yes
Policy Number	2553D16739
Insurance Policy Provider	25143
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	606 320 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	2 188
Repetitive Loss Structure	Yes
Property Locator Number	0016113
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	

ABST 18 LOTS 1459 & 1460 & PT OF 1461 & 1486 THRU 1488 CLEAR LAKE SHORES

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	319 SHORE Dr	
Address line 2		
City	CLEAR LAKE SHORES	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	AUTREY P II	
Middle Name		
Last Name	MCVICKER	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	319 SHORE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	CLEAR LAKE SHORES	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2620-0000-1438-000
Property Tax Identification Number	R159210
Latitude	29 548
Longitude	-95 035
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00044604
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	557,510 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 599
Repetitive Loss Structure	Yes
Property Locator Number	0018695
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	

ABST 18 PAGE 9 LOTS 1438 THRU 1442, 1472 & 1/2 OF LOT 1473 CLEAR LAKE SHORES

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	506 SHORE Dr	
Address line 2		
City	CLEAR LAKE SHORES	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information.		
First Name	AMANDA	
Middle Name		
Last Name	BOOREN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	506 SHORE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	CLEAR LAKE SHORES	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2620-0000-1076-001
Property Tax Identification Number	R360710
Latitude	29 547
Longitude	-95 03
Does this property have an NFIP Policy Number	Yes
Policy Number	4000038983
Insurance Policy Provider	99999
Select hazard to be mitigated.	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	154,180 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 696
Repetitive Loss Structure	Yes
Property Locator Number	0025949
Number of Losses	4 or More claims since 1978

Legal Description

ABST 18 PAGE 4 LOTS 1076 & 1077,1083,1084 & N 1/2 OF LOT 1085 & E 1/2 OF LOT 1075 (1076-1) CLEAR LAKE SHORES

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	619 SHORE Dr		
Address line 2			
City	CLEAR LAKE SHORES		
County	Galveston		
State	TX		
ZIP	77565		
Owner Information:			
First Name	FAMILY TR		
Middle Name			
Last Name	BYERLY		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	20 COZUMEL Cir		
Address line 2			
Other (PO Box, Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77554 - 9344		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1993
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	2620-0000-0247-000
Property Tax Identification Number	R355513
Latitude	29 545
Longitude	-95.035
Does this property have an NFIP Policy Number	Yes
Policy Number	9902370397
Insurance Policy Provider	21680
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	596,160 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 651
Repetitive Loss Structure	Yes
Property Locator Number	0044161
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	

ABST 18 PAGE 9 LOTS 247 & 248 & PT OF LOT 246 CLEAR LAKES SHORES

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	927 SHORE Dr	
Address line 2		
City	CLEAR LAKE SHORES	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	W THOMAS	
Middle Name		
Last Name	MCANDREW	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	927 SHORE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	CLEAR LAKE SHORES	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1991
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2620-0000-2090-000
Property Tax Identification Number	R159412
Latitude	29 551
Longitude	-95 032
Does this property have an NFIP Policy Number	Yes
Policy Number	4000033512
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	664,850 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 987
Repetitive Loss Structure	Yes
Property Locator Number	0018408
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	

ABST 18 PAGE 9 & 14 LOTS 2090, 2096 & 2097 CLEAR LAKE SHORES

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	615 CASTLE HARBOUR Dr	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	MAX B	
Middle Name		
Last Name	KILBOURN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	615 CASTLE HARBOUR Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1979
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	6832-0009-0051-000
Property Tax Identification Number	R219242
Latitude	29 492
Longitude	-95 216
Does this property have an NFIP Policy Number	Yes
Policy Number	4000071463
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	143,730 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 75
Repetitive Loss Structure	Yes
Property Locator Number	0044323
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 184 PAGE 1 LOT 51 BLK 9 SUNMEADOW SEC 3	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	48546800050	06-03-1986

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	1203 COWARDS CREEK Dr	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	ERIC Y	
Middle Name		
Last Name	REDMAN	
Phone	Home	Office Ext.
	Cell	Other Ext
Owner's Mailing Address.		
Address line 1	1203 COWARDS CREEK Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1977
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2390-0007-0003-002
Property Tax Identification Number	R200689
Latitude	29 515
Longitude	-95.218
Does this property have an NFIP Policy Number	Yes
Policy Number	031920441F
Insurance Policy Provider	2003
Select hazard to be mitigated.	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	381,420 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 307
Repetitive Loss Structure	Yes
Property Locator Number	0035200
Number of Losses	4 or More claims since 1978

Legal Description

ABST 151 PAGE 2 PT OF LOT 3 (3-2) BLK G & ADJ CLOSED ST CENTRAL PARK SUB

Property Information II:	
- Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
is property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	06-03-1988

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	300 COURTLANDT PI	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	PAUL F	
Middle Name		
Last Name	THOMPSON	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	300 COURTLANDT PI	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1976
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3866-0000-0004-000
Property Tax Identification Number	R201935
Latitude	29.519
Longitude	-95 197
Does this property have an NFIP Policy Number	Yes
Policy Number	1150488705
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	407,920 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 367
Repetitive Loss Structure	Yes
Property Locator Number	0026307
Number of Losses	4 or More claims since 1978

Legal Description

ABST 151 PAGE 6 LOT 4 HARVEY & STOUT SUB OF BLK 5 FRIENDSWOOD

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	1323 DEEPWOOD Dr	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	CHRISTOPHER J	
Middle Name		
Last Name	ELLIS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	2740 MASTERS Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	LEAGUE CITY	
State	TX	
ZIP	77573	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1964
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1090-0000-0004-000
Property Tax Identification Number	R200292
Latitude	29 519
Longitude	-95 184
Does this property have an NFIP Policy Number	Yes
Policy Number	033134980F
Insurance Policy Provider	2003
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	19,930 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 919
Repetitive Loss Structure	Yes
Property Locator Number	0028530
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 PAGE 10 LOT 4 ALMAS PERDIDAS	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485488	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:

Address line 1	701 DORAL Ct
Address line 2	
City	FRIENDSWOOD
County	Galveston
State	TX
ZIP	77546

Owner Information:

First Name	CURTIS W		
Middle Name			
Last Name	POST		
Phone	Home	Office	Ext.
	Cell	Other	Ext.

Owner's Mailing Address.

Address line 1	701 DORAL Ct
Address line 2	
Other (PO Box, Route, etc)	
City	FRIENDSWOOD
State	TX
ZIP	77546
Does this property have other co-owners or holders of recorded interest?	N

Property Information:

Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	6831-0009-0039-000
Property Tax Identification Number	R219120
Latitude	29 493
Longitude	-95 216
Does this property have an NFIP Policy Number	Yes
Policy Number	129306298
Insurance Policy Provider	28401
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	109,970 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 642
Repetitive Loss Structure	Yes
Property Locator Number	0068109
Number of Losses	2-3 claims Cumulatively > building Fair Market Value

Legal Description

ABST 184 PAGE 1 LOT 39 BLK 9 SUNMEADOW SEC 2

Property Information II:

Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

	Properties	
Damaged Property Address:		
Address line 1	67 EL DORADO Dr	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	DEVIN B	
Middle Name		
Last Name	KNOPS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	67 EL DORADO Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1978
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3175-0000-0010-000
Property Tax Identification Number	R231940
Latitude	29 478
Longitude	-95 211
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00040092
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	219,140 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 076
Repetitive Loss Structure	Yes
Property Locator Number	0025931
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 625 PAGE 3 LOT 10 EL DORADO SUB	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
s property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	08-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	508 FALLING LEAF Dr		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	QUINN L		
Middle Name			
Last Name	CARELOCK		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	508 FALLING LEAF Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1970
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4120-0000-0015-000
Property Tax Identification Number	R202297
Latitude	29 521
Longitude	-95.204
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	147,900 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 37
Repetitive Loss Structure	Yes
Property Locator Number	0017674
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 PAGE 6 LOT 15 IMPERIAL GARDENS	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485488	4854680005D	08-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	510 FALLING LEAF Dr	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	DAVID M	
Middle Name		
Last Name	BRIDGES	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	510 FALLING LEAF Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1985
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4120-0000-0016-000
Property Tax Identification Number	R202298
Latitude	29 521
Longitude	-95 205
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated.	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	202,440 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 643
Repetitive Loss Structure	Yes
Property Locator Number	0017579
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 PAGE 6 LOT 16 IMPERIAL GARDENS	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485488	4854680005D	06-03-1988

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	152 IMPERIAL Dr	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	JUDY C	
Middle Name		
Last Name	GARCIA	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	152 IMPERIAL Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1970
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4116-0000-0029-000
Property Tax Identification Number	R202183
Latitude	29 54
Longitude	-95 197
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00044358
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	119,670 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 749
Repetitive Loss Structure	Yes
Property Locator Number	0068182
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 PAGE 4 LOT 29 IMPERIAL ESTATES	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	06-03-1988

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	1201 MINGLEWOOD Lane		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	ROBERT J		
Middle Name			
Last Name	MASSICOTT		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	1201 MINGLEWOOD Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1970
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2610-0000-0035-000
Property Tax Identification Number	R200765
Latitude	29.523
Longitude	-95 186
Does this property have an NFIP Policy Number	Yes
Policy Number	8702180625
Insurance Policy Provider	19682
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	119,860 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 175
Repetitive Loss Structure	Yes
Property Locator Number	0026589
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 PAGE 10 LOT 35 CLEAR CREEK WOODS	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.re property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485488	4854680005D	08-03-1988

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	2201 PINE Dr	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	GREGORY K	
Middle Name		
Last Name	HOFF	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	2201 PINE Dr	
Address line 2		
Other (PO Box, Route, etc)	1346	
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)	1984	
SHPO Review	Not Applicable	
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Slab on Grade	
Basement	No	
Type of Residence	Owner Occupied-Principal Residence	
Parcel Number	5926-0000-0026-000	
Property Tax Identification Number	R202717	
Latitude	29 508	
Longitude	-95 172	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value	299,750 00	
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 62	
Repetitive Loss Structure	Yes	
Property Locator Number	0073459	
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value	
Legal Description		
ABST 9 PAGE 12 LOT 28 POLLY RANCH ESTATES REPLAT		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	8 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	810 QUAKER Dr	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	KAREN D	
Middle Name		
Last Name	GRESS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	RR 3 BOX 872	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539 - 9617	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1978
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	6020-0000-0012-000
Property Tax Identification Number	R202588
Latitude	29 526
Longitude	-95 192
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated.	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	196,900 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 867
Repetitive Loss Structure	Yes
Property Locator Number	0068123
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 PAGE 5 LOT 12 QUAKERS LANDING	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485488	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	901 QUAKER Dr		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	DAVID S		
Middle Name			
Last Name	MCKAY		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	901 QUAKER Dr		
Address line 2			
Other (PO Box, Route, etc)	1256		
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1982
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3460-0011-0001-004
Property Tax Identification Number	R201536
Latitude	29 527
Longitude	-95 19
Does this property have an NFIP Policy Number	Yes
Policy Number	1150489777
Insurance Policy Provider	11523
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	232,820 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 768
Repetitive Loss Structure	Yes
Property Locator Number	0068124
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 151 PAGE 5 PT OF LOT 1 (1-4) BLK 11 FRIENDSWOOD SUB

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485488	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	403 RICHMOND Lane	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	MICHAEL A	
Middle Name		
Last Name	LOVE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	403 RICHMOND Lane	
Address line 2		
Other (PO Box, Route, etc)	8656	
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1993
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3925-0008-0005-000
Property Tax Identification Number	R202027
Latitude	29 535
Longitude	-95 194
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	245,080 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 714
Repetitive Loss Structure	Yes
Property Locator Number	0168782
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	
ABST 151 PAGE 4 LOT 5 BLK 5 HERITAGE ESTATES	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	110 ROYAL Ct	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	WENDY	
Middle Name		
Last Name	FARLEY	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	110 ROYAL Ct	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1966
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4117-0000-0113-000
Property Tax Identification Number	R202288
Latitude	29 537
Longitude	-95.201
Does this property have an NFIP Policy Number	Yes
Policy Number	004605870F
Insurance Policy Provider	2003
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	162,020 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 015
Repetitive Loss Structure	Yes
Property Locator Number	0068107
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 PAGE 4 LOT 113 IMPERIAL ESTATES SEC 2	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	124 ST ANDREWS Dr		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	JOHN J		
Middle Name			
Last Name	GRADY		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	124 ST ANDREWS Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1979
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	6830-0003-0017-000
Property Tax Identification Number	R218829
Latitude	29 483
Longitude	-95 225
Does this property have an NFIP Policy Number	Yes
Policy Number	1150132793
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	134,640 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 637
Repetitive Loss Structure	Yes
Property Locator Number	0018822
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 184 PAGE 2 LOT 17 BLK 3 SUNMEADOW	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485466	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	128 ST ANDREWS Dr	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	KEVIN R	
Middle Name		
Last Name	SLUDER	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	128 ST ANDREWS Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1980
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	6830-0003-0016-000
Property Tax Identification Number	R218828
Latitude	29 484
Longitude	-95 225
Does this property have an NFIP Policy Number	Yes
Policy Number	1150012583
Insurance Policy Provider	11523
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	142,950 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 113
Repetitive Loss Structure	Yes
Property Locator Number	0018743
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 184 PAGE 2 LOT 16 BLK 3 SUNMEADOW	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	48546800050	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	1 WHITTIER Dr		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	RONALD G		
Middle Name			
Last Name	LOVELY		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	1 WHITTIER Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1978
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	6020-0000-0021-000
Property Tax Identification Number	R202596
Latitude	29 527
Longitude	-95 191
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	184,240 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 394
Repetitive Loss Structure	Yes
Property Locator Number	0012848
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 S MCKISSICK SUR LOT 21 QUAKERS LANDING	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485466	48546800050	08-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	203 WINDING Rd	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	JAY K	
Middle Name		
Last Name	WOODS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	203 WINDING Rd	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1960
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	7325-0002-0021-000
Property Tax Identification Number	R169199
Latitude	29 543
Longitude	-95 217
Does this property have an NFIP Policy Number	Yes
Policy Number	1150561323
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	124,810 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 646
Repetitive Loss Structure	Yes
Property Locator Number	0026107
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	

ABST 20 PAGE 4 PT OF LT 21 & ALL OF LOT 22 BLK 2 VILLAGE GREEN

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation *(only applicable when Property Action is Elevation)*	22 0 feet
First Floor Elevation *(only applicable when Property Action is Elevation)*	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
a property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	5804 AVE S 1/2	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	R G III	
Middle Name		
Last Name	REAGAN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	5804 AVE S 1/2	
Address line 2		
Other (PO Box, Route, etc)	1268	
City	GALVESTON	
State	TX	
ZIP	77551	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1967
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4385-0006-0016-000
Property Tax Identification Number	R120317
Latitude	29 275
Longitude	-94 827
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	95,430.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 747
Repetitive Loss Structure	Yes
Property Locator Number	0036227
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 121 PAGE 83 LOTS 16 & 17 BLK 6 KINKEADS ADDN	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	8 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	48546900240	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	10020 AIRWAY Lane	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77554	
Owner Information:		
First Name	NORWOOD J	
Middle Name		
Last Name	RUIZ	
Phone	Home	Office Ext.
	Cell	Other Ext
Owner's Mailing Address:		
Address line 1	10020 AIRWAY Lane	
Address line 2		
Other (PO Box, Route, etc)	1230	
City	GALVESTON	
State	TX	
ZIP	77554	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1995
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1045-0000-0019-302
Property Tax Identification Number	R376728
Latitude	29 272
Longitude	-94 877
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	302,050 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 743
Repetitive Loss Structure	Yes
Property Locator Number	0088379
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value

Legal Description

ABST 121 PAGE 72 LOT 19C (19-302) AIRPORT HOMESITES SEC 2

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
a property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690019D	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	1727 BIOVU		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information:			
First Name	MARY JOSEPHINE		
Middle Name			
Last Name	VILLAMIL		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	PO BOX 1044		
Address line 2			
Other (PO Box, Route, etc)	1044		
City	KEMAH		
State	TX		
ZIP	77565		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1540-0000-0016-001
Property Tax Identification Number	R121499
Latitude	29 279
Longitude	-94 837
Does this property have an NFIP Policy Number	Yes
Policy Number	1150654816
Insurance Policy Provider	11523
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	78,340 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 719
Repetitive Loss Structure	Yes
Property Locator Number	0100290
Number of Losses	4 or More claims since 1978

Legal Description

ABST 121 PAGE 83 E 85 FT OF LOT 16 (16-1) BAYOU SHORES-WHEELERS SUB

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	1805 BAYOU SHORE Dr		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information:			
First Name	DON		
Middle Name			
Last Name	MAFRIGE		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	24200 LONGENBAUGH Rd		
Address line 2			
Other (PO Box, Route, etc)			
City	KATY		
State	TX		
ZIP	77493 - 7857		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1982
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1541-0000-0013-000
Property Tax Identification Number	R121271
Latitude	29 283
Longitude	-94 831
Does this property have an NFIP Policy Number	Yes
Policy Number	1150023425
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	226,140 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 856
Repetitive Loss Structure	Yes
Property Locator Number	0098951
Number of Losses	2-3 claims Cumulatively > building Fair Market Value
Legal Description	

ABST 121 PAGE 82 LOT 13 BAYOU SHORE DRIVE UNRECORDED SUB

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
is property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690022D	09-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	10202 CLOUD Lane		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77554		
Owner Information:			
First Name	KENNETH H		
Middle Name			
Last Name	ZIMMERMAN		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	10202 CLOUD Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77554		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1050-0000-0075-000
Property Tax Identification Number	R117644
Latitude	29 266
Longitude	-94 876
Does this property have an NFIP Policy Number	Yes
Policy Number	1150250338
Insurance Policy Provider	11523
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	219,530.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 823
Repetitive Loss Structure	Yes
Property Locator Number	0046783
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 121 PAGE 73 LOT 75 AIRPORT HOMESITES SEC 4	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	48546900190	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	2885 DOMINIQUE Dr	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	TODD R	
Middle Name		
Last Name	FERTITTA	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	2885 DOMINIQUE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77551	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1986
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3877-0002-0017-001
Property Tax Identification Number	R119552
Latitude	29 265
Longitude	-94 847
Does this property have an NFIP Policy Number	Yes
Policy Number	1791E02508
Insurance Policy Provider	99999
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	267,840 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 061
Repetitive Loss Structure	Yes
Property Locator Number	0118763
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value

Legal Description

ABST 121 PAGE 79 PT OF LOTS 17 & 18 (17-1) BLK 2 HAVRE LAFITTE SEC 3

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation *(only applicable when Property Action is Elevation)*	22 0 feet
First Floor Elevation *(only applicable when Property Action is Elevation)*	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690023D	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	6424 HEARDS Lane	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	FRANCISCO J	
Middle Name		
Last Name	CAMPOS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	6427 W CREEK Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	BROOKSIDE VILLAGE	
State	TX	
ZIP	77581	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1948
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1540-0000-0050-001
Property Tax Identification Number	R121535
Latitude	29 278
Longitude	-94 837
Does this property have an NFIP Policy Number	Yes
Policy Number	1150397304
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	24,050 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 834
Repetitive Loss Structure	Yes
Property Locator Number	0098944
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	

ABST 121 PAGE 83 W 37 FT OF LOT 50, E 5 FT OF LOT 49 & ADJ ROAD (50-1) BAYOU SHORES-WHEELERS SUB

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	4820 AVE K		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information:			
First Name	REGINALD R		
Middle Name			
Last Name	CLARK		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	9369 JAMAICA BEACH Rd		
Address line 2			
Other (PO Box, Route, etc)			
City	JAMAICA BEACH		
State	TX		
ZIP	77554		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1955
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	2985-0009-0020-000
Property Tax Identification Number	R109769
Latitude	29 292
Longitude	-94 821
Does this property have an NFIP Policy Number	Yes
Policy Number	1150021169
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	95,800 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 333
Repetitive Loss Structure	Yes
Property Locator Number	0037407
Number of Losses	4 or More claims since 1978

Legal Description

ABST 628 PAGE 98 LOT 20 & W 15 FT OF LOT 19 & E 5 FT OF LOT 21 BLK 9 DENVER RESURVEY

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690022D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	1247 PILOT Lane		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77554		
Owner Information:			
First Name	LEONARD A		
Middle Name			
Last Name	BEDELL		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	3525 ELM Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539 - 4525		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1954
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1045-0000-0008-000
Property Tax Identification Number	R117531
Latitude	29 27
Longitude	-94 877
Does this property have an NFIP Policy Number	Yes
Policy Number	4802491391
Insurance Policy Provider	19232
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	254,050 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 745
Repetitive Loss Structure	Yes
Property Locator Number	0068400
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 121 PAGE 72 LOT 8 AIRPORT HOMESITES SEC 2

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation *(only applicable when Property Action is Elevation)*	22 0 feet
First Floor Elevation *(only applicable when Property Action is Elevation)*	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.ie property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690019D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	5702 AVE Q	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	GABRIELA	
Middle Name		
Last Name	RAMOS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	5702 AVE Q	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77551	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1960
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residance	Owner Occupied-Principal Residence
Parcel Number	2755-0001-0013-001
Property Tax Identification Number	R118721
Latitude	29 28
Longitude	-94 829
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00046780
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	60,920 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 601
Repetitive Loss Structure	Yes
Property Locator Number	0128788
Number of Losses	4 or More claims since 1978

Legal Description

ABST 121 PAGE 82 S 1/2 OF LOTS 13 & 14 (13-1) BLK A COLORADO ADDN

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	5706 AVE Q 1/2	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	CARLA	
Middle Name		
Last Name	ANGELES	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	4423 LEONETTI Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1960
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	2755-0002-0015-000
Property Tax Identification Number	R118734
Latitude	29 279
Longitude	-94 828
Does this property have an NFIP Policy Number	Yes
Policy Number	1791E02009
Insurance Policy Provider	99999
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	22,860 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 669
Repetitive Loss Structure	Yes
Property Locator Number	0017747
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 121 PAGE 83 LOT 15 BLK B COLORADO ADDN	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	5808 AVE Q 1/2	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	GENEVA LOIS	
Middle Name		
Last Name	SULLIVAN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	5808 AVE Q 1/2	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77551	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1967
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4385-0002-0018-000
Property Tax Identification Number	R120277
Latitude	29 279
Longitude	-94 829
Does this property have an NFIP Policy Number	Yes
Policy Number	1150382924
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	73,890 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 301
Repetitive Loss Structure	Yes
Property Locator Number	0047783
Number of Losses	2-3 claims Cumulatively > building Fair Market Value
Legal Description	
ABST 121 PAGE 83 LOT 18 BLK 2 KINKEADS ADDN	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
is property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	6113 AVE Q 1/2		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information:			
First Name	JOHN		
Middle Name			
Last Name	GIACONA		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	3605 MAPLE Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539 - 4533		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	7230-0001-0008-000
Property Tax Identification Number	R121425
Latitude	29 277
Longitude	-94 832
Does this property have an NFIP Policy Number	Yes
Policy Number	1791V00068
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	70,000 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 876
Repetitive Loss Structure	Yes
Property Locator Number	0050995
Number of Losses	4 or More claims since 1978

Legal Description

ABST 121 PAGE 83 LOT 6 & E 1/2 OF LOT 7 BLK 1 HM TRUEHEARTS ADDN

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	48546900240	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	7106 AVE Q 1/2		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information:			
First Name	PEGGY JOYCE		
Middle Name			
Last Name	SWANSON		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	7106 AVE Q 1/2		
Address line 2			
Other (PO Box, Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77551		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1958
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4310-0000-0005-000
Property Tax Identification Number	R120171
Latitude	29 273
Longitude	-94 842
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00047335
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	54,630 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 968
Repetitive Loss Structure	Yes
Property Locator Number	0025159
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 121 PAGE 78 LOT 5 JONES GARDEN HOMES	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address.		
Address line 1	7127 AVE Q 1/2	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	JACK WALTER	
Middle Name		
Last Name	HEITMAN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	7127 AVE Q 1/2	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77551	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4310-0000-0002-000
Property Tax Identification Number	R120168
Latitude	29 273
Longitude	-94 843
Does this property have an NFIP Policy Number	Yes
Policy Number	8704190537
Insurance Policy Provider	21660
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	71,840 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 739
Repetitive Loss Structure	Yes
Property Locator Number	0017334
Number of Losses	*4 or More claims since 1978*
Legal Description	

ABST 121 PAGE 78 LOT 2 & W 5 FT OF LOT 4 JONES GARDEN HOMES

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation *(only applicable when Property Action is Elevation)*	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	5606 AVE R		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information:			
First Name	SCOTT ENTERPRIES LLC		
Middle Name			
Last Name	GREAT		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	923 DOGWOOD Rd		
Address line 2			
Other (PO Box, Route, etc)			
City	CLEAR LAKE SHORES		
State	TX		
ZIP	77585		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1955
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	2965-0143-0013-000
Property Tax Identification Number	R111321
Latitude	29 279
Longitude	-94 826
Does this property have an NFIP Policy Number	Yes
Policy Number	4801932481
Insurance Policy Provider	19232
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	105,000 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 203
Repetitive Loss Structure	Yes
Property Locator Number	0025871
Number of Losses	2-3 claims Cumulatively > building Fair Market Value
Legal Description	

ABST 628 PAGE 92 LOTS 13-15 BLK 143 DENVER RESURVEY

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	5702 AVE R	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	AMPARO	
Middle Name		
Last Name	GONZALEZ	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	5702 AVE R	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77551	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1060-0000-0018-000
Property Tax Identification Number	R111923
Latitude	29 279
Longitude	-94 827
Does this property have an NFIP Policy Number	Yes
Policy Number	1150102990
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	80,700 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 787
Repetitive Loss Structure	Yes
Property Locator Number	0050092
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 628 PAGE 92 LOT 18 AL WEST SUB	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
a property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	5741 AVE R	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	ISRAEL A	
Middle Name		
Last Name	GARZA	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	5741 AVE R	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77551	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1960
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2755-0004-0005-000
Property Tax Identification Number	R118758
Latitude	29.278
Longitude	-94 828
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00042881
Insurance Policy Provider	99999
Select hazard to be mitigated*	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	82,720 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 164
Repetitive Loss Structure	Yes
Property Locator Number	0048741
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 121 PAGE 83 LOTS 5 & 6 BLK D COLORADO ADDN	

Property Information II*	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is a property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	5774 AVE R		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information:			
First Name	SERGIO		
Middle Name			
Last Name	OLVEDA		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	5774 AVE R		
Address line 2			
Other (PO Box, Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77551		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1960
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2755-0003-0022-000
Property Tax Identification Number	R118752
Latitude	29 278
Longitude	-94 828
Does this property have an NFIP Policy Number	Yes
Policy Number	1791O00129
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	74,830.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 401
Repetitive Loss Structure	Yes
Property Locator Number	0049105
Number of Losses	4 or More claims since 1978

Legal Description

ABST 121 PAGE 83 LOT 22 & E 10 FT OF LOT 23 BLK C COLORADO ADDN

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	06-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	7220 AVE R	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	LTD	
Middle Name		
Last Name	GRABER FAMILY PARTNERSHIP	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	1003 NORTH SHORE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	CLEAR LAKE SHORES	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1959
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4880-0003-0007-000
Property Tax Identification Number	R120579
Latitude	29 272
Longitude	-94 843
Does this property have an NFIP Policy Number	Yes
Policy Number	8000957517
Insurance Policy Provider	23035
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	13,830 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 801
Repetitive Loss Structure	Yes
Property Locator Number	0018550
Number of Losses	4 or More claims since 1978

Legal Description

ABST 121 PAGE 78 LOTS 7 & 8 & ADJ 1/2 OF STREET & ALLEY BLK 3 MAGNOLIA PARK SUB

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	23 SOUTH SHORE Dr	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	CHAUNCEY JR	
Middle Name		
Last Name	POPE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	23 SOUTH SHORE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77551	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	6640-0000-0023-000
Property Tax Identification Number	R121284
Latitude	29 28
Longitude	-94 831
Does this property have an NFIP Policy Number	Yes
Policy Number	1791W00004
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	166,420 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 767
Repetitive Loss Structure	Yes
Property Locator Number	0096828
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 121 PAGE 82 LOT 23 & W 1/2 OF LOT 22 SOUTH SHORE SUB

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	212 15TH St		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77550		
Owner Information:			
First Name	KONSTANTIN A		
Middle Name			
Last Name	TSETSARKIN		
Phone	Home	Office	Ext.
	Cell	Other	Ext.
Owner's Mailing Address.			
Address line 1	212 15TH St		
Address line 2			
Other (PO Box, Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77550		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1955
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3505-0614-0001-002
Property Tax Identification Number	R104342
Latitude	29 309
Longitude	-94 786
Does this property have an NFIP Policy Number	Yes
Policy Number	1791I00825
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	55,720 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 006
Repetitive Loss Structure	Yes
Property Locator Number	0046945
Number of Losses	4 or More claims since 1978

Legal Description

ABST 628 PAGE 125 S 34 FT OF LOT 1 & S W PT OF LOT 2 (1-2) BLK 614 GALVESTON

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690026D	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	823 31ST St	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77550	
Owner Information:		
First Name	JUAN JOSE III	
Middle Name		
Last Name	VENTURA	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	319 W SHORE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	KEMAH	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1982
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	3505-0391-0013-000
Property Tax Identification Number	R103205
Latitude	29 301
Longitude	-94 802
Does this property have an NFIP Policy Number	Yes
Policy Number	600111186
Insurance Policy Provider	21660
Select hazard to be mitigated.	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	16,000 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 579
Repetitive Loss Structure	Yes
Property Locator Number	0017627
Number of Losses	*4 or More claims since 1978*
Legal Description	
ABST 628 PAGE 112 LOT 13 BLK 391 GALVESTON	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation *(only applicable when Property Action is Elevation)*	22 0 feet
First Floor Elevation *(only applicable when Property Action is Elevation)*	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
,e property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690026D	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	2114 57TH St		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information:			
First Name	SCOTT		
Middle Name			
Last Name	COGHLIN		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	506 E SHORE Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	CLEAR LAKE SHORES		
State	TX		
ZIP	77565		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1937
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	2965-0142-0023-001
Property Tax Identification Number	R111313
Latitude	29 28
Longitude	-94 827
Does this property have an NFIP Policy Number	Yes
Policy Number	2553D00220
Insurance Policy Provider	25143
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	71,970 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 948
Repetitive Loss Structure	Yes
Property Locator Number	0026074
Number of Losses	4 or More claims since 1978

Legal Description

ABST 628 PAGE 92 N 60 FT OF LOTS 23 & 24 (23-1) BLK 142 DENVER RESURVEY

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	2307 57TH St	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	ISAAC	
Middle Name		
Last Name	GOZLAN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	2307 57TH St	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77551	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1970
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1060-0000-0022-001
Property Tax Identification Number	R111927
Latitude	29 278
Longitude	-94 827
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	64,130 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 618
Repetitive Loss Structure	Yes
Property Locator Number	0017451
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 628 PAGE 93 N 40 FT OF LOT 22 (22-1) AL WEST SUB	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	2307 59TH St		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information:			
First Name	MARIA DEL CARMEN		
Middle Name			
Last Name	MARTINEZ		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	2307 59TH St		
Address line 2			
Other (PO Box, Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77551		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5065-0002-0011-002
Property Tax Identification Number	R120837
Latitude	29 277
Longitude	-94 829
Does this property have an NFIP Policy Number	Yes
Policy Number	8702785039
Insurance Policy Provider	21660
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	83,140 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 624
Repetitive Loss Structure	Yes
Property Locator Number	0050719
Number of Losses	2-3 claims Cumulatively > building Fair Market Value

Legal Description

ABST 121 PAGE 83 S PT OF LOTS 11 THRU 13 (11-2) BLK 2 J F MC NULTY SUB

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	1029 62ND St	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	TRINIDAD R	
Middle Name		
Last Name	HERNANDEZ	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	1203 COWARDS CREEK Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546 - 4603	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1982
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	2715-0002-0030-000
Property Tax Identification Number	R118558
Latitude	29 286
Longitude	-94 839
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	49,620 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 735
Repetitive Loss Structure	Yes
Property Locator Number	0068389
Number of Losses	4 or More claims since 1978

Legal Description

ABST 121 PAGE 82 LOT 30 & N 1/2 OF LOT 31 BLK 2 ROBERT I COHEN SUB

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation *(only applicable when Property Action is Elevation)*	22 0 feet
First Floor Elevation *(only applicable when Property Action is Elevation)*	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690022D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	1728 65TH St	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	TERRY	
Middle Name		
Last Name	ROBERTS	
Phone	Home	Office Ext
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	300 COURTLANDT PI	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546 - 4800	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1540-0000-0016-002
Property Tax Identification Number	R121500
Latitude	29 279
Longitude	-94 838
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045500
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	62,230 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 698
Repetitive Loss Structure	Yes
Property Locator Number	0026324
Number of Losses	4 or More claims since 1978

Legal Description

ABST 121 PAGE 83 W 60 FT OF LOT 16 (16-2) BAYOU SHORES-WHEELERS SUB

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	2415 67TH St	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	OLIVIA	
Middle Name		
Last Name	COCHRANE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	2415 67TH St	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77551	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4306-0002-0008-000
Property Tax Identification Number	R120113
Latitude	29 272
Longitude	-94 837
Does this property have an NFIP Policy Number	Yes
Policy Number	054825170F
Insurance Policy Provider	2003
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	88,190 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 1
Repetitive Loss Structure	Yes
Property Locator Number	0118858
Number of Losses	2-3 claims Cumulatively > building Fair Market Value
Legal Description	

ABST 121 PAGE 83 LOTS 8 & 10 BLK 2 JONES ADDN

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	2107 71ST St	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	EDWARD	
Middle Name		
Last Name	OTOOLE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	67 EL DORADO Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4305-0000-0022-003
Property Tax Identification Number	R120075
Latitude	29 274
Longitude	-94 843
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	11,960 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 305
Repetitive Loss Structure	Yes
Property Locator Number	0014454
Number of Losses	4 or More claims since 1978

Legal Description

ABST 121 PAGE 78 NE PT OF LOT 22 (22-3) JONES SUB

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation *(only applicable when Property Action is Elevation)*	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	2221 72ND St	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	MARIO	
Middle Name		
Last Name	ORTIZ	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	508 FALLING LEAF Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546 - 4524	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1968
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	7205-0000-0122-002
Property Tax Identification Number	R114846
Latitude	29 272
Longitude	-94 843
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045686
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	72,520 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 502
Repetitive Loss Structure	Yes
Property Locator Number	0015131
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 121 PAGE 78 PT OF LOT 122 (122-2) TRIMBLE & LINDSEY SEC 1

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	89 BAYOU Lane	
Address line 2		
City	KEMAH	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	ALMEDA NICKS	
Middle Name		
Last Name	WALLINGFORD	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	89 BAYOU Lane	
Address line 2		
Other (PO Box, Route, etc)		
City	KEMAH	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1966
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4595-0000-0089-000
Property Tax Identification Number	R160304
Latitude	29 542
Longitude	-95 029
Does this property have an NFIP Policy Number	Yes
Policy Number	1150073378
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	212,660 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 659
Repetitive Loss Structure	Yes
Property Locator Number	0016001
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	
ABST 18 M MULDOON SUR LOTS 89 & 89 LAZY BEND	

Property Information II.	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
is property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854810001B	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	405 OLD BAYOU Dr	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	LOUIS	
Middle Name		
Last Name	GRANDOLFO	
Phone	Home	Office Ext.
	Cell	Other Ext
Owner's Mailing Address.		
Address line 1	1201 MINGLEWOOD Lane	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1455-0001-0016-000
Property Tax Identification Number	R153797
Latitude	29 448
Longitude	-95 071
Does this property have an NFIP Policy Number	Yes
Policy Number	SF00172946
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	81,000 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 671
Repetitive Loss Structure	Yes
Property Locator Number	0017540
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 11 A FARMER LOT 16 BLK 1 BAYOU CHANTILLY	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48547000600	11-16-1990

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	5107 BAYSHORE Dr	
Address line 2		
City	BACLIFF	
County	Galveston	
State	TX	
ZIP	77518	
Owner Information:		
First Name	JACK E	
Middle Name		
Last Name	CAPPS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	901 QUAKER Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546 - 4061	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1966
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1410-0000-0005-001
Property Tax Identification Number	R185015
Latitude	29 509
Longitude	-94 968
Does this property have an NFIP Policy Number	Yes
Policy Number	1150080855
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	207,830.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 881
Repetitive Loss Structure	Yes
Property Locator Number	0067825
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	
ABST 88 PAGE 2 LOTS 5 & 6 (5-1) BAYCREST SUB	

Property Information II	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
‘here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700035C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	420 BROADWAY St		
Address line 2			
City	SAN LEON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	RICHARD L		
Middle Name			
Last Name	PFIRMAN		
Phone	Home	Office	Ext.
	Cell	Other	Ext.
Owner's Mailing Address:			
Address line 1	403 RICHMOND Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546 - 4085		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1957
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	6240-0102-0001-000
Property Tax Identification Number	R150372
Latitude	29 488
Longitude	-94 917
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	24,000 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 65
Repetitive Loss Structure	Yes
Property Locator Number	0045746
Number of Losses	4 or More claims since 1978

Legal Description

ABST 10 A EDWARDS LOT 1 BLK 102 SAN LEON

Property Information II.	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700105C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	3634 CARK St	
Address line 2		
City	SANTA FE	
County	Galveston	
State	TX	
ZIP	77517	
Owner Information:		
First Name	BRYCE	
Middle Name		
Last Name	HAWK	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	3634 CARK St	
Address line 2		
Other (PO Box, Route, etc)		
City	SANTA FE	
State	TX	
ZIP	77517	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1970
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1200-0055-0003-003
Property Tax Identification Number	R230622
Latitude	29 389
Longitude	-95.115
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	76,300 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 596
Repetitive Loss Structure	Yes
Property Locator Number	0039794
Number of Losses	*4 or More claims since 1978*
Legal Description	

ABST 604 PAGE 10 PT OF LOT 3 (3-3) BLK 55 ARCADIA TOWNSITE

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation *(only applicable when Property Action is Elevation)*	*22 0 feet*
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48167C0010B	10-16-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	5110 CASA GRANDE Dr	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	KRIS M	
Middle Name		
Last Name	MASSEY	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	5110 CASA GRANDE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1984
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2315-0000-0016-000
Property Tax Identification Number	R228495
Latitude	29 456
Longitude	-95 036
Does this property have an NFIP Policy Number	Yes
Policy Number	2553SA3169
Insurance Policy Provider	25143
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	160,600 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 399
Repetitive Loss Structure	Yes
Property Locator Number	0025198
Number of Losses	*4 or More claims since 1978*
Legal Description	
ABST 208 W K WILSON LOT 16 BELCHER TR CASA GRANDE	

Property Information ii:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	*22 0 feet*
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700095C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	3230 CUTLASS Lane	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77554	
Owner Information:		
First Name	RICHARD C, III	
Middle Name		
Last Name	KURIGER	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	1 WHITTIER St	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners *or holders of recorded interest?*	N	

Property Information:	
Age of structure (year built)	1983
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	5866-0002-0037-000
Property Tax Identification Number	R123115
Latitude	29 22
Longitude	-94 943
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00044877
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	420,580 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	2 827
Repetitive Loss Structure	Yes
Property Locator Number	0124923
Number of Losses	2-3 claims Cumulatively > building Fair Market Value

Legal Description

ABST 121 PAGE 39 & 44 LOTS 37 THRU 39 BLK 2 PIRATES COVE SEC 2

Property Information II:	
* *Primary Property Action*	*Elevation*
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	*19 0 feet*

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700272C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:	
Address line 1	5208 COTTONWOOD Cir
Address line 2	
City	DICKINSON
County	Galveston
State	TX
ZIP	77539
Owner Information:	
First Name	DORIS L
Middle Name	
Last Name	WATTS
Phone	Home / Office / Ext. / Cell / Other / Ext.
Owner's Mailing Address.	
Address line 1	203 WINDING Rd
Address line 2	
Other (PO Box, Route, etc)	
City	FRIENDSWOOD
State	TX
ZIP	77546 - 2110
Does this property have other co-owners or holders of recorded interest?	N
Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	5415-0002-0010-000
Property Tax Identification Number	R228580
Latitude	29 455
Longitude	-95 031
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	96,740 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 603
Repetitive Loss Structure	Yes
Property Locator Number	0068701
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	
ABST 208 W K WILSON LOT 10 BLK 2 OAKLAND ADDN	
Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700095C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	2804 DAISY St	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	JAMES E	
Middle Name		
Last Name	TIPTON	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	2804 DAISY St	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1963
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3015-0118-0007-000
Property Tax Identification Number	R163305
Latitude	29 467
Longitude	-95.056
Does this property have an NFIP Policy Number	Yes
Policy Number	8702605796
Insurance Policy Provider	21660
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	68,330.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 668
Repetitive Loss Structure	Yes
Property Locator Number	0041032
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	
ABST 19 PAGE 6 & 9 PT OF LOT 118 (118-7) DICKINSON ADDN D	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700095C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	1615 DICK BAY St		
Address line 2			
City	SAN LEON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	STEVE		
Middle Name			
Last Name	KASS		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	11 CEDAR LAWN Cir		
Address line 2			
Other (PO Box, Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77551 - 4831		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1986
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4745-0000-0008-000
Property Tax Identification Number	R148294
Latitude	29 475
Longitude	-94 95
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	195,160 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 215
Repetitive Loss Structure	Yes
Property Locator Number	0008225
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 10 A EDWARDS SUR LOTS 8 & 9 LITTLE RIVIERA SUB OUT OF SAN LEON FM HM TRS

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	1624 DICK BAY St	
Address line 2		
City	SAN LEON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	STEVEN W	
Middle Name		
Last Name	HOYLAND	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	1624 DICK BAY St	
Address line 2		
Other (PO Box, Route, etc)		
City	SAN LEON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1978
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4745-0000-0041-000
Property Tax Identification Number	R148333
Latitude	29 475
Longitude	-94 951
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	109,650 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 841
Repetitive Loss Structure	Yes
Property Locator Number	0124570
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	

ABST 10 A EDWARDS LOT 41 LITTLE RIVIERA S-D SAN LEON FM HM TR

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	3517 ELM Dr	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	WESLEY M	
Middle Name		
Last Name	JOHNSTON	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	3517 ELM Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1985
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3015-0141-0006-000
Property Tax Identification Number	R163402
Latitude	29 455
Longitude	-95 07
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	117,480 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 894
Repetitive Loss Structure	Yes
Property Locator Number	0016548
Number of Losses	4 or More claims since 1978

Legal Description

ABST 19 PERRY & AUSTIN TR F BLK 141 110 X 200 X 245 ADON D DICKINSON

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
a property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4815690006B	03-04-1991

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	7317 HOUSTON	
Address line 2		
City	HITCHCOCK	
County	Galveston	
State	TX	
ZIP	77563	
Owner Information:		
First Name	TEDD	
Middle Name		
Last Name	PETRUNA	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	7317 HOUSTON	
Address line 2		
Other (PO Box, Route, etc)		
City	HITCHCOCK	
State	TX	
ZIP	77563	
Does this property have other co-owners *or holders of recorded interest?*	N	

Property Information:	
Age of structure (year built)	1980
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3971-0000-0032-000
Property Tax Identification Number	R212756
Latitude	29 329
Longitude	-94 946
Does this property have an NFIP Policy Number	Yes
Policy Number	1150412370
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	99,850.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 8
Repetitive Loss Structure	Yes
Property Locator Number	0124295
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value

Legal Description

ABST 175 PAGE 12 LOT 32 HIGHLAND BAYOU ESTATES SEC 2 UNRECORDED

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700205C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	7709 HIGHLAND Rd	
Address line 2		
City	SANTA FE	
County	Galveston	
State	TX	
ZIP	77517	
Owner Information:		
First Name	DAVID	
Middle Name		
Last Name	GOMEZ	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address:		
Address line 1	7709 HIGHLAND Rd	
Address line 2		
Other (PO Box, Route, etc)		
City	SANTA FE	
State	TX	
ZIP	77517	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1971
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1095-0000-0402-009
Property Tax Identification Number	R193600
Latitude	29 34
Longitude	-95.107
Does this property have an NFIP Policy Number	Yes
Policy Number	1011399308
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	98,650.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 839
Repetitive Loss Structure	Yes
Property Locator Number	0025103
Number of Losses	4 or More claims since 1978

Legal Description

ABST 47 PAGE 20 PT OF OUTLOT 402 (402-9) ALTA LOMA OUTLOTS

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
?here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.s property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700195C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	4001 LIGGIO St	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	COY G	
Middle Name		
Last Name	POWERS	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address:		
Address line 1	4001 LIGGIO St	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1955
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5425-0188-0011-000
Property Tax Identification Number	R166708
Latitude	29 463
Longitude	-95 052
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	46,480 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 772
Repetitive Loss Structure	Yes
Property Locator Number	0026203
Number of Losses	4 or More claims since 1978

Legal Description

ABST 19 PERRY & AUSTIN LOT 11 & SE 5 FT OF LOT 14 OAK PARK ADDN & IMPS

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
›here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
›e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4815690010A	02-16-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	53 LAKESIDE	
Address line 2		
City	HITCHCOCK	
County	Galveston	
State	TX	
ZIP	77563	
Owner Information:		
First Name	NICHOLAS EDWARD	
Middle Name		
Last Name	STEPCHINSKI	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address:		
Address line 1	53 LAKESIDE	
Address line 2		
Other (PO Box, Route, etc)		
City	HITCHCOCK	
State	TX	
ZIP	77563	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1970
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1570-0000-0051-001
Property Tax Identification Number	R141324
Latitude	29 328
Longitude	-94 945
Does this property have an NFIP Policy Number	Yes
Policy Number	1791S00598
Insurance Policy Provider	99999
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	189,910 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 872
Repetitive Loss Structure	Yes
Property Locator Number	0120625
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 7 PAGE 7 LOTS 51,53 & NE 1/2 OF LOT 55 (51-1) BAYOU VISTA ADDN 2

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
·e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700205C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	58 LAKESIDE	
Address line 2		
City	HITCHCOCK	
County	Galveston	
State	TX	
ZIP	77563	
Owner Information:		
First Name	ARK LP	
Middle Name		
Last Name	NORTHSHORE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	69 BAYOU Lane	
Address line 2		
Other (PO Box, Route, etc)		
City	KEMAH	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1955
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1570-0000-0058-000
Property Tax Identification Number	R141329
Latitude	29 328
Longitude	-94 946
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00014758
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	89,990 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 013
Repetitive Loss Structure	Yes
Property Locator Number	0119535
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	
ABST 7 PAGE 7 LOT 58 BAYOU VISTA ADDN 2	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700205C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	4905 MINNESOTA St		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information.			
First Name	JAMES A, JR		
Middle Name			
Last Name	MANNING		
Phone	Home	Office	
		Ext.	
	Cell	Other	
		Ext.	
Owner's Mailing Address.			
Address line 1	4905 MINNESOTA St		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1979
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5320-0362-0004-001
Property Tax Identification Number	R183896
Latitude	29 456
Longitude	-95 049
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	171 010 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 636
Repetitive Loss Structure	Yes
Property Locator Number	0016096
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 19 PERRY & AUSTIN SUR LOT 4 & PT OF LOTS 3 & 5 (4-1) BLK 362 NICHOLSTONE ADDN *SBPCL 532003620004002*

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4815690010A	02-16-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	101 OLD BAYOU Dr		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	JOHN C		
Middle Name			
Last Name	MARKS		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	3634 N CARK St		
Address line 2			
Other (PO Box, Route, etc)			
City	SANTA FE		
State	TX		
ZIP	77510 - 9109		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1967
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1455-0001-0001-000
Property Tax Identification Number	R153782
Latitude	29 445
Longitude	-95 073
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00043625
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	183,960 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 987
Repetitive Loss Structure	Yes
Property Locator Number	0042521
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 11 A FARMER LOT 1 BLK 1 BAYOU CHANTILLY	

Property Information II.	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48547000900	11-16-1990

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	1612 OLEANDER Dr	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	CAROLINA C	
Middle Name		
Last Name	VILLARROEL	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	1612 OLEANDER Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1982
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5191-0000-0003-001
Property Tax Identification Number	R154241
Latitude	29 455
Longitude	-95 055
Does this property have an NFIP Policy Number	Yes
Policy Number	8702479350
Insurance Policy Provider	21660
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	73,020 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 939
Repetitive Loss Structure	Yes
Property Locator Number	0046352
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 11 A FARMER PT OF LOTS 3- 4 W 1/2 C E MOORE S-D	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700085C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	4910 PARK Ave	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	ROBERT	
Middle Name		
Last Name	KINGSBURY	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	4910 PARK Ave	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1928
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5320-0373-0006-000
Property Tax Identification Number	R183955
Latitude	29 458
Longitude	-95 038
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated*	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	148,570 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 662
Repetitive Loss Structure	Yes
Property Locator Number	0036467
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	

ABST 78 R HALL SUR LOTS 5 & 6 (5-0) BLK 373 NICHOLSTONE ***DEFERRAL***

Property Information II*	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
·e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4815690010A	02-16-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	3801 PINE MANOR Lane	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	DAVID B	
Middle Name		
Last Name	WARWICK	
Phone	Home Cell	Office Ext. Other Ext.
Owner's Mailing Address:		
Address line 1	3801 PINE MANOR Lane	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1985
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5815-0000-0003-000
Property Tax Identification Number	R166860
Latitude	29 451
Longitude	-95 072
Does this property have an NFIP Policy Number	Yes
Policy Number	1150660930
Insurance Policy Provider	11523
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	251,360 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 878
Repetitive Loss Structure	Yes
Property Locator Number	0015128
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 19 PAGE 7 LOTS 3 THRU 5 (3-1) PINE MANOR SUB	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48167C0005B	03-04-1991

Comments

Firm panels are attached to the application

Attachments

	Properties		
Damaged Property Address:			
Address line 1	3629 PRAIRIE Dr		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	TRESA		
Middle Name			
Last Name	REED		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	3629 PRAIRIE Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1987
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5970-0000-0097-000
Property Tax Identification Number	R167114
Latitude	29 439
Longitude	-95.117
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	82,010 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 125
Repetitive Loss Structure	Yes
Property Locator Number	0044319
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 19 PERRY & AUSTIN SUR LOT 97 PRAIRIE ESTATES	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	8.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700090D	11-16-1990

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	326 TEXAS Ave	
Address line 2		
City	BACLIFF	
County	Galveston	
State	TX	
ZIP	77518	
Owner Information:		
First Name	VIRGINIA ANN	
Middle Name		
Last Name	BURKE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	326 TEXAS Ave	
Address line 2		
Other (PO Box, Route, etc)		
City	BACLIFF	
State	TX	
ZIP	77518	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1984
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5721-0005-0030-000
Property Tax Identification Number	R165585
Latitude	29 513
Longitude	-94 989
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	119,030.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 73
Repetitive Loss Structure	Yes
Property Locator Number	0099268
Number of Losses	4 or More claims since 1978

Legal Description

ABST 89 S HINTON SUR LOTS 28 THRU 30 & 33 & 34 (30-0) BLK 5 PERKINS BEACH SEC 2

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700035C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	909 VIVIAN St	
Address line 2		
City	KEMAH	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	MA EMMA	
Middle Name		
Last Name	HERNANDEZ	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	7709 HIGHLAND Rd	
Address line 2		
Other (PO Box, Route, etc)		
City	SANTA FE	
State	TX	
ZIP	77517	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4480-0000-0005-000
Property Tax Identification Number	R159684
Latitude	29 539
Longitude	-95 034
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	58,030.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 857
Repetitive Loss Structure	Yes
Property Locator Number	0025280
Number of Losses	2-3 claims Cumulatively > building Fair Market Value
Legal Description	
ABST 18 PAGE 10 PT OF LOTS 5 & 6 LAGUNA VISTA ESTATES	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
is property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700026C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	2240 WASHINGTON		
Address line 2			
City	ALGOA		
County	Galveston		
State	TX		
ZIP	77511		
Owner Information:			
First Name	ROBERT C		
Middle Name			
Last Name	NEHRING		
Phone	Home	Office Ext.	
	Cell	*Other* Ext.	
Owner's Mailing Address:			
Address line 1	2240 WASHINGTON		
Address line 2			
Other (PO Box, Route, etc)			
City	ALGOA		
State	TX		
ZIP	77511		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1974
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3792-0015-0002-001
Property Tax Identification Number	R231548
Latitude	29 44
Longitude	-95 212
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	191,580 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 754
Repetitive Loss Structure	Yes
Property Locator Number	0026571
Number of Losses	4 or More claims since 1978

Legal Description

ABST 620 PAGE 1 PT OF LOTS 1 & 2 (2-1) BLK 15 HALLS ADDN TO ALVIN

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700080C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	214 12TH St		
Address line 2			
City	SAN LEON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	JASON MICHAEL		
Middle Name			
Last Name	COX		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address			
Address line 1	53 LAKESIDE Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	HITCHCOCK		
State	TX		
ZIP	77563 - 2517		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1969
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	6240-0033-0033-000
Property Tax Identification Number	R149304
Latitude	29 498
Longitude	-94 923
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00030047
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	46,660.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 761
Repetitive Loss Structure	Yes
Property Locator Number	0045886
Number of Losses	4 or More claims since 1978

Legal Description

ABST 10 A EDWARDS SUR LOR 33 & 34 BLK 33 SAN LEON TOWNSITE

Property Information II.	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...a property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700105C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	4747 2ND St		
Address line 2			
City	BACLIFF		
County	Galveston		
State	TX		
ZIP	77518		
Owner Information:			
First Name	REGGIE DALE		
Middle Name			
Last Name	GUIDRY		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	1812 OLEANDER Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539 - 6727		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	2655-0032-0027-000
Property Tax Identification Number	R206846
Latitude	29 507
Longitude	-94 979
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00046914
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	26,120 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 597
Repetitive Loss Structure	Yes
Property Locator Number	0113768
Number of Losses	2-3 claims Cumulatively > building Fair Market Value
Legal Description	
ABST 164 E PAYNE LOT 27 BLK 32 CLIFTON BY THE SEA	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700035C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	4906 30TH St		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	DAVID PAUL		
Middle Name			
Last Name	JOHNSON		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	4906 30TH St		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1967
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5320-0240-0004-000
Property Tax Identification Number	R183366
Latitude	29 473
Longitude	-95 038
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	73,290 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 632
Repetitive Loss Structure	Yes
Property Locator Number	0044624
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value
Legal Description	

ABST 78 R HALL LOTS 4, 5, & 6 BLK 240 NICHOLSTONE 4906 30TH ST

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700095C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	12704 32ND St	
Address line 2		
City	SANTA FE	
County	Galveston	
State	TX	
ZIP	77510	
Owner Information:		
First Name	NORMAN Q	
Middle Name		
Last Name	ZARO	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address:		
Address line 1	12704 32ND St	
Address line 2		
Other (PO Box, Route, etc)		
City	SANTA FE	
State	TX	
ZIP	77510	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1971
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1095-0000-0304-010
Property Tax Identification Number	R192630
Latitude	29 344
Longitude	-95 097
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00042221
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	70 050.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 798
Repetitive Loss Structure	Yes
Property Locator Number	0045221
Number of Losses	4 or More claims since 1978

Legal Description

ABST 47 PAGE 17 PT OF OUTLOT 304 (304-10) ALTA LOMA OUTLOTS

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
s property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700195C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	13001 32ND St	
Address line 2		
City	SANTA FE	
County	Galveston	
State	TX	
ZIP	77510	
Owner Information:		
First Name	FRED H	
Middle Name		
Last Name	OBERNDORFER	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	13001 32ND St	
Address line 2		
Other (PO Box, Route, etc)		
City	SANTA FE	
State	TX	
ZIP	77510	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1979
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1095-0000-0346-004
Property Tax Identification Number	R193145
Latitude	29 343
Longitude	-95 101
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	117 000 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 811
Repetitive Loss Structure	Yes
Property Locator Number	0043299
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 47 PAGE 20 PT OF OUTLOT 346 (346-4) ALTA LOMA OUTLOTS

Property Information II.	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is a property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700195C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:

Address line 1	215 5TH Ave
Address line 2	
City	TEXAS CITY
County	Galveston
State	TX
ZIP	77590

Owner Information:

First Name	PROPERTIES LLC	
Middle Name		
Last Name	MONET	
Phone	Home	Office Ext.
	Cell	Other Ext.

Owner's Mailing Address.

Address line 1	328 TEXAS Ave
Address line 2	
Other (PO Box, Route, etc)	
City	BACLIFF
State	TX
ZIP	77518
Does this property have other co-owners *or holders of recorded interest?*	N

Property Information:

Age of structure (year built)	1940
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	7030-0116-0005-000
Property Tax Identification Number	R224680
Latitude	29 389
Longitude	-94 897
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00044497
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	36,670 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 892
Repetitive Loss Structure	Yes
Property Locator Number	0182941
Number of Losses	2-3 claims Cumulatively > building Fair Market Value

Legal Description

ABST 205 PAGE 6 LOT 5 BLK 116 TEXAS CITY

Property Information II:

Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4855140035C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	1327 8TH St		
Address line 2			
City	SAN LEON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	THOMAS WILLIAM		
Middle Name			
Last Name	ARNETT		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	4908 E 30TH St		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1978
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	6240-0208-0013-001
Property Tax Identification Number	R307528
Latitude	29 475
Longitude	-94 923
Does this property have an NFIP Policy Number	Yes
Policy Number	2553SA1748
Insurance Policy Provider	25143
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	344,590 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 888
Repetitive Loss Structure	Yes
Property Locator Number	0124475
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value

Legal Description

ABST 10 A EDWARDS SUR LOTS 11,12,13,36,37, & 38 (13-1) BLK 208 SAN LEON TOWNSITE

Property Information II:	
· Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700105C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	906 DICKINSON Ave		
Address line 2			
City	LEAGUE CITY		
County	Galveston		
State	TX		
ZIP	77573		
Owner Information:			
First Name	MARTA S		
Middle Name			
Last Name	SYMES		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	906 DICKINSON Ave		
Address line 2			
Other (PO Box, Route, etc)			
City	LEAGUE CITY		
State	TX		
ZIP	77573		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1978
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4602-0000-0032-006
Property Tax Identification Number	R135485
Latitude	29 503
Longitude	-95 064
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	127,780 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 612
Repetitive Loss Structure	Yes
Property Locator Number	0068879
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 3 & 18 PAGE 15 & 16 PT OF LOT 32 (32-6) DIV B LEAGUE CITY

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854880010C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	29 ELLIS Rd	
Address line 2		
City	LEAGUE CITY	
County	Galveston	
State	TX	
ZIP	77573	
Owner Information:		
First Name	GEORGE	
Middle Name		
Last Name	WOOD	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	29 ELLIS Rd	
Address line 2		
Other (PO Box, Route, etc)		
City	LEAGUE CITY	
State	TX	
ZIP	77573	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1980
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3190-0000-0011-003
Property Tax Identification Number	R146483
Latitude	29 499
Longitude	-95 148
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	245,780 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 511
Repetitive Loss Structure	Yes
Property Locator Number	0004374
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 9 PAGE 9 N PT OF LOT 11 (11-3) ELLIS ACRES UNREC SUB	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
re property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854860025C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	319 EMPRESS Lane		
Address line 2			
City	LEAGUE CITY		
County	Galveston		
State	TX		
ZIP	77573		
Owner Information:			
First Name	GREG		
Middle Name			
Last Name	VARISCO		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	319 EMPRESS Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	LEAGUE CITY		
State	TX		
ZIP	77573		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2602-0003-0028-000
Property Tax Identification Number	R137062
Latitude	29 508
Longitude	-95 12
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	148,810 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 357
Repetitive Loss Structure	Yes
Property Locator Number	0026508
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 3 PAGE 1 LOT 28 BLK 3 CLEAR CREEK VILLAGE SEC 3	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
,e property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854890010C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	2125 FENWOOD St		
Address line 2			
City	LEAGUE CITY		
County	Galveston		
State	TX		
ZIP	77565		
Owner Information:			
First Name	MAXWELL E		
Middle Name			
Last Name	SHAUCK		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	2125 FENWOOD St		
Address line 2			
Other (PO Box, Route, etc)			
City	LEAGUE CITY		
State	TX		
ZIP	77565		
Does this property have other co-owners *or holders of recorded interest?*	N		

Property Information:	
Age of structure (year built)	1973
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3600-0003-0007-000
Property Tax Identification Number	R212181
Latitude	29 551
Longitude	-95 051
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	329,990 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 5
Repetitive Loss Structure	Yes
Property Locator Number	0042357
Number of Losses	4 or More claims since 1978

Legal Description

ABST 18 PAGE 4 & 9 LOTS 7 & 8 & PT OF LOT 28, ABND ST & LAKE AREA BLK 3 GLEN COVE SUB

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ie property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854880011C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	321 LAFAYETTE Lane		
Address line 2			
City	LEAGUE CITY		
County	Galveston		
State	TX		
ZIP	77573		
Owner Information:			
First Name	LOUIS H		
Middle Name			
Last Name	SPEAKS		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	321 LAFAYETTE Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	LEAGUE CITY		
State	TX		
ZIP	77573		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1966
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2600-0003-0010-000
Property Tax Identification Number	R137010
Latitude	29 507
Longitude	-95 118
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	283,360.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 639
Repetitive Loss Structure	Yes
Property Locator Number	0001534
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 3 PAGE 1 LOT 10 BLK 3 CLEAR CREEK VILLAGE SEC 1	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854680010C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	307 LAKESIDE Dr		
Address line 2			
City	LEAGUE CITY		
County	Galveston		
State	TX		
ZIP	77586		
Owner Information:			
First Name	GILBERT G		
Middle Name			
Last Name	ALLISON		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	321 LAFAYETTE Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	LEAGUE CITY		
State	TX		
ZIP	77573 - 1937		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1968
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4510-0007-0011-000
Property Tax Identification Number	R160157
Latitude	29 551
Longitude	-95 059
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	91,250 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 648
Repetitive Loss Structure	Yes
Property Locator Number	0068490
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 18 PAGE 4 LOT 11 BLK 7 LAKESIDE ADDN	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854880011C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	2991 MARYS Lane		
Address line 2			
City	LEAGUE CITY		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	WILLIAM G		
Middle Name			
Last Name	ALLEN		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	2991 MARYS Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	LEAGUE CITY		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		
Property Information:			
Age of structure (year built)	1978		
SHPO Review	Not Applicable		
SHPO Reviewed Date			
Structure Type	Single Family		
Foundation type	Slab on Grade		
Basement	No		
Type of Residence	Owner Occupied-Principal Residence		
Parcel Number	2400-0000-0025-000		
Property Tax Identification Number	R162676		
Latitude	29 447		
Longitude	-95 113		
Does this property have an NFIP Policy Number	Yes		
Policy Number	9999999		
Insurance Policy Provider			
Select hazard to be mitigated:	Flood		
Damage Category	0-49% Damaged		
Pre-Event Fair Market Value	134,970 00		
Benefit Cost Analysis Performed	Yes		
Benefit Cost Ratio	0 595		
Repetitive Loss Structure	Yes		
Property Locator Number	0037935		
Number of Losses	4 or More claims since 1978		
Legal Description			
ABST 19 PAGE 13 LOTS 25,26 & 27 CHANLEE ESTATES			
Property Information II			
Primary Property Action	Elevation		
Secondary Property Actions			
Flood Hazard			
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet		
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet		

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	48548800300	09-28-1990

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	1217 PILOT Lane	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77554	
Owner Information:		
First Name	DONALD	
Middle Name		
Last Name	GRINES	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address.		
Address line 1	1217 PILOT Lane	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77554	
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)	1971	
SHPO Review	Not Applicable	
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence	Owner Occupied-Principal Residence	
Parcel Number	1045-0000-0012-000	
Property Tax Identification Number	R117535	
Latitude	29 271	
Longitude	-94 877	
Does this property have an NFIP Policy Number	Yes	
Policy Number	1791F01843	
Insurance Policy Provider	99999	
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value	142,480 00	
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 624	
Repetitive Loss Structure	Yes	
Property Locator Number	0088126	
Number of Losses	4 or More claims since 1978	
Legal Description		
ABST 121 PAGE 72 LOT 12 AIRPORT HOMESITES SEC 2		
Property Information II:		
Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	48546900019D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	1216 SKIPPER	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77554	
Owner Information:		
First Name	RYAN	
Middle Name		
Last Name	MOODY	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	1216 SKIPPER	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77554	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1979
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1050-0000-0054-000
Property Tax Identification Number	R117625
Latitude	29 27
Longitude	-94 879
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00043824
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	22,280 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 899
Repetitive Loss Structure	Yes
Property Locator Number	0100291
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 121 PAGE 66B LOT 54 AIRPORT HOMESTIES SEC 4	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	48546900190	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	1114 64TH St		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information:			
First Name	DON		
Middle Name			
Last Name	BLACKWELL		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	1114 64TH St		
Address line 2			
Other (PO Box, Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77551		
Does this property have other co-owners or holders of recorded interest?	N		
Property Information:			
Age of structure (year built)	1970		
SHPO Review	Not Applicable		
SHPO Reviewed Date			
Structure Type	Single Family		
Foundation type	Elevated on Piers, Piles, Posts or Columns		
Basement	No		
Type of Residence	Owner Occupied-Principal Residence		
Parcel Number	2020-0003-0016-000		
Property Tax Identification Number	R117905		
Latitude	29 286		
Longitude	-94 84		
Does this property have an NFIP Policy Number	Yes		
Policy Number	RL00043913		
Insurance Policy Provider	99999		
Select hazard to be mitigated:	Flood		
Damage Category	0-49% Damaged		
Pre-Event Fair Market Value	413,100 00		
Benefit Cost Analysis Performed	Yes		
Benefit Cost Ratio	2.33		
Repetitive Loss Structure	Yes		
Property Locator Number	0068391		
Number of Losses	4 or More claims since 1978		
Legal Description			
ABST 121 PAGE 82 LOT 16 BLK 3 BROADWAY SUB			
Property Information II:			
Primary Property Action	Elevation		
Secondary Property Actions			
Flood Hazard			
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet		
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet		

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ne property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690022D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	5737 AVE R		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information.			
First Name	FERNANDO & MARIA E		
Middle Name			
Last Name	LUJAN		
Phone	Home	Office Ext	
	Cell	Other Ext	
Owner's Mailing Address			
Address line 1	5737 AVE R		
Address line 2			
Other (PO Box, Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77551		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1974
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2755-0004-0009-000
Property Tax Identification Number	R118760
Latitude	29 278
Longitude	-94 828
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00044878
Insurance Policy Provider	99999
Select hazard to be mitigated.	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	136,590 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 164
Repetitive Loss Structure	Yes
Property Locator Number	0050546
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 121 PAGE 83 LOTS 9 & 10 BLK D COLORADO ADDN	

Property Information II.	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable if Property action is Elevation)	22 0 feet
First Floor Elevation (only applicable if Property action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
:e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	48546900240	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

	Properties	
Damaged Property Address:		
Address line 1	2109 71ST St	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77551	
Owner Information:		
First Name	THIVIYANATHAN	
Middle Name		
Last Name	VARATHARASA	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	6809 GOLF CREST Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	GALVESTON	
State	TX	
ZIP	77551	
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)	1960	
SHPO Review	Unknown	
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence	Owner Occupied- Secondary Residence	
Parcel Number	4305-0000-0022-004	
Property Tax Identification Number	R120078	
Latitude	29 273	
Longitude	-94 843	
Does this property have an NFIP Policy Number	Yes	
Policy Number	RL00042660	
Insurance Policy Provider	99999	
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value	142,840 00	
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	2 5	
Repetitive Loss Structure	Yes	
Property Locator Number	0094549	
Number of Losses	4 or More claims since 1978	
Legal Description		
ABST 121 PAGE 78 SE PT OF LOT 22 (22-4) JONES SUB		

	Elevation
Property Information II:	
· Primary Property Action	
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address			
Address line 1	2319 67TH St		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77551		
Owner Information.			
First Name	EILEEN K		
Middle Name			
Last Name	INOUYE		
Phone	Home	Office	
		Ext	
	Cell	Other	
		Ext.	
Owner's Mailing Address			
Address line 1	2319 67TH St		
Address line 2			
Other (PO Box Route, etc)			
City	GALVESTON		
State	TX		
ZIP	77551		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	*Elevated on Piers, Piles, Posts or Columns*
Basement	No
Type of Residence	*Owner Occupied-Principal Residence*
Parcel Number	5556-0000-0019-000
Property Tax Identification Number	R120702
Latitude	29 273
Longitude	94 837
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00012745
Insurance Policy Provider	99999
Select hazard to be mitigated.	*Flood*
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	135 860 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 151
Repetitive Loss Structure	Yes
Property Locator Number	0008140
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 121 PAGE 83 LOT 19 PABST SUB	

Property Information II	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation	22 0 feet
First Floor Elevation	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690024D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	1708 8 MILE Rd		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77554		
Owner Information:			
First Name	O W JR TRUSTEE		
Middle Name			
Last Name	BUSSEY		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	5929 GREENTREE		
Address line 2			
Other (PO Box, Route, etc)			
City	HOUSTON		
State	TX		
ZIP	77057		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1968
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1145-0000-0013-000
Property Tax Identification Number	R121730
Latitude	29 262
Longitude	-94 896
Does this property have an NFIP Policy Number	Yes
Policy Number	1791Z00004
Insurance Policy Provider	99999
Select hazard to be mitigated.	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	88,060 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 084
Repetitive Loss Structure	Yes
Property Locator Number	0008413
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 121 PAGE 57 LOTS 13 & 14 ANDERSON WAYS	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	48546900190	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	12249 PINE Lane		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	THOMAS A & LINDA		
Middle Name			
Last Name	CASSANO		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	12249 PINE Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1967
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5830-0000-0015-000
Property Tax Identification Number	R129785
Latitude	29 435
Longitude	-95 087
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00001017
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	210,000 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 628
Repetitive Loss Structure	Yes
Property Locator Number	0038182
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 1 PAGE 3 LOTS 15 & 16 *PINE OAK COVE UNRECORDED SUB*

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48167900058	03-04-1991

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address.		
Address line 1	1831 N FM 646	
Address line 2		
City	SANTA FE	
County	Galveston	
State	TX	
ZIP	77510	
Owner Information		
First Name	EDITH VESTA	
Middle Name		
Last Name	JONES	
Phone	Home	Office Ext
	Cell	Other Ext
Owner's Mailing Address		
Address line 1	1831 N FM 646	
Address line 2		
Other (PO Box Route, etc)		
City	SANTA FE	
State	TX	
ZIP	77510	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information	
Age of structure (year built)	1970
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	7055-0000-0087 002
Property Tax Identification Number	
Latitude	29 415
Longitude	-95 092
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated	Flood
Damage Category	0 49% Damaged
Pre-Event Fair Market Value	197 520 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	2 155
Repetitive Loss Structure	Yes
Property Locator Number	0017494
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 1 M AUSTIN SUR PT OF LOT 87 (87-2) THAMANS 1ST SUB

Property Information II	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only appears when Primary Property action is Elevation)	22 0 feet
First Floor Elevation (only appears when Primary Property action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48547C0150D	11-18-1990

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	2800 BOLIN Rd		
Address line 2			
City	SANTA FE		
County	Galveston		
State	TX		
ZIP	77510		
Owner Information:			
First Name	WILLIAM DAVE &KATHY		
Middle Name			
Last Name	COMPTON		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	2800 BOLIN Rd		
Address line 2			
Other (PO Box, Route, etc)			
City	SANTA FE		
State	TX		
ZIP	77510		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1973
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	7056-0000-0279-005
Property Tax Identification Number	R130760
Latitude	29 402
Longitude	-95.113
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00044391
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	361,600 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 764
Repetitive Loss Structure	Yes
Property Locator Number	0017828
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 1 PAGE 8 PT OF LOTS 279 & 268 (279-5) THAMANS 2ND SUB	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48547001500	11-16-1990

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	320 EMPRESS Lane		
Address line 2			
City	LEAGUE CITY		
County	Galveston		
State	TX		
ZIP	77573		
Owner Information:			
First Name	LOUIS H & VALERIE		
Middle Name			
Last Name	SPEAKS		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	320 EMPRESS Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	LEAGUE CITY		
State	TX		
ZIP	77573		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2600-0003-0023-000
Property Tax Identification Number	R137024
Latitude	29 506
Longitude	-95.119
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045440
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	124,560 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 685
Repetitive Loss Structure	Yes
Property Locator Number	0068897
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 3 PAGE 1 LOT 23 BLK 3 CLEAR CREEK VILLAGE SEC 1	

Property Information II:	
- Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
[redacted]here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854680010C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address.

Address line 1	1904 ACACIA St
Address line 2	
City	LEAGUE CITY
County	Galveston
State	TX
ZIP	77573

Owner Information:

First Name	BERT J & PATRICIA
Middle Name	
Last Name	GORDON
Phone	Home / Office / Ext. / Cell / Other / Ext.

Owner's Mailing Address

Address line 1	1904 ACACIA St
Address line 2	
Other (PO Box Route etc)	
City	LEAGUE CITY
State	TX
ZIP	77573
Does this property have other co-owners or holders of recorded interest?	N

Property Information:

Age of structure (year built)	1978
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2604-0011-0009-000
Property Tax Identification Number	R137162
Latitude	29 506
Longitude	-95 12
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045308
Insurance Policy Provider	99999
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	46 940 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 311
Repetitive Loss Structure	Yes
Property Locator Number	0026125
Number of Losses	4 or More claims since 1978

Legal Description

ABST 3 PAGE 1 LOT 9 BLK 11 CLEAR CREEK VILLAGE SEC 5

**Property Information **

Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable if primary action is Elevation)	22 0 feet
First Floor Elevation (only applicable if primary action is Elevation)	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
a property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854860010C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	514 ST CHARLES St		
Address line 2			
City	LEAGUE CITY		
County	Galveston		
State	TX		
ZIP	77573		
Owner Information:			
First Name	WM E & JOAN E		
Middle Name			
Last Name	MYERS		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	514 ST CHARLES St		
Address line 2			
Other (PO Box, Route, etc)			
City	LEAGUE CITY		
State	TX		
ZIP	77573		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2680-0000-0025-000
Property Tax Identification Number	R137370
Latitude	29 508
Longitude	-95 088
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045662
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	205,910 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 068
Repetitive Loss Structure	Yes
Property Locator Number	0001451
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 3 PAGE 15 LOT 25 CRESTWOOD	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854860010C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	515 ST CHARLES St		
Address line 2			
City	LEAGUE CITY		
County	Galveston		
State	TX		
ZIP	77573		
Owner Information:			
First Name	VIVIAN		
Middle Name			
Last Name	ESLER		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	515 ST CHARLES St		
Address line 2			
Other (PO Box, Route, etc)			
City	LEAGUE CITY		
State	TX		
ZIP	77573		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1973
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2880-0000-0029-000
Property Tax Identification Number	R137374
Latitude	29 507
Longitude	-95 088
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045264
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	98,880 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 057
Repetitive Loss Structure	Yes
Property Locator Number	0001877
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 3 PAGE 15 LOT 29 & 14 13 FT OF LOT 30 CRESTWOOD	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	8.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854880010C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	511 ST CHARLES St	
Address line 2		
City	LEAGUE CITY	
County	Galveston	
State	TX	
ZIP	77573	
Owner Information:		
First Name	DANIEL I &MARIZZA G	
Middle Name		
Last Name	BOWMAN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	511 ST CHARLES St	
Address line 2		
Other (PO Box, Route, etc)		
City	LEAGUE CITY	
State	TX	
ZIP	77573	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2880-0000-0031-000
Property Tax Identification Number	R137376
Latitude	29 507
Longitude	-95.087
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	39,990 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 103
Repetitive Loss Structure	Yes
Property Locator Number	0012669
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 3 PAGE 15 LOT 31 CRESTWOOD	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is a property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485468	4854680010C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	15 ELLIS Rd	
Address line 2		
City	LEAGUE CITY	
County	Galveston	
State	TX	
ZIP	77573	
Owner Information:		
First Name	WILDCATS	
Middle Name		
Last Name	INVESTMENTS INC	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	15 ELLIS Rd	
Address line 2		
Other (PO Box, Route, etc)		
City	LEAGUE CITY	
State	TX	
ZIP	77573	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1973
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3190-0000-0008-000
Property Tax Identification Number	R146488
Latitude	29 497
Longitude	-95 147
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	174,000 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 552
Repetitive Loss Structure	Yes
Property Locator Number	0025585
Number of Losses	4 or More claims since 1978
Legal Description	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854880025C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	533 6TH St	
Address line 2		
City	SAN LEON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	SYBIL FAYE	
Middle Name		
Last Name	ISAAC	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	RR 1 BOX 1620	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539 - 9517	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1974
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	6240-0101-0001-000
Property Tax Identification Number	R150339
Latitude	29 468
Longitude	-94 918
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	106,440 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	2 255
Repetitive Loss Structure	Yes
Property Locator Number	0025990
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 10 PAGE 9 LOTS 1,2 & 3 BLK 101 SAN LEON

Property Information II.	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700105C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	2490 AVE D	
Address line 2		
City	SAN LEON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	WILLIAM S	
Middle Name		
Last Name	BLACKSHEAR	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address.		
Address line 1	PO BOX 202	
Address line 2		
Other (PO Box, Route, etc)	202	
City	BACLIFF	
State	TX	
ZIP	77518 - 0202	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1971
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	6246-0008-0008-015
Property Tax Identification Number	R152743
Latitude	29 498
Longitude	-94 945
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045562
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	68,030 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 054
Repetitive Loss Structure	Yes
Property Locator Number	0100303
Number of Losses	4 or More claims since 1978

Legal Description

ABST 10 PAGE 2 LOTS 15 & 16 OUT OF LOT 8 BLK 8 SAN LEON FM HM TR

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	8 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.s property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	5306 DESEL Dr	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	PHILLIP R	
Middle Name		
Last Name	FLOWERS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	5306 DESEL Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1982
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	0011-0007-0000-000
Property Tax Identification Number	R153720
Latitude	29 45
Longitude	-95 083
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00030711
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	58,930 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 48
Repetitive Loss Structure	Yes
Property Locator Number	0043611
Number of Losses	4 or More claims since 1978

Legal Description

ABST 11 PAGE 1 A FARMER SUR TR 7 1 520 ACRS

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
s property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action = Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700090D	11-16-1990

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	302 LEISURE Lane	
Address line 2		
City	ALGOA	
County	Galveston	
State	TX	
ZIP	77511	
Owner Information:		
First Name	TYLER & REBECCA	
Middle Name		
Last Name	COKER	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	302 *LEISURE Lane*	
Address line 2		
Other (PO Box, Route, etc)		
City	ALGOA	
State	TX	
ZIP	77511	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1981
SHPO Review	*Not Applicable*
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1076-0000-0033-000
Property Tax Identification Number	R157298
Latitude	29 432
Longitude	-95 16
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00043028
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	322,950 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 584
Repetitive Loss Structure	Yes
Property Locator Number	0068831
Number of Losses	4 or More claims since 1978

Legal Description

ABST 14 PAGE 2 LOT 33 ALGOA HALL & JOHNSON UNRECORDED SUB

Property Information II.	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.ie property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700145C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	715 NARCISSUS Rd		
Address line 2			
City	CLEAR LAKE SHORES		
County	Galveston		
State	TX		
ZIP	77565		
Owner Information:			
First Name	LEON JR.		
Middle Name			
Last Name	MCMILLAN		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	715 NARCISSUS Rd		
Address line 2			
Other (PO Box, Route, etc)			
City	CLEAR LAKE SHORES		
State	TX		
ZIP	77565		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2620-0000-0295-000
Property Tax Identification Number	R158839
Latitude	29.544
Longitude	-95 034
Does this property have an NFIP Policy Number	Yes
Policy Number	4802838961
Insurance Policy Provider	19232
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	207,630 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 892
Repetitive Loss Structure	Yes
Property Locator Number	0026180
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 18 PAGE 9 LOTS 295 & 296 CLEAR LAKE SHORES

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application

Attachments

	Properties	
Damaged Property Address:		
Address line 1	223 W SHORE Dr	
Address line 2		
City	CLEAR LAKE SHORES	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	JESSICA D	
Middle Name		
Last Name	SYLVESTOR	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address:		
Address line 1	6143 ELLA LEE	
Address line 2		
Other (PO Box, Route, etc)		
City	HOUSTON	
State	TX	
ZIP	77057	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1967
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	2620-0000-1449-000
Property Tax Identification Number	R159212
Latitude	29 548
Longitude	-95 036
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	176,290 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	3 08
Repetitive Loss Structure	Yes
Property Locator Number	0012968
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 18 PAGE 9 N 1/2 OF LOT 1448 ALL OF LOTS 1449 & 1450 & 1/2 OF LOT 1451 & 1/2 OF LOT 1477 & ALL LOTS 1478 & 1479 CLEAR LAKE SHORES

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet

First Floor Elevation (only applicable when Property Action is Elevation)	19.0 feet
Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854610001C	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:

Address line 1	30 LAZY Lane
Address line 2	
City	KEMAH
County	Galveston
State	TX
ZIP	77565

Owner Information:

First Name	WILLIAM A, JR
Middle Name	
Last Name	BROWN
Phone	Home / Office / Ext. / Cell / Other / Ext.

Owner's Mailing Address:

Address line 1	30 LAZY Lane
Address line 2	
Other (PO Box, Route, etc)	
City	KEMAH
State	TX
ZIP	77565
Does this property have other co-owners or holders of recorded interest?	N

Property Information:

Age of structure (year built)	1983
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4595-0000-0030-000
Property Tax Identification Number	R160246
Latitude	29 542
Longitude	-95 027
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00028737
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	244,330 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	2 196
Repetitive Loss Structure	Yes
Property Locator Number	0015996
Number of Losses	4 or More claims since 1978

Legal Description

ABST 18 PAGE 15 LOT 30 & S 30 FT OF LOT 31 LAZY BEND

Property Information II:

Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	8.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48548100018	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	33 LAZY Lane	
Address line 2		
City	KEMAH	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	JOSEPH & AILEEN	
Middle Name		
Last Name	SNIDER	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address.		
Address line 1	33 LAZY Lane	
Address line 2		
Other (PO Box, Route, etc)		
City	KEMAH	
State	TX	
ZIP	77565	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1973
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4585-0000-0033-000
Property Tax Identification Number	R160248
Latitude	29 542
Longitude	-95 027
Does this property have an NFIP Policy Number	Yes
Policy Number	*RL00043960*
Insurance Policy Provider	99999
Select hazard to be mitigated:	*Flood*
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	*216,840 00*
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 308
Repetitive Loss Structure	Yes
Property Locator Number	0025997
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 18 PAGE 15 LOT 33 LAZY BEND	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
CLEAR LAKE SHORES, CITY OF	485461	4854810001B	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	38 LAZY Lane	
Address line 2		
City	KEMAH	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	JASON C	
Middle Name		
Last Name	HESS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	6019 GOLD St	
Address line 2		
Other (PO Box, Route, etc)		
City	HOUSTON	
State	TX	
ZIP	77062	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1970
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4595-0000-0036-000
Property Tax Identification Number	R160251
Latitude	29 542
Longitude	-95 027
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	198,820 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 82
Repetitive Loss Structure	Yes
Property Locator Number	0017528
Number of Losses	2-3 claims Cumulatively > building Fair Market Value
Legal Description	
ABST 18 PAGE 15 LOT 36 LAZY BEND	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	8 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48548100018	04-04-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	3004 KENTUCKY Ave		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	EVELYN		
Middle Name			
Last Name	LAMBERT		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	PO BOX 123		
Address line 2			
Other (PO Box, Route, etc)	123		
City	DICKINSON		
State	TX		
ZIP	77539 - 0123		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1988
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	3040-0211-0003-000
Property Tax Identification Number	R164114
Latitude	29 476
Longitude	-95.05
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00046942
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	47,560 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 232
Repetitive Loss Structure	Yes
Property Locator Number	0017474
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value

Legal Description

ABST 19 PAGE 25 W 1/2 OF LOT 3 & ALL OF LOTS 4 THRU 6 & W 1/2 OF LOT 9 & ALL OF LOTS 10 THRU 12 BLK 211 DICKINSON

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet

First Floor Elevation (only applicable when Property Action is Elevation)	19.0 feet
Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700095C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	1100 MAGNOLIA TERRACE Cir		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	L C JR EST & EUNICE L		
Middle Name			
Last Name	GREER		
Phone	Home	Office	
		Ext.	
	Cell	Other	
		Ext.	
Owner's Mailing Address.			
Address line 1	PO BOX 361		
Address line 2			
Other (PO Box, Route, etc)	361		
City	DICKINSON		
State	TX		
ZIP	77539 - 0361		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4885-0000-0010-000
Property Tax Identification Number	R164894
Latitude	29 455
Longitude	-95 069
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045623
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	42,430 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 397
Repetitive Loss Structure	Yes
Property Locator Number	0026633
Number of Losses	4 or More claims since 1978

Legal Description

ABST 19 PERRY & AUSTIN LOT 10 & ADJN W 10 FT OF LOT 9 BLK 142 MAGNOLIA TERRACE & IMPS

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	4815690006B	03-04-1981

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	3751 MANOR Lane	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information		
First Name	SUZANNE S	
Middle Name		
Last Name	CHAPO	
	Home	Office Ext.
Phone	Cell	Other Ext.
Owner's Mailing Address		
Address line 1	3751 MANOR Lane	
Address line 2		
Other (PO Box Route etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information.	
Age of structure (year built)	1982
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5045-0000 0006-000
Property Tax Identification Number	R164902
Latitude	29 452
Longitude	-95 069
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00039817
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre Event Fair Market Value	35,470 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	2 369
Repetitive Loss Structure	Yes
Property Locator Number	0017464
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 19 PAGE 7 LOT 6 & SE S FT OF LOT 5 (6-0) MCDONALD MANOR *SBPCL 504500000006001*

Property Information II	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	8.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48167C0005B	03-04-1991

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	905 ROSEWOOD Dr		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	GARY & JENNIFER		
Middle Name			
Last Name	VITEMB		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	905 ROSEWOOD Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1956
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	6200-0000-0009-000
Property Tax Identification Number	R166970
Latitude	29 456
Longitude	-95 072
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045135
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	66,210 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 401
Repetitive Loss Structure	Yes
Property Locator Number	0026667
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 19 PERRY & AUSTIN LOT 9 PT LOTS 127-128ROSEWOOD VILLAS & IMPS ALSO E 15 FT OF LOT 8

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	4815690005B	03-04-1991

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	301 VIRGINIA Lane		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	JOANE R		
Middle Name			
Last Name	MCCALL		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	301 VIRGINIA Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1969
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1185-0001-0046-000
Property Tax Identification Number	R166057
Latitude	29 535
Longitude	-95.211
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00042503
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	87,540 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 726
Repetitive Loss Structure	Yes
Property Locator Number	0034204
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 20 PAGE 3 LOT 46 BLK 1 ANNALEA	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is a property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	48546800005D	05-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	303 VIRGINIA Lane	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	BARBARA A	
Middle Name		
Last Name	HARKRIDER	
Phone	Home / Cell	Office / Ext. / Other / Ext.
Owner's Mailing Address:		
Address line 1	303 VIRGINIA Lane	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1970
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1185-0001-0047-000
Property Tax Identification Number	R188058
Latitude	29.534
Longitude	-95 211
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00010917
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	117 550 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 326
Repetitive Loss Structure	Yes
Property Locator Number	0017518
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 20 PAGE 3 LOT 47 BLK 1 ANNALEA	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	48548C0005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	305 VIRGINIA Lane	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	MICHAEL G & KAREN M	
Middle Name		
Last Name	MYERS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	305 VIRGINIA Lane	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1964
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1185-0001-0048-000
Property Tax Identification Number	R166058
Latitude	29 535
Longitude	-95 211
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	223,660 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 203
Repetitive Loss Structure	Yes
Property Locator Number	0025214
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 20 PAGE 3 LOT 48 BLK 1 ANNALEA	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	48546800050	06-03-1986

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	1006 CLOVER RIDGE Ave	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	DANNY M & JANEL M	
Middle Name		
Last Name	YARBERRY	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	1006 CLOVER RIDGE Ave	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1981
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2685-0000-0018-000
Property Tax Identification Number	R168732
Latitude	29 522
Longitude	-95 222
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	266,640 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 525
Repetitive Loss Structure	Yes
Property Locator Number	0045110
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 20 PAGE 1 & 2 PT OF LOT R CLOVER ACRES

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485488	4854680005D	06-03-1968

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	914 MARYS Ct		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	ROY EARL & LINDA J		
Middle Name			
Last Name	KLUSENDORF		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	914 MARYS Ct		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1960
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	7325-0001-0013-000
Property Tax Identification Number	R169144
Latitude	29 544
Longitude	-95.217
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00004693
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	252,670 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 082
Repetitive Loss Structure	Yes
Property Locator Number	0017370
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 20 PAGE 4 LOT 13 BLK 1 VILLAGE GREEN	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	06-03-1986

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	207 WINDING Rd		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	JOSEPH T & HELEN M		
Middle Name			
Last Name	NORRIS		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	207 WINDING Rd		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1960
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	7325-0002-0023-000
Property Tax Identification Number	R169200
Latitude	29 543
Longitude	-95 217
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00042073
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	87 990 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 259
Repetitive Loss Structure	Yes
Property Locator Number	0025836
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 20 PAGE 4 LOT 23 BLK 2 VILLAGE GREEN & IMPS	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	48546800050	06-03-1986

Comments

Firm panels are attached to the application.

Attachments

	Properties	
Damaged Property Address:		
Address line 1	209 WINDING Rd	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	JUANITA L	
Middle Name		
Last Name	WIESER	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	209 WINDING Rd	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1960
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	7325-0002-0024-000
Property Tax Identification Number	R169201
Latitude	29 543
Longitude	-95 216
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00010116
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	91,170 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 58
Repetitive Loss Structure	Yes
Property Locator Number	0017495
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 20 LOT 24 & W 4 FT OF 25 BLK 2 VILLAGE GREEN & ADJ ESMT TRACT

Property Information II.	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
·e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485488	48354800050	06-03-1986

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	5022 SCENIC Dr		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	JOHN EDWARD		
Middle Name			
Last Name	JACOBS		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	3230 LEAFY PINE Ct		
Address line 2			
Other (PO Box, Route, etc)			
City	KINGWOOD		
State	TX		
ZIP	77345		
Does this property have other co-owners or holders of recorded interest?	N		
Property Information:			
Age of structure (year built)	1966		
SHPO Review	Not Applicable		
SHPO Reviewed Date			
Structure Type	Single Family		
Foundation type	Elevated on Piers, Piles, Posts or Columns		
Basement	No		
Type of Residence	Owner Occupied- Secondary Residence		
Parcel Number	7220-0007-0019-000		
Property Tax Identification Number	R171243		
Latitude	29.466		
Longitude	-95 012		
Does this property have an NFIP Policy Number	Yes		
Policy Number	9999999		
Insurance Policy Provider			
Select hazard to be mitigated:	Flood		
Damage Category	0-49% Damaged		
Pre-Event Fair Market Value	185,710 00		
Benefit Cost Analysis Performed	Yes		
Benefit Cost Ratio	4 213		
Repetitive Loss Structure	Yes		
Property Locator Number	0114359		
Number of Losses	4 or More claims since 1978		
Legal Description			
ABST 36 W G BANKS LOT 19 BLK 7 TROPICAL GDNS & IMPS			

Property Information II.	
· Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481568	4815690010A	02-16-1983

Comments

Firm panels are attached to the application.

Attachments

	Properties	
Damaged Property Address:		
Address line 1	18835 BAKER Rd	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	GERALD RANDAL	
Middle Name		
Last Name	MORA	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	PO BOX 803	
Address line 2		
Other (PO Box, Route, etc)	803	
City	FRIENDSWOOD	
State	TX	
ZIP	77549 - 0803	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1961
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	4045-0000-0016-001
Property Tax Identification Number	R171524
Latitude	29 513
Longitude	-95 222
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	129,090 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 001
Repetitive Loss Structure	Yes
Property Locator Number	0017538
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 46 PAGE 1 NE PT OF LOT 16 (16-1) EINAR HOIDALE SUB

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485466	4854680005D	06-03-1968

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	17 WILDERNESS Trl	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	JOEL DAVID	
Middle Name		
Last Name	SALINAS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	17 WILDERNESS Trl	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	0128-0014-0000-000
Property Tax Identification Number	R186294
Latitude	29 501
Longitude	-95 209
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated.	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	141,080 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	2.301
Repetitive Loss Structure	Yes
Property Locator Number	0017299
Number of Losses	4 or More claims since 1978

Legal Description

ABST 128 PAGE 3 A JACKSON SUR TR 14 2.157 ACRS

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485466	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:	
Address line 1	25 WILDERNESS Trl
Address line 2	
City	FRIENDSWOOD
County	Galveston
State	TX
ZIP	77546
Owner Information:	
First Name	GERALD R
Middle Name	
Last Name	HUBBARD
Phone	Home / Office / Ext. / Cell / Other / Ext.
Owner's Mailing Address:	
Address line 1	25 WILDERNESS Trl
Address line 2	
Other (PO Box, Route, etc)	
City	FRIENDSWOOD
State	TX
ZIP	77546
Does this property have other co-owners or holders of recorded interest?	N
Property Information:	
Age of structure (year built)	1974
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	0128-0020-0000-000
Property Tax Identification Number	R186302
Latitude	29 499
Longitude	-95 213
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	209,820 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	3 83
Repetitive Loss Structure	Yes
Property Locator Number	0017298
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 128 A JACKSON SUR TR 20, ACRES 4 427	
Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485466	4854680005D	08-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	33 WILDERNESS Trl	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	WALTER GORDON	
Middle Name		
Last Name	DECHERD	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	PO BOX 1141	
Address line 2		
Other (PO Box, Route, etc)	1141	
City	FRIENDSWOOD	
State	TX	
ZIP	77549 - 1141	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	0128-0023-0000-000
Property Tax Identification Number	R186305
Latitude	29 499
Longitude	-95.217
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	95,060 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 919
Repetitive Loss Structure	Yes
Property Locator Number	0017357
Number of Losses	4 or More claims since 1978

Legal Description

ABST 126 & 83 PAGE 3 A JACKSON & HOPPEL SUR TR 23 3 462 ACRS

Property Information II:	
- Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	48546C0005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	13006 POLK St	
Address line 2		
City	SANTA FE	
County	Galveston	
State	TX	
ZIP	77510	
Owner Information:		
First Name	ROBERT J & CHERYL D	
Middle Name		
Last Name	VINES	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	13006 POLK St	
Address line 2		
Other (PO Box, Route, etc)		
City	SANTA FE	
State	TX	
ZIP	77510	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1978
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1095-0000-0346-010
Property Tax Identification Number	R193151
Latitude	29 342
Longitude	-95 101
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	104,660 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 958
Repetitive Loss Structure	Yes
Property Locator Number	0044726
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 47 L CRAWFORD PT OF OUTLOT 346 (346-10) ALTA LOMA OUTLOTS

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700195C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	11203 33RD St	
Address line 2		
City	SANTA FE	
County	Galveston	
State	TX	
ZIP	77510	
Owner Information:		
First Name	BRENDA PENNINGTON	
Middle Name		
Last Name	HOLLAN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	11203 33RD St	
Address line 2		
Other (PO Box, Route, etc)		
City	SANTA FE	
State	TX	
ZIP	77510	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1961
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1095-0000-0455-003
Property Tax Identification Number	R194030
Latitude	29 332
Longitude	-95 067
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00044323
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	99,450 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 122
Repetitive Loss Structure	Yes
Property Locator Number	0001456
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 47 PAGE 25 PT OF OUTLOT 455 (455-3) ALTA LOMA OUTLOTS

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ve property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700195C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	6807 AVE F	
Address line 2		
City	SANTA FE	
County	Galveston	
State	TX	
ZIP	77510	
Owner Information:		
First Name	ANDREW	
Middle Name		
Last Name	PAOLI	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address		
Address line 1	6807 AVE F	
Address line 2		
Other (PO Box, Route, etc)		
City	SANTA FE	
State	TX	
ZIP	77510	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1095-0000-0493-003
Property Tax Identification Number	R184272
Latitude	29 347
Longitude	-95 076
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00042743
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	142,560 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 744
Repetitive Loss Structure	Yes
Property Locator Number	0026472
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 48 PAGE 16 PT OF OUTLOT 493 (493-3) ALTA LOMA OUTLOTS

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700195C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	1210 FOREMAN	
Address line 2		
City	LA MARQUE	
County	Galveston	
State	TX	
ZIP	77568	
Owner Information:		
First Name	REUBEN J & JANICE E	
Middle Name		
Last Name	PRINGLE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	1241 DEER RIDGE Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	LEAGUE CITY	
State	TX	
ZIP	77573 - 5258	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1968
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	7790-0000-0017-000
Property Tax Identification Number	R200269
Latitude	29 368
Longitude	-94 97
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	113,340 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 609
Repetitive Loss Structure	Yes
Property Locator Number	0017539
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 150 PAGE 4 LOT 17 PAULINE ZINN SUB	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LA MARQUE, CITY OF	485466	4854860020D	02-16-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	1208 FOREMAN	
Address line 2		
City	LA MARQUE	
County	Galveston	
State	TX	
ZIP	77568	
Owner Information:		
First Name	BERNADETTE & RODNEY	
Middle Name		
Last Name	SULLIVAN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	1208 FOREMAN	
Address line 2		
Other (PO Box, Route, etc)		
City	LA MARQUE	
State	TX	
ZIP	77568	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	7790-0000-0018-000
Property Tax Identification Number	R200270
Latitude	29 368
Longitude	-94 97
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	75,580 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 042
Repetitive Loss Structure	Yes
Property Locator Number	0050432
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 150 PAGE 4 LOT 18 PAULINE ZINN SUB	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LA MARQUE, CITY OF	485466	48548600200	02-16-1983

Comments

Firm panels are attached to the application

Attachments

	Properties	
Damaged Property Address:		
Address line 1	1204 FOREMAN	
Address line 2		
City	LA MARQUE	
County	Galveston	
State	TX	
ZIP	77568	
Owner Information:		
First Name	AURORA	
Middle Name		
Last Name	PERRETT	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address:		
Address line 1	1204 FOREMAN	
Address line 2		
Other (PO Box, Route, etc)		
City	LA MARQUE	
State	TX	
ZIP	77568	
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)	1968	
SHPO Review	Not Applicable	
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Slab on Grade	
Basement	No	
Type of Residence	Owner Occupied-Principal Residence	
Parcel Number	7790-0000-0019-000	
Property Tax Identification Number	R200271	
Latitude	29 368	
Longitude	-94 97	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value	103,070 00	
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	1 65	
Repetitive Loss Structure	Yes	
Property Locator Number	0002808	
Number of Losses	4 or More claims since 1978	
Legal Description		
ABST 150 PAGE 4 LOT 19 PAULINE ZINN SUB		
Property Information II:		
Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LA MARQUE, CITY OF	485466	4854860020D	02-16-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	704 N CLEAR CREEK Dr	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	KENNETH R & GLENDA M	
Middle Name		
Last Name	GATTEN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	704 N CLEAR CREEK Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1980
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3475-0000-0017-000
Property Tax Identification Number	R201568
Latitude	29 516
Longitude	-95 177
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	83,790 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 91
Repetitive Loss Structure	Yes
Property Locator Number	0116615
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 151 PAGE 10 LOT 17 FRIENDSWOOD FOREST ***DEFERRAL***

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
s property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485488	4854880006D	08-03-1988

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	414 FALLING LEAF Dr		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	J L		
Middle Name			
Last Name	STONE		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	414 FALLING LEAF Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1967
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4120-0000-0007-000
Property Tax Identification Number	R202289
Latitude	29 522
Longitude	-95 201
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	131,420 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 933
Repetitive Loss Structure	Yes
Property Locator Number	0018458
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 PGE 8 LOT 7 IMPERIAL GARDENS	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	48546800050	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	5 HAVERFORD Lane		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	FELTON M & MARY		
Middle Name			
Last Name	BAKER		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	5 HAVERFORD Lane		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1976
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	6020-0000-0028-000
Property Tax Identification Number	R202604
Latitude	29 529
Longitude	-95 19
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00011772
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	187,230 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 778
Repetitive Loss Structure	Yes
Property Locator Number	0015961
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 151 PAGE 5 LOT 29 AND SE 1/2 OF LOT 30 QUAKERS LANDING

Property Information II	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	48546800050	08-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	1 EARLHAM Dr	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	LISA BURKE	
Middle Name		
Last Name	JOHNSON	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	1 EARLHAM Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners *or holders of recorded interest?*	N	

Property Information:	
Age of structure (year built)	1978
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	6020-0000-0042-000
Property Tax Identification Number	R202618
Latitude	29 528
Longitude	-95 191
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00016239
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	294,160 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	3 3
Repetitive Loss Structure	Yes
Property Locator Number	0026357
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 PAGE 5 LOT 42 QUAKERS LANDING	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	08-03-1988

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	1001 COWARDS CREEK Ct	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	WILLIAM BURNETT II	
Middle Name		
Last Name	WOOD	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	1001 COWARDS CREEK Ct	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	7275-0000-0005-000
Property Tax Identification Number	R203323
Latitude	29 515
Longitude	-95 212
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	66,440 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 584
Repetitive Loss Structure	Yes
Property Locator Number	0005006
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 PAGE 2 LOT 5 VAN BOCKEL UNRECORDED SUB	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485488	48548600050	08-03-1988

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	1008 COWARDS CREEK Ct		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	KAREN D		
Middle Name			
Last Name	BLUMENTRIT		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	1008 COWARDS CREEK Ct		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1964
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	7275-0000-0012-000
Property Tax Identification Number	R203330
Latitude	29 515
Longitude	-95 214
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00018052
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	122,560.00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 511
Repetitive Loss Structure	Yes
Property Locator Number	0017476
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 151 PAGE 2 LOT 12 VAN BOCKEL UNRECORDED SUB	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	06-03-1988

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	4202 BRUCE St		
Address line 2			
City	BACLIFF		
County	Galveston		
State	TX		
ZIP	77518		
Owner Information:			
First Name	DOUGLAS A &PATRICIA A		
Middle Name			
Last Name	MINTEER		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	PO BOX 383		
Address line 2			
Other (PO Box, Route, etc)	383		
City	BACLIFF		
State	TX		
ZIP	77518 - 0383		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1980
SHPO Review	Unknown
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1295-0021-0001-000
Property Tax Identification Number	R203997
Latitude	29 509
Longitude	94 989
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00042212
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	141,560 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 553
Repetitive Loss Structure	Yes
Property Locator Number	0067830
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 154 S G MCCLENNY LOT 1-2 -3-4-5 BLK 21 BACLIFF	

Property Information II	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700035C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	4217 WHITE St		
Address line 2			
City	BACLIFF		
County	Galveston		
State	TX		
ZIP	77518		
Owner Information:			
First Name	DORIS & LEOLA CATES		
Middle Name			
Last Name	MEADOR		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address			
Address line 1	PO BOX 773		
Address line 2			
Other (PO Box, Route, etc)	773		
City	DICKINSON		
State	TX		
ZIP	77539 - 0773		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1969
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1295-0035-0023-000
Property Tax Identification Number	R204134
Latitude	29 505
Longitude	-94 994
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00015393
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	63,100 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 996
Repetitive Loss Structure	Yes
Property Locator Number	0038331
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 154 S G MCCLENNY LOTS 23 TO 25 BLK 35 BACLIFF	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700035C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

	Properties	
Damaged Property Address:		
Address line 1	4507 MARINERS MOORING St	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner information:		
First Name	DAVID B	
Middle Name		
Last Name	MILLER	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	4507 MARINERS MOORING St	
Address line 2		
Other (PO Box, Route, etc)		
City	DICKINSON	
State	TX	
ZIP	77539	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1973
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4960-0000-0034-000
Property Tax Identification Number	R205127
Latitude	29 46
Longitude	-95 019
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00018340
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	48,190 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 462
Repetitive Loss Structure	Yes
Property Locator Number	0013188
Number of Losses	4 or More claims since 1978

Legal Description

ABST 155 P G MERRITT LOT 34 MARINERS MOORING S-D REPLAT OF PETITE BAIE ROYALE

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
DICKINSON, CITY OF	481569	4815690010A	02-16-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address*			
Address line 1	2119 FENWOOD St		
Address line 2			
City	LEAGUE CITY		
County	Galveston		
State	TX		
ZIP	77565		
Owner Information.			
First Name	FRANK BENNETT, JR		
Middle Name			
Last Name	HARVIE		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	2119 FENWOOD St		
Address line 2			
Other (PO Box, Route, etc)			
City	LEAGUE CITY		
State	TX		
ZIP	77565		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1968
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3800-0003-0006-000
Property Tax Identification Number	R212180
Latitude	29 551
Longitude	-95 051
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	122,110 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 534
Repetitive Loss Structure	Yes
Property Locator Number	0068919
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 18 PAGE 4 & 9 LOT 6 BLK 3 GLEN COVE SUB	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854860011C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	2108 KNOLLWOOD St	
Address line 2		
City	LEAGUE CITY	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	GILES	
Middle Name		
Last Name	BARTLE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	PO BOX 102	
Address line 2		
Other (PO Box, Route, etc)	102	
City	KEMAH	
State	TX	
ZIP	77565 - 0102	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	3600-0006-0001-000
Property Tax Identification Number	R212230
Latitude	29 549
Longitude	-95 051
Does this property have an NFIP Policy Number	Yes
Policy Number	1791D01259
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	125,500 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	3 113
Repetitive Loss Structure	Yes
Property Locator Number	0036829
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 18 PAGE 9 LOTS 1 & 2 BLK 6 GLEN COVE SUB	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854880011C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	7026 TERRASSO Dr	
Address line 2		
City	HITCHCOCK	
County	Galveston	
State	TX	
ZIP	77563	
Owner Information:		
First Name	ARCHIE M	
Middle Name		
Last Name	DAVIS	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	3438 KENTWOOD Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	SPRING	
State	TX	
ZIP	77380 - 1228	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1977
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	3930-0000-0028-000
Property Tax Identification Number	R212793
Latitude	29 334
Longitude	-94 947
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00042450
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	109,530 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 235
Repetitive Loss Structure	Yes
Property Locator Number	0096771
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 175 PAGE 11 LOT 28 LOUIS HI-BYO CAMPSITES 1ST ADDN	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700205C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address.

Address line 1	7111 STINGRAY
Address line 2	
City	HITCHCOCK
County	Galveston
State	TX
ZIP	77563

Owner Information.

First Name	WALTER L JR &BETTY JOANN
Middle Name	
Last Name	DOHMAN

Phone	Home	Office	
		Ext	
	Cell	Other	
		Ext	

Owner's Mailing Address

Address line 1	PO BOX 346
Address line 2	
Other (PO Box, Route etc)	346
City	HITCHCOCK
State	TX
ZIP	77563 - 0346
Does this property have other co-owners *or holders of recorded interest?*	N

Property Information:

Age of structure (year built)	1980
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	3931-0000-0019-000
Property Tax Identification Number	R212815
Latitude	29 333
Longitude	-94 949
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00044167
Insurance Policy Provider	99999
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	105 880 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 871
Repetitive Loss Structure	Yes
Property Locator Number	0119219
Number of Losses	4 or More claims since 1978

Legal Description

ABST 175 LOTS 19, 20 & 21 LOUIS HI-BYO CAMPSITES 2ND ADDN

Property Information II

Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
:e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700205C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	7117 W HUNTER		
Address line 2			
City	HITCHCOCK		
County	Galveston		
State	TX		
ZIP	77563		
Owner Information:			
First Name	MARK E		
Middle Name			
Last Name	DERRYBERRY		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	7117 W HUNTER		
Address line 2			
Other (PO Box, Route, etc)			
City	HITCHCOCK		
State	TX		
ZIP	77563		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1985
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4113-0000-0021-000
Property Tax Identification Number	R212866
Latitude	29 333
Longitude	-94 951
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00042547
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	180,480 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 991
Repetitive Loss Structure	Yes
Property Locator Number	0033775
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 175 PAGE 11 LOT 21 HUNTER CAMP UNRECORDED SUB	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...are a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700205C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	705 DORAL Ct	
Address line 2		
City	FRIENDSWOOD	
County	Galveston	
State	TX	
ZIP	77546	
Owner Information:		
First Name	PEGGY IRENE	
Middle Name		
Last Name	DUNCAN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	705 DORAL Ct	
Address line 2		
Other (PO Box, Route, etc)		
City	FRIENDSWOOD	
State	TX	
ZIP	77546	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	6831-0009-0038-000
Property Tax Identification Number	R219119
Latitude	29 493
Longitude	-95 216
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00016958
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	182,060 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 057
Repetitive Loss Structure	Yes
Property Locator Number	0026662
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 184 PAGE 1 LOT 38 BLK 9 SUNMEADOW SEC 2	

Property Information II	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	5122 CASA GRANDE Dr		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	DOUGLAS A & JOSJE J		
Middle Name			
Last Name	HAAS		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	5122 CASA GRANDE Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1968
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	2315-0000-0013-000
Property Tax Identification Number	R228493
Latitude	29 457
Longitude	-95 036
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	145,700 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 354
Repetitive Loss Structure	Yes
Property Locator Number	0007592
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 208 PAGE 1 E 1/2 OF LOT 12 & LOTS 13 & 14 CASA GRANDE

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700095C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:			
Address line 1	5114 CASA GRANDE Dr		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	JOHN T & JOAN BLACK		
Middle Name			
Last Name	AGREGARD		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	PO BOX 757		
Address line 2			
Other (PO Box, Route, etc)	757		
City	DICKINSON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1982
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	2315-0000-0015-000
Property Tax Identification Number	R228494
Latitude	29 457
Longitude	-95 036
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00046313
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	56,320 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	2 067
Repetitive Loss Structure	Yes
Property Locator Number	0015988
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 208 W K WILSON LOT 15 BELCHER TR CASA GRANDE	

Property Information II:	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700095C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:			
Address line 1	63 EL DORADO Dr		
Address line 2			
City	FRIENDSWOOD		
County	Galveston		
State	TX		
ZIP	77546		
Owner Information:			
First Name	JOHN S & DEBORA A		
Middle Name			
Last Name	MOTSCH		
Phone	Home	Office	
		Ext.	
	Cell	Other	
		Ext.	
Owner's Mailing Address.			
Address line 1	63 EL DORADO Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	FRIENDSWOOD		
State	TX		
ZIP	77546		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	3175-0000-0011-000
Property Tax Identification Number	R231941
Latitude	29 478
Longitude	-95 21
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00048909
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	91,030 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 899
Repetitive Loss Structure	Yes
Property Locator Number	0041833
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 625 PAGE 3 LOT 11 EL DORADO SUB	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
·here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
·e property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485466	4854680005D	06-03-1988

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address.

Address line 1	16 WINDSONG Lane
Address line 2	
City	FRIENDSWOOD
County	Galveston
State	TX
ZIP	77546

Owner Information

First Name	CARL A		
Middle Name			
Last Name	ALTMAN		
Phone	Home	Office	
		Ext	
	Cell	Other	
		Ext.	

Owner's Mailing Address

Address line 1	16 WINDSONG Lane
Address line 2	
Other (PO Box, Route, etc)	
City	FRIENDSWOOD
State	TX
ZIP	77546
Does this property have other co-owners or holders of recorded interest?	N

Property Information

Age of structure (year built)	1973
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	7695-0000-0018-000
Property Tax Identification Number	R233553
Latitude	29 496
Longitude	95 222
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	103 060 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 183
Repetitive Loss Structure	Yes
Property Locator Number	0017400
Number of Losses	4 or More claims since 1978

Legal Description

ABST 84 PAGE 4 LOT 16 WINDSONG UNRECORDED SUB

Property Information II

Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable if the Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable if the Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
FRIENDSWOOD, CITY OF	485468	4854680005D	08-03-1988

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	7242 AVE L	
Address line 2		
City	SANTA FE	
County	Galveston	
State	TX	
ZIP	77510	
Owner Information:		
First Name	LUCINDA	
Middle Name		
Last Name	GIL	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	7242 AVE L	
Address line 2		
Other (PO Box, Route, etc)		
City	SANTA FE	
State	TX	
ZIP	77510	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1965
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1095-0000-0249-016
Property Tax Identification Number	R290004
Latitude	29 339
Longitude	-95 086
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00042664
Insurance Policy Provider	99999
Select hazard to be mitigated*	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	73,610 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 032
Repetitive Loss Structure	Yes
Property Locator Number	0025153
Number of Losses	4 or More claims since 1978
Legal Description	

ABST 47 PAGE 21 PT OF OUTLOT 249 (249-16) ALTA LOMA OUTLOTS

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ie property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
SANTA FE, CITY OF	481562	4854700195C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address*		
Address line 1	12701 32ND St	
Address line 2		
City	SANTA FE	
County	Galveston	
State	TX	
ZIP	77510	
Owner Information*		
First Name	TERRY LEE & MARGARET	
Middle Name		
Last Name	GRAHAM	
Phone	Home	Office Ext
	Cell	Other Ext
Owner's Mailing Address.		
Address line 1	12701 32ND St	
Address line 2		
Other (PO Box, Route, etc)		
City	SANTA FE	
State	TX	
ZIP	77510	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1979
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	1095-0000-0303-023
Property Tax Identification Number	R312288
Latitude	29 343
Longitude	95 096
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045468
Insurance Policy Provider	99999
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	57,740 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 812
Repetitive Loss Structure	Yes
Property Locator Number	0044139
Number of Losses	4 or More claims since 1978

Legal Description

ABST 47 L CRAWFORD SUR PT OF OUTLOT 303 (303-23) ALTA LOMA OUTLOTS

Property Information II	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation	22 0 feet
First Floor Elevation	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
ıere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
· Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700195C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	5012 FARMERS Rd	
Address line 2		
City	ALGOA	
County	Galveston	
State	TX	
ZIP	77511	
Owner Information		
First Name	KEVIN & JENNIFER	
Middle Name		
Last Name	FUNKE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	5012 FARMERS Rd	
Address line 2		
Other (PO Box, Route, etc)		
City	ALGOA	
State	TX	
ZIP	77511	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information.	
Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	0034-0003-0001-000
Property Tax Identification Number	R372781
Latitude	29 382
Longitude	-95 162
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	50 680 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 195
Repetitive Loss Structure	Yes
Property Locator Number	0012951
Number of Losses	4 or More claims since 1978
Legal Description	
ABST 34 PAGE 1 C BIGELOW SUR TR 3-1 3 999 ACRS	

Property Information II.	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation	22 0 feet
First Floor Elevation	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700145C	05-02-1983

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address:		
Address line 1	302 CAPEWOOD Dr	
Address line 2		
City	LEAGUE CITY	
County	Galveston	
State	TX	
ZIP	77573	
Owner Information:		
First Name	IBRAHIM & SEREN	
Middle Name		
Last Name	EL-BATAINEH	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1	302 CAPEWOOD Dr	
Address line 2		
Other (PO Box, Route, etc)		
City	LEAGUE CITY	
State	TX	
ZIP	77573	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1996
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	5462-0004-0001-003
Property Tax Identification Number	R388661
Latitude	29 493
Longitude	-95 084
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045636
Insurance Policy Provider	99999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	163,040 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	3 422
Repetitive Loss Structure	Yes
Property Locator Number	0115050
Number of Losses	4 or More claims since 1978

Legal Description

ABST 3 & 19 AUSTIN-PERRY & AUSTIN SUR LOT 1 (1-3) BLK 4 THE OAKS OF CLEAR CREEK SUB SEC 3

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ie property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
LEAGUE CITY, CITY OF	485488	4854860030D	09-28-1990

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address			
Address line 1	1021 WALSH Lane		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77554		
Owner Information			
First Name	FRED C & PATRICIA W		
Middle Name			
Last Name	BURNS		
Phone	Home	Office Ext	
	Cell	Other Ext	
Owner's Mailing Address.			
Address line 1	PO BOX 1388		
Address line 2			
Other (PO Box, Route etc)	1388		
City	HOUSTON		
State	TX		
ZIP	77251 - 1388		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information.	
Age of structure (year built)	1975
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	6356-0000-0001-000
Property Tax Identification Number	R402532
Latitude	29 284
Longitude	-94 86
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045872
Insurance Policy Provider	99999
Select hazard to be mitigated	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	82,560 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 881
Repetitive Loss Structure	Yes
Property Locator Number	0068386
Number of Losses	4 or More claims since 1978

Legal Description

ABST 121 HALL & JONES SUR LOT 1 SCRUGGS & JONES ADDN (2001)

Property Information II	
Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable if Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable if Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON, CITY OF	485469	4854690021D	08-15-1983

Comments

Firm panels are attached to the application.

Attachments

Properties

Damaged Property Address:		
Address line 1	4221 DARBY St	
Address line 2		
City	BACLIFF	
County	Galveston	
State	TX	
ZIP	77518	
Owner Information:		
First Name	E LANE	
Middle Name		
Last Name	ELDRIDGE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1	PO BOX 943	
Address line 2		
Other (PO Box, Route, etc)	943	
City	BACLIFF	
State	TX	
ZIP	77518	
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	1960
SHPO Review	*Unknown*
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	*No*
Type of Residence	Owner Occupied- Secondary Residence
Parcel Number	1295-0009-0024-001
Property Tax Identification Number	R422038
Latitude	29.511
Longitude	-94 985
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	149,990 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 881
Repetitive Loss Structure	Yes
Property Locator Number	0025147
Number of Losses	4 or More claims since 1978

Legal Description

ABST 154 S G MCCENNY SUR LOTS 24,25 & 26 (24-1) BLK 9 BACLIFF

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700035C	05-02-1983

Comments

Firm panels are attached to the application.

Attachments

	Properties		
Damaged Property Address:			
Address line 1	2525 CEMETERY Rd		
Address line 2			
City	SANTA FE		
County	Galveston		
State	TX		
ZIP	77517		
Owner Information:			
First Name	THERESA A		
Middle Name			
Last Name	ABELL		
Phone	Home	Office Ext.	
	Cell	Other Ext	
Owner's Mailing Address.			
Address line 1	2525 CEMETERY Rd		
Address line 2			
Other (PO Box, Route, etc)			
City	SANTA FE		
State	TX		
ZIP	77517		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	1972
SHPO Review	Not Applicable
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Slab on Grade
Basement	No
Type of Residence	Owner Occupied-Principal Residence
Parcel Number	4082-0000-0002-000
Property Tax Identification Number	R424089
Latitude	29 405
Longitude	-95 115
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00045438
Insurance Policy Provider	99999
Select hazard to be mitigated.	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	221,690 00
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 872
Repetitive Loss Structure	Yes
Property Locator Number	0047268
Number of Losses	4 or More claims since 1978
Legal Description	
HOSKINSON'S SUB (2005) ABST 16, LOT 2, ACRES 2 927	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Riverine Flooding
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazard with water surface elevations determined (A1-30, AE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700150D	11-18-1990

Comments

Firm panels are attached to the application

Attachments

Properties

Damaged Property Address.

Address line 1	1036 E CANAL St
Address line 2	
City	PORT BOLIVAR
County	Galveston
State	TX
ZIP	77650

Owner Information:

First Name	Donnie
Middle Name	
Last Name	Mears
Phone	Home / Office / Ext / Cell / Other / Ext

Owner's Mailing Address.

Address line 1	4808 Woodrow Ave
Address line 2	
Other (PO Box, Route, etc)	
City	Galveston
State	TX
ZIP	
Does this property have other co-owners or holders of recorded interest?	N

Property Information

Age of structure (year built)	
SHPO Review	
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	*Elevated on Piers, Piles, Posts or Columns*
Basement	No
Type of Residence	
Parcel Number	
Property Tax Identification Number	
Latitude	29 4618873
Longitude	-94 635891
Does this property have an NFIP Policy Number	Yes
Policy Number	SF00172946
Insurance Policy Provider	
Select hazard to be mitigated	Flood
Damage Category	0 49% Damaged
Pre-Event Fair Market Value	
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 62
Repetitive Loss Structure	Yes
Property Locator Number	0096856
Number of Losses	4 or More claims since 1978
Legal Description	

Property Information II.

Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (Only applicable if Property Action is Elevation)	22 0 feet
First Floor Elevation (Only applicable if Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	No
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700124E	07-05-1993

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	4103 BAYSHORE Dr	
Address line 2		
City	BACLIFF	
County	Galveston	
State	TX	
ZIP	77518	
Owner Information:		
First Name	ROBERT & SUSAN	
Middle Name		
Last Name	MARTIN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Slab on Grade	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 5139015	
Longitude	-94 98416	
Does this property have an NFIP Policy Number	Yes	
Policy Number	8702785039	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 84	
Repetitive Loss Structure	Yes	
Property Locator Number	0124938	
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value	
Legal Description		
Property Information II:		
Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
:e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700035C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	1118 Rosenboom St	
Address line 2		
City	Crystal Beach	
County	Galveston	
State	TX	
ZIP	77650	
Owner Information:		
First Name	Tracy Lee	
Middle Name		
Last Name	Adams	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)	P O Box 1339	
City	Crystal Beach	
State	TX	
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 4501318	
Longitude	-94 670012	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999999999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 89	
Repetitive Loss Structure	Yes	
Property Locator Number	0167850	
Number of Losses	2-3 claims Cumulatively > building Fair Market Value	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700123F	07-05-1993

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	11212 Bernice Dr	
Address line 2		
City	Galveston	
County	Galveston	
State	TX	
ZIP	77554	
Owner Information:		
First Name	David	
Middle Name		
Last Name	Lacroix	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address.		
Address line 1	608 Canyon Crest	
Address line 2		
Other (PO Box, Route, etc)		
City	League City	
State	TX	
ZIP	77554	
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 2362291	
Longitude	-94 882344	
Does this property have an NFIP Policy Number	Yes	
Policy Number	1150132793	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 94	
Repetitive Loss Structure	Yes	
Property Locator Number	0124436	
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48546900460	08-15-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	1187 N STINGAREE Dr	
Address line 2		
City	Crystal Beach	
County	Galveston	
State	TX	
ZIP	77650	
Owner Information:		
First Name	GARDNER AND BARBARA	
Middle Name		
Last Name	BYROM	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)	PO BOX 1230	
City	Crystal Beach	
State	TX	
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 4793661	
Longitude	-94 602148	
Does this property have an NFIP Policy Number	Yes	
Policy Number	1791S00598	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed		
Benefit Cost Ratio	0 87	
Repetitive Loss Structure	Yes	
Property Locator Number	0167870	
Number of Losses	2-3 claims Cumulatively > building Fair Market Value	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	Floodplain
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700126E	05-02-1983

Comments

Attachments

Properties

Damaged Property Address*			
Address line 1	1233 DICK BAY Dr		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	LIONG JENG AND WENDY		
Middle Name			
Last Name	WONG		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1	11714 WENDOVER LN		
Address line 2			
Other (PO Box, Route, etc)			
City	HOUSTON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		
Property Information:			
Age of structure (year built)			
SHPO Review			
SHPO Reviewed Date			
Structure Type	Single Family		
Foundation type	Elevated on Piers, Piles, Posts or Columns		
Basement	No		
Type of Residence	Owner Occupied-Principal Residence		
Parcel Number			
Property Tax Identification Number			
Latitude	29 4605151		
Longitude	-94 938609		
Does this property have an NFIP Policy Number	Yes		
Policy Number	1150060855		
Insurance Policy Provider			
Select hazard to be mitigated*	Flood		
Damage Category	0-49% Damaged		
Pre-Event Fair Market Value			
Benefit Cost Analysis Performed			
Benefit Cost Ratio	0 59		
Repetitive Loss Structure	Yes		
Property Locator Number	0098977		
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value		
Legal Description			
Property Information II:			
* Primary Property Action	Elevation		
Secondary Property Actions			
Flood Hazard			
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet		
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet		

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
.e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:			
Address line 1	12920 BERMUDA BEACH Dr		
Address line 2			
City	GALVESTON		
County	Galveston		
State	TX		
ZIP	77561		
Owner Information:			
First Name	CLIFFORD		
Middle Name			
Last Name	YOUNGBLOOD		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address			
Address line 1			
Address line 2			
Other (PO Box, Route, etc)			
City			
State			
ZIP			
Does this property have other co-owners or holders of recorded interest?	N		
Property Information:			
Age of structure (year built)			
SHPO Review			
SHPO Reviewed Date			
Structure Type	Single Family		
Foundation type	Elevated on Piers, Piles, Posts or Columns		
Basement	No		
Type of Residence			
Parcel Number			
Property Tax Identification Number			
Latitude	29 2154411		
Longitude	-94 915671		
Does this property have an NFIP Policy Number	Yes		
Policy Number	054825170F		
Insurance Policy Provider			
Select hazard to be mitigated:	Flood		
Damage Category	0-49% Damaged		
Pre-Event Fair Market Value			
Benefit Cost Analysis Performed			
Benefit Cost Ratio	1 04		
Repetitive Loss Structure	Yes		
Property Locator Number	0126556		
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value		
Legal Description			
Property Information II:			
* Primary Property Action	Elevation		
Secondary Property Actions			
Flood Hazard			
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet		
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet		

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Coastal Basin
Property located within	Floodplain
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is a property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854690044D	08-15-1983

Comments

Attachments

	Properties		
Damaged Property Address:			
Address line 1	1309 8TH St		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	RONALD		
Middle Name			
Last Name	MASTERS		
Phone	Home	Office Ext	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	619 OLD OAKS Dr		
Address line 2			
Other (PO Box, Route, etc)			
City			
State			
ZIP			
Does this property *have other co-owners or holders of recorded interest?*	N		
Property Information:			
Age of structure (year built)			
SHPO Review			
SHPO Reviewed Date			
Structure Type	Single Family		
Foundation type	Slab on Grade		
Basement	No		
Type of Residence			
Parcel Number			
Property Tax Identification Number			
Latitude	29 4753783		
Longitude	-94 923309		
Does this property have an NFIP Policy Number	Yes		
Policy Number	9999999999999999		
Insurance Policy Provider			
Select hazard to be mitigated:	Flood		
Damage Category	0-49% Damaged		
Pre-Event Fair Market Value			
Benefit Cost Analysis Performed	Yes		
Benefit Cost Ratio	1 06		
Repetitive Loss Structure	Yes		
Property Locator Number	0088457		
Number of Losses	4 or More claims since 1978		
Legal Description			
Property Information II:			
* Primary Property Action	Elevation		
Secondary Property Actions			
Flood Hazard			
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet		
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet		

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	Floodplain
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700105C	05-02-1983

Comments

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Properties

Damaged Property Address:		
Address line 1	1437 JOHN St	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	MICKEY	
Middle Name		
Last Name	TOWLES	
Phone	Home Cell	Office Ext. Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 4778308	
Longitude	-94.94549	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	3 26	
Repetitive Loss Structure	Yes	
Property Locator Number	0003108	
Number of Losses	4 or More claims since 1978	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
a property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:			
Address line 1	1445 JOHN St		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information			
First Name	WALTER		
Middle Name			
Last Name	PERSONS		
Phone	Home	Office	Ext.
	Cell	Other	Ext.
Owner's Mailing Address:			
Address line 1			
Address line 2			
Other (PO Box, Route, etc)			
City			
State			
ZIP			
Does this property have other co-owners or holders of recorded interest?	N		
Property Information:			
Age of structure (year built)			
SHPO Review			
SHPO Reviewed Date			
Structure Type	Single Family		
Foundation type	Elevated on Piers, Piles, Posts or Columns		
Basement	No		
Type of Residence			
Parcel Number			
Property Tax Identification Number			
Latitude	29 4776658		
Longitude	-94 945741		
Does this property have an NFIP Policy Number	Yes		
Policy Number	9999999999999999		
Insurance Policy Provider			
Select hazard to be mitigated:	Flood		
Damage Category	0-49% Damaged		
Pre-Event Fair Market Value			
Benefit Cost Analysis Performed	Yes		
Benefit Cost Ratio	1 92		
Repetitive Loss Structure	Yes		
Property Locator Number	0088460		
Number of Losses	4 or More claims since 1978		
Legal Description			
Property Information II:			
Primary Property Action	Elevation		
Secondary Property Actions			
Flood Hazard			
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet		
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet		

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Coastal Basin
Property located within	Floodway
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	1527 JOHN St	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	DARWIN	
Middle Name		
Last Name	WILSON	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 4768488	
Longitude	-94 946995	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999999999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	1 1	
Repetitive Loss Structure	Yes	
Property Locator Number	0068463	
Number of Losses	4 or More claims since 1978	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address			
Address line 1	1537 JOHN St		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information.			
First Name	ROBERT		
Middle Name			
Last Name	SPENCE		
Phone	Home	Office Ext	
	Cell	Other Ext	
Owner's Mailing Address.			
Address line 1			
Address line 2			
Other (PO Box, Route, etc)			
City			
State			
ZIP			
Does this property *have other co-owners* or holders of recorded interest?	N		
Property Information*			
Age of structure (year built)			
SHPO Review			
SHPO Reviewed Date			
Structure Type	Single Family		
Foundation type	Elevated on Piers, Piles, Posts or Columns		
Basement	No		
Type of Residence			
Parcel Number			
Property Tax Identification Number			
Latitude	29 4766842		
Longitude	-94 947247		
Does this property have an NFIP Policy Number	Yes		
Policy Number	804948164		
Insurance Policy Provider			
Select hazard to be mitigated	Flood		
Damage Category	0-49% Damaged		
Pre-Event Fair Market Value			
Benefit Cost Analysis Performed	Yes		
Benefit Cost Ratio	0 63		
Repetitive Loss Structure	Yes		
Property Locator Number	0097581		
Number of Losses	4 or More claims since 1978		
Legal Description			
Property Information II			
Primary Property Action	Elevation		
Secondary Property Actions			
Flood Hazard			
Base Flood Elevation (only applicable [illegible] Property Actions Elevation)	22 0 feet		
First Floor Elevation [illegible]	19 0 feet		

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	1545 JOHN St	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	LEONARD	
Middle Name		
Last Name	KASOWAKI	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	Yes	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 4766027	
Longitude	-94 947372	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999999999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed		
Benefit Cost Ratio	3 19	
Repetitive Loss Structure	Yes	
Property Locator Number	0068464	
Number of Losses	4 or More claims since 1978	
Legal Description		
Property Information II:		
· Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19.0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	
Property located within	
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

	Properties		
Damaged Property Address:			
Address line 1	1615 DICK BAY St		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	STEVE		
Middle Name			
Last Name	KASS		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address:			
Address line 1			
Address line 2			
Other (PO Box, Route, etc)			
City			
State			
ZIP			
Does this property have other co-owners or holders of recorded interest?	N		
Property Information:			
Age of structure (year built)			
SHPO Review			
SHPO Reviewed Date			
Structure Type	Single Family		
Foundation type	Slab on Grade		
Basement	Yes		
Type of Residence			
Parcel Number			
Property Tax Identification Number			
Latitude	29 4751066		
Longitude	-94 949748		
Does this property have an NFIP Policy Number	Yes		
Policy Number	9999999999999999		
Insurance Policy Provider			
Select hazard to be mitigated:	Flood		
Damage Category	0-49% Damaged		
Pre-Event Fair Market Value			
Benefit Cost Analysis Performed	Yes		
Benefit Cost Ratio	0 84		
Repetitive Loss Structure	Yes		
Property Locator Number	0008225		
Number of Losses	4 or More claims since 1978		
Legal Description			
Property Information II:			
Primary Property Action	Elevation		
Secondary Property Actions			
Flood Hazard			
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet		
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet		

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	1624 DICK BAY Dr	
Address line 2		
City	SAN LEON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	STEVE	
Middle Name		
Last Name	HOYLAND	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 4749595	
Longitude	-94 950898	
Does this property have an NFIP Policy Number	Yes	
Policy Number	1805762232	
Insurance Policy Provider		
Select hazard to be mitigated.	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 84	
Repetitive Loss Structure	Yes	
Property Locator Number	0124570	
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19.0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
te property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards without water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:			
Address line 1	1629 DICK BAY Dr		
Address line 2			
City	DICKINSON		
County	Galveston		
State	TX		
ZIP	77539		
Owner Information:			
First Name	JODI		
Middle Name			
Last Name	HUNTER		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1	1629 DICK BAY Dr		
Address line 2			
Other (PO Box, Route, etc)			
City	DICKINSON		
State	TX		
ZIP	77539		
Does this property have other co-owners or holders of recorded interest?	N		

Property Information:	
Age of structure (year built)	
SHPO Review	
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	
Parcel Number	
Property Tax Identification Number	
Latitude	29 4743835
Longitude	-94 951013
Does this property have an NFIP Policy Number	Yes
Policy Number	9999999999999999
Insurance Policy Provider	9999
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 38
Repetitive Loss Structure	Yes
Property Locator Number	0001449
Number of Losses	4 or More claims since 1978
Legal Description	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
...ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	1640 DICK BAY St	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	BETTY AND JEAN	
Middle Name		
Last Name	BLACK	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 4741934	
Longitude	-94 952014	
Does this property have an NFIP Policy Number	Yes	
Policy Number	2553SA3169	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 8	
Repetitive Loss Structure	Yes	
Property Locator Number	0100310	
Number of Losses	2-3 claims Cumulatively > building Fair Market Value	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19.0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ne property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	16511 JAMAICA BEACH Rd	
Address line 2		
City	JAMAICA BEACH	
County	Galveston	
State	TX	
ZIP	77554	
Owner Information:		
First Name	ANNE	
Middle Name		
Last Name	FABIO	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 1830266	
Longitude	-94 970429	
Does this property have an NFIP Policy Number	Yes	
Policy Number	99999999999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	1 1	
Repetitive Loss Structure	Yes	
Property Locator Number	0127120	
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value	
Legal Description		
Property Information II.		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	
Property located within	Floodway
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4812710002C	04-04-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	1653 DICK BAY St	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	IAIN	
Middle Name		
Last Name	HUTCHINSON	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 4734927	
Longitude	-94 95223	
Does this property have an NFIP Policy Number	Yes	
Policy Number	RL00044877	
Insurance Policy Provider		
Select hazard to be mitigated	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	2 23	
Repetitive Loss Structure	Yes	
Property Locator Number	*0001448*	
Number of Losses	4 or More claims since 1978	
Legal Description		
Property Information II.		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Coastal Basin
Property located within	Floodplain
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ne property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	16533 Jamaica Beach Rd	
Address line 2		
City	JAMAICA BEACH	
County	Galveston	
State	TX	
ZIP	77544	
Owner Information:		
First Name	JACOB	
Middle Name		
Last Name	JOHNSON	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 182172	
Longitude	-94 971852	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	1 91	
Repetitive Loss Structure	Yes	
Property Locator Number	0100320	
Number of Losses	4 or More claims since 1978	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22.0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıle property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4812710002C	04-04-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	16642 JAMAICA BEACH Rd	
Address line 2		
City	JAMAICA BEACH	
County	Galveston	
State	TX	
ZIP	77554	
Owner Information:		
First Name	RICHARD	
Middle Name		
Last Name	KROLICK	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 1813458	
Longitude	-94 974601	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999999999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 61	
Repetitive Loss Structure	Yes	
Property Locator Number	0015970	
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4812710002C	04-04-1983

Comments

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	Properties	
Damaged Property Address:		
Address line 1	16710 JAMAICA BEACH Rd	
Address line 2		
City	JAMAICA BEACH	
County	Galveston	
State	TX	
ZIP	77554	
Owner Information:		
First Name	Kelly	
Middle Name		
Last Name	Klontz	
Phone	Home / Cell	Office Ext. / Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	
SHPO Review	
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	
Parcel Number	
Property Tax Identification Number	
Latitude	29 1808569
Longitude	-94 9755
Does this property have an NFIP Policy Number	Yes
Policy Number	99999999999999
Insurance Policy Provider	
Select hazard to be mitigated:	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	1 01
Repetitive Loss Structure	Yes
Property Locator Number	0124374
Number of Losses	4 or More claims since 1978
Legal Description	

Property Information II:	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Coastal Basin
Property located within	
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4812710002C	04-04-1983

Comments

Attachments

Properties

Damaged Property Address:			
Address line 1	1802 Cove Park Dr		
Address line 2			
City	Kemah		
County	Galveston		
State	TX		
ZIP	77565		
Owner Information:			
First Name	Fred		
Middle Name			
Last Name	Prickett		
Phone	Home	Office Ext.	
	Cell	Other Ext.	
Owner's Mailing Address.			
Address line 1			
Address line 2			
Other (PO Box, Route, etc)			
City			
State			
ZIP			
Does this property have other co-owners or holders of recorded interest?	N		
Property Information:			
Age of structure (year built)			
SHPO Review			
SHPO Reviewed Date			
Structure Type	Single Family		
Foundation type	Elevated on Piers, Piles, Posts or Columns		
Basement	No		
Type of Residence			
Parcel Number			
Property Tax Identification Number			
Latitude	29 5497812		
Longitude	-95 04871		
Does this property have an NFIP Policy Number	Yes		
Policy Number	RL00030047		
Insurance Policy Provider			
Select hazard to be mitigated:	Flood		
Damage Category	0-49% Damaged		
Pre-Event Fair Market Value			
Benefit Cost Analysis Performed	Yes		
Benefit Cost Ratio	1 95		
Repetitive Loss Structure	Yes		
Property Locator Number	0026484		
Number of Losses	4 or More claims since 1978		
Legal Description			
Property Information II:			
* Primary Property Action	Elevation		
Secondary Property Actions			
Flood Hazard			
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet		
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet		

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854880011C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	1817 FRONT St	
Address line 2		
City	PORT BOLIVAR	
County	Galveston	
State	TX	
ZIP	77650	
Owner Information:		
First Name	LAURA	
Middle Name	SAROM	
Last Name	CHHEAN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 3735779	
Longitude	-94 750468	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 87	
Repetitive Loss Structure	Yes	
Property Locator Number	0123806	
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6.0 feet
Flood Source	Coastal Basin
Property located within	
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700217E	07-05-1993

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	2150 COVE PARK Dr	
Address line 2		
City	LEAGUE CITY	
County	Galveston	
State	TX	
ZIP	77565	
Owner Information:		
First Name	STEVEN	
Middle Name	D	
Last Name	REMENY	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	

Property Information:	
Age of structure (year built)	
SHPO Review	
SHPO Reviewed Date	
Structure Type	Single Family
Foundation type	Elevated on Piers, Piles, Posts or Columns
Basement	No
Type of Residence	
Parcel Number	
Property Tax Identification Number	
Latitude	29 549093
Longitude	-95 052257
Does this property have an NFIP Policy Number	Yes
Policy Number	RL00046419
Insurance Policy Provider	
Select hazard to be mitigated.	Flood
Damage Category	0-49% Damaged
Pre-Event Fair Market Value	
Benefit Cost Analysis Performed	Yes
Benefit Cost Ratio	0 55
Repetitive Loss Structure	Yes
Property Locator Number	0017584
Number of Losses	4 or More claims since 1978
Legal Description	

Property Information II.	
* Primary Property Action	Elevation
Secondary Property Actions	
Flood Hazard	
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
...ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
... ...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854880011C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	2154 COVE PARK Dr	
Address line 2		
City	LEAGUE CITY	
County	Galveston	
State	TX	
ZIP	77573	
Owner Information:		
First Name	WALTER	
Middle Name	D	
Last Name	MOORE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 5489796	
Longitude	-95 052482	
Does this property have an NFIP Policy Number	Yes	
Policy Number	RL00027857	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 6	
Repetitive Loss Structure	Yes	
Property Locator Number	0017429	
Number of Losses	4 or More claims since 1978	
Legal Description		
Property Information II		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ne property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854880011C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	22819 GULF Dr	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77554	
Owner Information:		
First Name	PENNY	
Middle Name	MAC	
Last Name	LOAN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 1307472	
Longitude	-95 055655	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 78	
Repetitive Loss Structure	Yes	
Property Locator Number	0161997	
Number of Losses	2-3 claims Cumulatively > building Fair Market Value	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
...ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	48546900680	08-15-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	22827 GULF Dr	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77554	
Owner Information:		
First Name	MARK & LUZ	
Middle Name		
Last Name	ROSE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 1303911	
Longitude	-95 056023	
Does this property have an NFIP Policy Number	Yes	
Policy Number	030965791F	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 82	
Repetitive Loss Structure	Yes	
Property Locator Number	0127015	
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value	
Legal Description		
Property Information II:		
Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854690068D	08-15-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	2308 AVENUE N	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	RONDEL	
Middle Name	K	
Last Name	COLE	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 4787179	
Longitude	-94 943713	
Does this property have an NFIP Policy Number	Yes	
Policy Number	600111188	
Insurance Policy Provider		
Select hazard to be mitigated.	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 83	
Repetitive Loss Structure	Yes	
Property Locator Number	0074432	
Number of Losses	2-3 claims Cumulatively > building Fair Market Value	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
ıere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
ıe property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	23170 GULF Dr	
Address line 2		
City	GALVESTON	
County	Galveston	
State	TX	
ZIP	77550	
Owner Information:		
First Name	NICHOLAS & LINDA	
Middle Name		
Last Name	GASAWAY	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 1268722	
Longitude	-95 061325	
Does this property have an NFIP Policy Number	Yes	
Policy Number	RL00046531	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	0 85	
Repetitive Loss Structure	Yes	
Property Locator Number	0000054	
Number of Losses	4 or More claims since 1978	
Legal Description		
Property Information II:		
Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
Is there a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
Is the property site marked on the map?	Yes
Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854690068D	08-15-1983

Comments

Attachments

	Properties	
Damaged Property Address:		
Address line 1	2414 AVENUE P	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77539	
Owner Information:		
First Name	VICTORY	
Middle Name	J	
Last Name	MILTON	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address.		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)		
City		
State		
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 4761701	
Longitude	-94 948947	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed	Yes	
Benefit Cost Ratio	1 5	
Repetitive Loss Structure	Yes	
Property Locator Number	0005808	
Number of Losses	4 or More claims since 1978	
Legal Description		
Property Information II:		
* Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	
ere a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700100C	05-02-1983

Comments

Attachments

Properties

Damaged Property Address:		
Address line 1	1102 15TH St	
Address line 2		
City	DICKINSON	
County	Galveston	
State	TX	
ZIP	77650	
Owner Information:		
First Name	DAWN	
Middle Name		
Last Name	MULLEN	
Phone	Home	Office Ext.
	Cell	Other Ext.
Owner's Mailing Address:		
Address line 1		
Address line 2		
Other (PO Box, Route, etc)	PO BOX 8988	
City	BACLIFF	
State	TX	
ZIP		
Does this property have other co-owners or holders of recorded interest?	N	
Property Information:		
Age of structure (year built)		
SHPO Review		
SHPO Reviewed Date		
Structure Type	Single Family	
Foundation type	Elevated on Piers, Piles, Posts or Columns	
Basement	No	
Type of Residence		
Parcel Number		
Property Tax Identification Number		
Latitude	29 4608189	
Longitude	-94 930144	
Does this property have an NFIP Policy Number	Yes	
Policy Number	9999999999999999999	
Insurance Policy Provider		
Select hazard to be mitigated:	Flood	
Damage Category	0-49% Damaged	
Pre-Event Fair Market Value		
Benefit Cost Analysis Performed		
Benefit Cost Ratio	1 08	
Repetitive Loss Structure	Yes	
Property Locator Number	0124279	
Number of Losses	2-3 claims Cumulatively <= building Fair Market Value	
Legal Description		
Property Information II		
Primary Property Action	Elevation	
Secondary Property Actions		
Flood Hazard		
Base Flood Elevation (only applicable when Property Action is Elevation)	22 0 feet	
First Floor Elevation (only applicable when Property Action is Elevation)	19 0 feet	

Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	6 0 feet
Flood Source	Coastal Basin
Property located within	Floodplain
...here a Flood Insurance Rate Map (FIRM) available for your project area?	Yes
...e property site marked on the map?	Yes
* Flood Zone Designation (only applicable when Property Action is Elevation)	Area of special flood hazards with water surface elevations determined, and with velocity, that is inundated by tidal floods (coastal high hazard area) (V1-30, VE)

FIRM Information (Flood Maps)

Community Name	CID Number	FIRM Panel Number	Effective Date
GALVESTON COUNTY*	485470	4854700124E	05-02-1983

Comments

Attachments

Decision Making Process

Describe the process you used to decide that this project is the best solution to the problem.

As a result of frequent coastal storms,localized and coastal flooding, many homes in the County of Galveston have experienced extensive and severe flood damages. Taking into account owner interest in elevations, prior flood losses, depth in the floodplain, and Greatest Savings to the Fund cost-benefit analysis (using data provided by the Federal Emergency Management Agency (FEMA)), SAIC identified 220 properties for this application that were eligible and interested in an offer to assist with the elevation or mitigation of their ho. Homes are located both in and out of the floodplain, were built pre-FIRM, and have experienced chronic and repetitive flood damages to their properties.

Explain why this project is the best alternative.

The County has considered other options or alternatives to elevations. Among these options is acquisition These homes sit deep in the floodplain and were damaged structurally but are sound enough to withstand elevation, therefore, acquisition is not a desirable alternative The County taking no action is not an acceptable alternative because it leaves the homes and residents in harm's way. It is anticipated these homes will continue to experience losses. The affected citizens would be burdened with tremendous expenditures of repair and/or relocation as a result of flood losses. Home elevation involves assisting the property owner with the costs of raising the finished floor of a home above the 100-year elevation, thereby substantially reducing the threat of future flood damage. This allows the residents to remain on the property, and preserves the County's existing housing stock. This action would result in the best reduction of flood costs for both the private citizens and emergency services. The project would have no adverse effects on any lands considered prime or unique farmlands. After elevation, land use will remain residential. The elevation of properties that are under the threat of flooding will have a positive net impact on the life, health, and safety of those individuals directly affected. Also, those homeowners would be protected from the financial hardship brought about by repeated flooding Emergency relief agencies may realize a slightly reduced demand for post-flood recovery services because of fewer households subject to flooding. The overall land use and socioeconomic effect of the project will be positive. The project will have no negative effect on air quality, nor will it require any dredging and/or disposal of any material (including construction) in any wetlands or waterways. The project does not require a U.S. Army Corps of Engineers (USACE) Section 11 or Section 404 permit. The project will not negatively affect any current declared wild and scenic river or any river being studied for inclusion as a wild and scenic river As this is an elevation project of existing homes and subsequent continued use of the properties will be residential, it is expected that there will be no effects on natural resources. To our knowledge, there are no historical resources that will be affected by the proposed project. Texas SHPO has been properly notified of all properties that may have historical significance. There are no known underground storage tanks, hazardous building materials, hazardous waste sites, or any other hazardous materials present. The same applies to all alternatives considered.

Comments:

Attachments.

202.1 - Elevation of Private Structures - Riverine

Federal Share: $ 28,004,591.38

Item Name	Cost Classification	Requested Cost ($)	Approved Cost ($)
Engineering Costs	Architectural Engineering Basic Fees	$ 738,984.08	$ 738,984.08
Construction and Project Management	Project Inspection Fees	$ 1,316,000.00	$ 1,316,000.00
Elevation Costs	Construction And Project Improvement	$ 26,434,941.32	$ 26,434,941.32
5% Project Administration	Administrative Expense	$ 1,481,723.88	$ 1,481,723.88
Pre-Award Costs	Administrative Expense	$ 726,364.32	$ 726,364.32
ICC Processing	Miscellaneous	$ 418,219.16	$ 418,219.16
	Total Cost	$ 31,116,212.76	$ 31,116,212.76

202.2 - Elevation of Private Structures - Coastal

Federal Share: $ 3,023,805.59

Item Name	Cost Classification	Requested Cost ($)	Approved Cost ($)
Engineering Costs	Architectural Engineering Basic Fees	$ 87,841.92	$ 87,841.92
Elevation Costs	Construction And Project Improvement	$ 2,693,129.92	$ 2,693,129.92
Construction and Project Management	Project Inspection Fees	$ 224,000.00	$ 224,000.00
5% Project Administration	Administrative Expense	$ 159,989.76	$ 159,989.76
Pre-Award Costs	Administrative Expense	$ 123,636.48	$ 123,636.48
ICC Processing	Miscellaneous	$ 71,185.92	$ 71,185.92
	Total Cost	$ 3,359,784.00	$ 3,359,784.00

	Requested Amount	Approved Amount
Total Project Cost	$ 34,475,996.76	$ 34,475,996.76

	Requested	Approved
Total Project Cost	$ 34,475,996.76	$ 34,475,996 76
Federal Share Percentage	89 99999967%	89 99999967%
Non-Federal Share Percentage	10 00000033%	10 00000033%
Federal Share	$ 31,028,396 97	$ 31,028,396 97
Non-Federal Share	$ 3,447,599 79	$ 3,447,599 79

Matching Funds

Source Agency	Name of Source Agency	Funding Type	Amount ($)	Action
Local Agency Funding	Homeowner Funds/General Fund	Cash	$ 3,447,599 79	View Details
		Grand Total	$ 3,447,599.79	

If you would like to make any comments, please enter them below

Please see attached T-props (Galveston Co SRL App LLT 7 21) for details and specific cost information for each property

Attachments

SRL Signed Funding Cert.pdf
Project Cost Breakdown 7.21 LLT.pdf
Galveston Co SRL App LLT 7.21.xlsx
TLC ENGINEERING INC.docx
Galveston Co SRL App LLT 8.25.xlsx

Funding Source	Local Agency Funding
Name of Funding Source	Homeowner Funds/General Fund
Funding Type	Cash
Amount	$ 3,447,599 79
Date of availability	05-11-2011
Funds commitment letter date	
Attachment (funds commitment letter)	

Cost Effectiveness Information

Attach the Benefit Cost Analysis (BCA), if completed for this project

Report1.pdf

What is the source and type of the problem?

Potential sources of the current flooding problem originate from coastal flooding of the Gulf, riverside flooding from bayous in the area, and various canals or rivers located in the area.

How frequent is the event?

The events vary in nature. All of the properties in this application have experienced multiple flood events over the past ten years.

How severe is the damage?

The damages from flooding in Galveston County in these affected areas is severe. These properties have had 3 or more losses since 1979 and have incurred $40,918,680 00. Please see attached document for the date of incident, the hazard and the amount of damages incurred.

What kinds of property are at risk?

All of the properties in this application are residential properties, spread throughout the most vulnerable areas of Galveston County.

Are there better, alternative ways to solve the problem?

After recognizing the most vulnerable properties in the area, it has been determined that the most appropriate and preferred method of mitigating flooding of these properties is elevation. Galveston County has only two alternatives: acquisition/demolition or no action. These homes sit in the floodplain or in it's proximity, and were damaged but are structurally capable of withstanding elevation; therefore, acquisition and demolition is not desirable. The County taking no action is not an acceptable alternative because it leaves the homes and residents in harm's way It is anticipated these homes will continue to experience losses. The affected citizens would be burdened with tremendous expenditures for repair and/or relocation to avoid future flood losses.

Are the mitigation project costs well documented and reasonable?

Yes

If you would like to make any comments, please enter them below

In response to "Are the mitigation project costs well documented and reasonable?" The mitigation costs are well documented and reasonable according to the benefit-cost methodologies that FEMA sets forth to determine cost effectiveness. To determine benefits of mitigation for each property, the Greatest Savings to the Fund Method was used and the Depth Function Analysis (DFA) Methodology was used

Attachments:

Flooding Events.pdf
TLC Elevation Costing Exports LLT.pdf

Damage History

Date	Event	Description of Damage		Amount of Damage
04-1979	Flood	"Amount of Damage" shown is for all Repetitive Loss homes on this application		$ 900,000 00
09-1980	Flood	"Amount of Damage shown is for all Repetitive Loss homes on this application"		$ 700,000 00
01-1983	Flood	"Amount of Damage shown is for all Repetitive Loss homes on this application"		$ 600,000 00
08-1987	Flood	"Amount of Damages shown is for all Repetitive Loss homes on this application"		$ 1,200,000 00
08-1989	Flood	"Amount of Damage shown is for all Repetitive Loss homes on this application"		$ 2,100,000 00
06-2001	Flood	"Amount of Damage" shown is for all Repetitive Loss homes on this application		$ 5,400,000 00
10-2002	Flood	"Amount of Damage" shown is for all Repetitive Loss homes on this application		$ 4,500,000 00
09-2005	Hurricane	"Amount of Damage" shown for all Repetitive Loss homes on this application		$ 1,800,000 00
09-2005	Hurricane	"Amount of Damage" shown is for all Repetitive Loss homes on this application		$ 23,718,680 00
			Total Amount of Damage	$ 40,918,680.00

A. National Historic Preservation Act - Historic Buildings and Structures

* 1 Does your project affect or is it in close proximity to any buildings or structures 50 years or more in age? Yes

If Yes, you must confirm that you have provided the following:

✓ The property address and original date of construction for each property affected (unless this information is already noted in the Properties section),

✓ A minimum of two color photographs showing at least three sides of each structure (Please label the photos accordingly),

✓ A diagram or USGS 1 24,000 scale quadrangle map displaying the relationship of the property(s) to the project area.

To help FEMA evaluate the impact of the project, please indicate below any other information you are providing:

Information gathered about potential historic properties in the project area, including any evidence indicating the age of the building or structure and presence of buildings or structures that are listed or eligible for listing on the National Register of Historic Places or within or near a National Register listed or eligible historic district. Sources for this information may include the State Historic Preservation Officer, and/or the Tribal Historic Preservation Officer (SHPO/THPO), your local planning office, historic preservation organization, or historical society

Consideration of how the project design will minimize adverse effects on known or potential historic buildings or structures, and any alternatives considered or implemented to avoid or minimize effects on historic buildings or structures. Please address and note associated costs in your project budget.

For acquisition/demolition projects affecting historic buildings or structures, any data regarding the consideration and feasibility of elevation, relocation, or flood proofing as alternatives to demolition.

✓ Attached materials or additional comments.

Comments:

See attached letter to Texas Department of Historic Resources. This response will be forwarded to TWDB once received. Also included with the letter to the agency are project locations and photos.

Attachments:

B. National Historic Preservation Act - Archeological Resources

* 1 Does your project involve disturbance of ground? Yes

If Yes, you must confirm that you have provided the following:

✓ A description of the ground disturbance by giving the dimensions (area, volume, depth, etc.) and location

✓ The past use of the area to be disturbed, noting the extent of previously disturbed ground.

✓ A USGS 1 24,000 scale or other site map showing the location and extent of ground disturbance.

To help FEMA evaluate the impact of the project, please indicate below any other information you are providing

Any information about potential historic properties, including archeological sites, in the project area. Sources of this information may include SHPO/THPO, and/or the Tribe's cultural resources contact if no THPO is designated. Include, if possible, a map showing the relation of any identified historic properties to the project area.

✓ Attached materials or additional comments.

Comments.

Minimal disturbance to previously disturbed ground only See attached letter to SHPO The SHPO response will be forwarded to TWDB once received

Attachments:

C Endangered Species Act and Fish and Wildlife Coordination Act

* 1 Are Federally listed threatened or endangered species or their critical habitat present in the area affected by the project? Not Known

If Yes, you must confirm that you have provided the following:

Information you obtained to identify species in or near the project area. Provide the source and date of the information cited.

To help FEMA evaluate the impact of the project, please indicate below any other information you are providing:

Any request for information and associated response from the USFWS, the National Marine Fisheries Service (NMFS) (for affected ocean-going fish), or your State Wildlife Agency, regarding potential listed species present and potential of the project to impact those species.

✓ Attached materials or additional comments

Comments.

See attached letter to Texas Commission of Environmental Quality(TCEQ)and U S Fish and Wildlife (US F&WS) The TCEQ and the US F&WS responses will be forwarded to TWDB

once received.

* 2. Does your project remove or affect vegetation? Not Known

If Yes, you must confirm that you have provided the following:

Description of the amount (area) and type of vegetation to be removed or affected

A site map showing the project area and the extent of vegetation affected.

Photographs or digital images that show both the vegetation affected and the vegetation in context of its surroundings.

To help FEMA evaluate the impact of the project, please indicate below any other information you are providing

Attached materials or additional comments.

Comments:

See attached letter to Texas Commission of Environmental Quality(TCEQ)and U S. Fish and Wildlife (US F&WS) The TCEQ and the US F&WS responses will be forwarded to TWDB once received.

* 3 Is your project in, near (within 200 feet), or likely to affect any type of waterway or body of water? No

If Yes, and project is not within an existing building, you must confirm that you have provided the following.

A USGS 1 24,000 scale quadrangle map showing the project activities in relation to all nearby water bodies (within 200 feet).

Any information about the type of water body nearby including: its dimensions, the proximity of the project activity to the water body, and the expected and possible changes to the water body, if any Identify all water bodies regardless whether you think there may be an effect

A photograph or digital image of the site showing both the body of water and the project area.

To help FEMA evaluate the impact of the project, please indicate below any other information you are providing:

Evidence of any discussions with the US Fish and Wildlife Service (USFWS), and/or your State Wildlife Agency concerning any potential impacts if there is the potential for the project to affect any water body

✓ Attached materials or additional comments.

Comments.

achments:

FINAL USACE.docx
FINAL DEQ.docx
FINAL TGLO.pdf
FINAL SHPO.docx

D. Clean Water Act, Rivers and Harbors Act, and Executive Order 11990 (Protection of Wetlands)

* 1 Will the project involve dredging or disposal of dredged material, excavation, adding fill material or result in any modification to water bodies or wetlands designated as "waters of the U S" as identified by the US Army Corps of Engineers or on the National Wetland Inventory? No

If Yes, you must confirm that you have provided the following:

Documentation of the project location on a USGS 1 24,000 scale topographic map or image and a copy of a National Wetlands Inventory map or other available wetlands mapping information.

To help FEMA evaluate the impact of the project, please indicate below any other information you are providing:

Request for information and response letter from the US Army Corps of Engineers and/or State resource agencies regarding the potential for wetlands, and applicability of permitting requirements.

Evidence of alternatives considered to eliminate or minimize impacts to wetlands.

✓ Attached materials or additional comments.

Comments:

See attached letter to the U S Army Corp of Engineers (USACE). The USACE response will be forwarded to TWDB once received.

Attachments

xecutive Order 11988 (Floodplain Management)

* 1 Does a Flood Insurance Rate Map (FIRM), Flood Hazard Boundary Map (FHBM), hydrologic study, or some other source indicate that the project is Yes

located in or will affect a 100 year floodplain, a 500 year floodplain if a critical facility, an identified regulatory floodway, or an area prone to flooding?

If Yes, please indicate in the text box below any documentation to identify the means or the alternatives considered to eliminate or minimize impacts to floodplains (See the 8 step process found in 44 CFR Part 9 6) to help FEMA evaluate the impact of the project:

See Narrative

* 2 Does the project alter a watercourse, water flow patterns, or a drainage way, regardless of its floodplain designation? No

If Yes, please indicate below any other information you are providing to help FEMA evaluate the impact of the project:

Hydrologic/hydraulic information from a qualified engineer to demonstrate how drainage and flood flow patterns will be changed and to identify down and upstream effects.

Evidence of any consultation with US Army Corps of Engineers (may be included under Part D of the Environmental Information)

Request for information and response letter from the State water resource agency, if applicable, with jurisdiction over modification of waterways.

Attached materials or additional comments.

Comments:

Attachments:
FINAL TXDOT.docx

F. Coastal Zone Management Act

* 1 *Is the project located in the State's designated coastal zone?* Yes

If Yes, please indicate below any other information you are providing to help FEMA evaluate the impact of the project:

Information resulting from contact with the appropriate State agency that implements the coastal zone management program regarding the likelihood of the project's consistency with the State's coastal zone plan and any potential requirements affecting the cost or design of the proposed activity

✓ Attached materials or additional comments.

Comments:
See attached letter to TCEQ. The TCEQ response will be forwarded to TWDB once received. The County will require project compliance with all applicable Texas Coastal Zone Management Program regulations.

Attachments:

G. *Farmland Protection Policy Act*

* 1 Will the project convert more than 5 acres of "prime or unique" farmland outside city limits to a non-agricultural use? No

Comments:

Attachments:

H RCRA and CERCLA (Hazardous and Toxic Materials)

* 1 Is there a reason to suspect there are contaminants from a current or past use on the property associated with the proposed project? No

If Yes, please indicate below any other information you are providing to help FEMA evaluate the impact of the project:

Comments and any relevant documentation.

Results of any consultations with State or local agency to obtain permit with requirements for handling, disposing of or addressing the effects of hazardous or toxic materials related to project implementation.

Attached materials or additional comments.

Comments:

* 2. Are there any studies, investigations, or enforcement actions related to the property associated with the proposed project? No

If Yes, please indicate below any other information you are providing to help FEMA evaluate the impact of the project:

Comments and any relevant documentation

Results of any consultations with State or local agency to obtain permit with requirements for handling, disposing of or addressing the effects of hazardous toxic materials related to project implementation

Attached materials or additional comments.

Comments:

* 3 Does any project construction or operation activities involve the use of hazardous or toxic materials? No

If Yes, please indicate below any other information you are providing to help FEMA evaluate the impact of the project:

Comments and any relevant documentation.

Results of any consultations with State or local agency to obtain permit with requirements for handling, disposing of or addressing the effects of hazardous or toxic materials related to project implementation.

Attached materials or additional comments.

Comments:

* 4 Do you know if any of the current or past land-uses of the property affected by the proposed project or of the adjacent properties are associated with hazardous or toxic materials? No

If Yes, please indicate below any other information you are providing to help FEMA evaluate the impact of the project:

Comments and any relevant documentation.

Results of any consultations with State or local agency to obtain permit with requirements for handling, disposing of or addressing the effects of hazardous or toxic materials related to project implementation.

Attached materials or additional comments.

Comments:

Attachments:

I. Executive Order 12898, Environmental Justice for Low Income and Minority Populations

* 1 Are there low income or minority populations in the project's area of effect or adjacent to the project area? No

If Yes, you must confirm that you have provided the following:

Description of any disproportionate and adverse effects to these populations.

To help FEMA evaluate the impact of the project, please indicate below any other information you are providing:

Description of the population affected and the portion of the population that would be disproportionately and adversely affected Please include specific efforts to address the adverse impacts in your proposal narrative and budget.

Attached materials or additional comments.

Comments:

Attachments:

J. Other Environmental/Historic Preservation Laws or Issues

* 1 Are there other environmental/historic preservation requirements associated with this project that you are aware of? No

If Yes, please indicate in the text box below a description of the requirements, issues or public involvement effort.

* 2. Are there controversial issues associated with this project? No

If Yes, please indicate in the text box below a description of the requirements, issues or public involvement effort.

* 3 Have you conducted any public meeting or solicited public input or comments on your specific proposed mitigation project? Yes

If Yes, please indicate in the text box below a description of the requirements, issues or public involvement effort.

Yes, two Galveston County County Commissioner meetings and two public workshops were held that addressed the Severe Repetitive Loss Grant Elevation Project.

hments.

K. Summary and Cost of Potential Impacts

* 1 Having answered the questions in parts A. through J., have you identified any aspects of your proposed project that have the potential to impact environmental resources or historic properties? No

If Yes, you must confirm that you have:

- Evaluated these potential effects and provided the materials required in Parts A through J that identify the nature and extent of potential impacts to environmental resources and/or historic properties.

Consulted with appropriate parties to identify any measures needed to avoid or minimize these impacts.

Considered alternatives that could minimize both the impacts and the cost of the project.

Made certain that the costs of any measures to treat adverse effects are realistically reflected in the project budget estimate

Comments:

Attachments:

Provide a maintenance schedule including cost information

ify entity that will perform any long-term maintenance

If you would like to make any comments, please enter them below.

Attach letter from entity accepting performance responsibility

Maintenance Schedule and Costs

All properties in this application are for home elevations.There are no home acquisitions in the project. Once the home elevations are completed, the long-term care and maintenance of the properties will be the sole responsibility of the homeowners.

Individual homeowners; vaires by project location.

Evaluation Information (Part 1 of 4)	
Is the recipient participating in the Community Rating System (CRS)?	No
If yes, what is their CRS rating?	
Is the recipient a Cooperating Technical Partner (CTP)?	Yes
Is the recipient a Firewise Community?	No
If yes, please provide their Firewise Community number	
Has the recipient adopted building codes consistent with the International Codes?	No
Has the recipient adopted the National Fire Protection Association (NFPA) 5000 Code?	No
Have the recipient's building codes been assessed on the Building Code Effectiveness Grading Schedule (BCEGS)?	No
If yes, what is their BCEGS rating?	
Is the recipient a Disaster Resistant University?	No
Is the recipient a Historically Black College or University or a Tribal College or University?	No

Evaluation Information (Part 2 of 4)

Describe the desired outcome and methodology of the mitigation activity in terms of mitigation objectives to be achieved

The desired outcome and methodology of this proposed mitigation project is to elevate these flood prone residential structures in order to prevent future NFIP claims and damages ciated with repetitive flooding.

cribe performance expectations and timeline for interim milestones and overall completion of mitigation activity

The County will perform these tasks and objectives as quickly and efficiently as possible, understanding that with a large number of elevations (220 structures), a flexible timeline is needed. Start Date (SD) will be the time that the grant has been awarded. SD to SD + 2 months= Contract for Engineering Services Procure the services of an engineering firm that is licensed to do business in the state and is properly qualified to provide feasible project designs and conduct periodic project inspections with reports. SD+1 month to SD+2 months Procure the services of qualified contractors to complete each turnkey project in accordance with the engineer's plans and specifications SD +2 months to SD +4 Months Meet with individual homeowners to review their elevation project and verify source of local match funds SD+ 3 months to SD +23 Months Complete Elevation Projects Issue notices to proceed and manage projects from start to completion SD + 24 Months Project Closeout

Describe how you will manage the costs and schedule, and how you will ensure successful performance.

The County project manager will be managing the costs and schedule by utilizing the Project Management Plan and by actively identifying issues in the project budget and project performance period. There will be bi-weekly status updates that will take into account the budget and tasks completed for each performance period.

Describe the staff and resources needed to implement this mitigation activity and the applicant's ability to provide these resources.

The County has engaged SAIC to manage this project. This will include parcel-specific and overall project management. SAIC will include labor and related expenses to provide expert knowledge and a dedicated staff to manage the project from award to closeout.

If applying for multiple mitigation activities, how do these activities relate?

Elevation is the one mitigation activity for the application.

Evaluation Information (Part 3 of 4)

How will this mitigation activity leverage involvement of partners to enhance its outcome?

This mitigation activity will actively bring together multiple communities under the County grant, thereby maximizing the benefits of the program. The program is leveraged because the participants of the grant (cities) are incurring no out of pocket expenses to be included.

How will this mitigation activity offer long-term financial and social benefits?

The elevation of properties that are under the threat of flooding will have a positive net impact on the life, health, and safety of those individuals directly affected. Also, those homeowners would be protected from financial hardship brought about by repeated flooding.

How does this mitigation activity comply with Federal laws and Executive Orders, and how is it complementary to other Federal programs?

Allowable costs will be governed by 44 CFR Part 13, Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments and OMB Circular A-87, Cost Principles for State, Local, and Indian Tribal Governments.

What outreach activities are planned relative to this mitigation activity (e g., signs, press releases, success stories, developing package to share with other communities, losses avoided analysis) and/or how will this mitigation activity serve as a model for other communities (i.e. Do you intend to mentor other communities, Tribes or States? Do you intend to prepare a description of the process followed in this activity so that others may learn from the example?)?

Once the grant is awarded, the County will issue a press release announcing the award, and the mitigation project that will follow Updates will continue on an as needed basis for County Court Proceedings.

Evaluation Information (Part 4 of 4)

Please provide the percent of the population benefiting from this mitigation activity	2 8
se explain your response.	This question does not take into account that this grant consists of multiple communities participating together as a County We used the number of elevations (220) times the average size of the household (3 1 persons) in Galveston County, according to the U S Census (2000). That number was then divided by the total population in Galveston County
Net Present Value of Project Benefits (A)	$ 35211558 00
Total Project Cost Estimate (B)	$ 33135825 00
What is the Benefit Cost Ratio for the entire project (A/B)?	1 063
Analysis Type	FEMA BCA software methodology
What is the primary hazard data used for the BCA?	Flood
What secondary hazards were considered during the BCA?	Chemical
Other Secondary Hazard	
Does this mitigation activity protect a critical facility?	No
If yes, please select the type of critical facilities to be protected	
Comments:	

Name	Date Attached

Comments and Attachments

Name of Section	Comment	Attachment	Date Attached
		COG 20-15.pdf	05-12-2011
		COG SF424.pdf	05-12-2
		Galveston County SRL Elevation Application 2011 Photos.zip	05-10-20..
		COG 20-22.docx	05-12-2011
		Galveston County SRL Elevation Application 2011 Maps.pdf	05-11-2011
Application Level	Attachments include: 1 Property Photos 2 Property Maps and Grid Keys 3. GCAD Records 4 COG DOCUMENTS 5 TWDB Application	SRL Signed Form 20-15 110721.pdf	07-21-2011
		TWDB App	05-12-2011
		Island-Grid Key.pdf	05-11-2011
		Galveston County SRL 20-15 2.xls	07-21-2011
		Peninsula-Grid Key.pdf	05-11-2011
		Mainland Grid Key.pdf	05-11-2011
		CAD Sheet with Links.xls	05-11-2011
Mitigation Plan Information	The Galveston County Hazard Mitigation Plan was approved by FEMA 4/18/2011, and is in the process of being adopted by the jurisdictions. Final adoption is anticipated before June 1, 2011	GalvestonUpdate-FINAL-APA.pdf	05-10-2011
		Bolivar Flood Mitigation Plan Final.zip	05-10-2011
		Galveston Co SRL App LLT 8.25.xlsx	08-25-2011
		TLC ENGINEERING INC.docx	05-11-2011
Match Sources	Please see attached T-props (Galveston Co SRL App LLT 7 21) for details and specific cost information for each property	Galveston Co SRL App LLT 7.21.xlsx	07-21-2011
		SRL Signed Funding Cert.pdf	05-12-2011
		Project Cost Breakdown 7.21 LLT.pdf	07-21-2011
Cost Effectiveness Information	In response to "Are the mitigation project costs well documented and reasonable?" The mitigation costs are well documented and reasonable according to the benefit-cost methodologies that FEMA sets forth to determine cost effectiveness. To determine benefits of mitigation for each property, the Greatest Savings to the Fund Method was used and the Depth Function Analysis (DFA) Methodology was used.	TLC Elevation Costing E grants LLT.pdf	05-16-2011
		Flooding Events.pdf	05-10-2011
		BCA Report1.pdf	05-10-2011
EHP - A - National Historic Preservation Act - Historic Buildings and Structures	See attached letter to Texas Department of Historic Resources. This response will be forwarded to TWDB once received Also included with the letter to the agency are project locations and photos.		
EHP - B - National Historic Preservation Act - Archeological Resources	Minimal disturbance to previously disturbed ground only See attached letter to SHPO. The SHPO response will be forwarded to TWDB once received.		
EHP - C - Endangered Species Act and Fish and WildLife Coordination Act	See attached letter to Texas Commission of Environmental Quality(TCEQ)and U S Fish and Wildlife (US F&WS) The TCEQ and the US F&WS responses will be forwarded to TWDB once received. --- See attached letter to Texas Commission of	FINAL SHPO.docx FINAL TGLO.pdf FINAL DEQ.docx FINAL USACE.docx	05-12-2011 05-12-2011 05-12-2011 05-12-2011
EHP - D - Clean Water Act, Rivers and Harbors Act, and Executive Order 11990	See attached letter to the U.S Army Corp of Engineers (USACE) The USACE response will be forwarded to TWDB once received		
EHP - E - Executive Order 11988 (Floodplain Management)	See Narrative.	FINAL TXDOT.docx	05-12-2011

EHP - F - Coastal Zone Management Act

See attached letter to TCEQ. The TCEQ response will be forwarded to TWDB once received. The County will require project compliance with all applicable Texas Coastal Zone Management Program regulations.

EHP - J - Other Environmental/Historic Preservation Laws or Issues

Yes, two Galveston County County Commissioner meetings and two public workshops were held that addressed the Severe Repetitive Loss Grant Elevation Project

Property - 4730 JAMAICA COVE RD JAMAICA BEACH 77554

Firm panels are attached to the application.

Property - 16619 JOHN SILVER RD JAMAICA BEACH 77554

Firm panels are attached to the application.

Property - 16603 JAMAICA INN RD JAMAICA BEACH 77554

Firm panels are attached to the application

Property - 16508 TAMPICO WAY JAMAICA BEACH 77554

Firm panels are attached to the application

Property - 807 AVE E SAN LEON 77539

Firm panels are attached to the application.

Property - 3806 BAYOU CIR DICKINSON 77539

Firm panels are attached to the application.

Property - 3815 BAYOU CIR DICKINSON 77539

Firm panels are attached to the application

Property - 3525 ELM DICKINSON 77539

Firm panels are attached to the application

Property - 4416
LEONETTI Lane
DICKINSON 77539

Firm panels are attached to the application.

Property - 4423
LEONETTI Lane
DICKINSON 77539

Firm panels are attached to the application.

Property - 3510
MAPLE DR
DICKINSON 77539

Firm panels are attached to the application.

Property - 3605
MAPLE DR
DICKINSON 77539

Firm panels are attached to the application

Property - 1010
ROSEWOOD DR
DICKINSON 77539

Firm panels are attached to the application.

Property - 3942
WAGON RD
DICKINSON 77539

Firm panels are attached to the application.

Property - 201 BLUE
POINT RD CLEAR
LAKE SHORES
77565

Firm panels are attached to the application

Property - 631 CLEAR
LAKE RD CLEAR
LAKE SHORES
77565

Firm panels are attached to the application.

Property - 923
DOGWOOD RD
CLEAR LAKE
SHORES 77565

Firm panels are attached to the application.

Property - 707
NARCISSUS RD
CLEAR LAKE
SHORES 77565

Firm panels are attached to the application.

Property - 715 OAK RD CLEAR LAKE SHORES 77565

Firm panels are attached to the application.

Property - 202 QUEEN RD CLEAR LAKE SHORES 77565

Firm panels are attached to the application

Property - 1003 SHORE DR CLEAR LAKE SHORES 77565

Firm panels are attached to the application.

Property - 130 SHORE DR CLEAR LAKE SHORES 77565

Firm panels are attached to the application.

Property - 211 SHORE DR CLEAR LAKE SHORES 77565

Firm panels are attached to the application

Property - 319 SHORE DR CLEAR LAKE SHORES 77565

Firm panels are attached to the application.

Property - 506 SHORE DR CLEAR LAKE SHORES 77565

Assurances and Certifications

Please click the link in the status column to view forms.

Forms	Status
Part II FEMA Form 20-16B, Assurances Construction Programs.	Complete
Part II FEMA Form 20-16C, Certifications Regarding Lobbying; Debarment, Suspension and Other Responsibilities Matters, and Drug-Free Workplace Requirements.	Complete
Part III SF-LLL, Disclosure of Lobbying Activities (Complete only if applying for a grant of more than $100,000 and have lobbying activities using Non-Federal funds. See Form 20-16C for lobbying activities definition)	Not Applicable

FEMA Form 20-16B, Assurances-Construction Programs

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0042), Washington, DC 20503

_ASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal assistance awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the nonfederal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will not dispose of, modify the use of, or change the terms of the real property title, or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal interest in the title of real property in accordance with awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure nondiscrimination during the useful life of the project.
4. Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.
5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progress reports and such other information as may be required by the assistance awarding agency or state.
6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
7. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
8. Will comply with the Intergovernmental Personnel Act of 1970 (42 USC Sections 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statues or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 CFR 900, Subpart F).
9. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 USC Section 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
10. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (PL 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 USC Sections 1681- 1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 USC Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 USC Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (PL 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (PL 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) Sections 523 and 527 of the Public Health Service Act of 1912 (42 USC Sections 290-dd-3 and 290-ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 USC Section 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
11. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (PL 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal and Federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
12. Will comply with the provisions of the Hatch Act (5 USC Sections 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
13. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 USC Sections 276a to 276a-7), the Copeland Act (40 USC Section 276c and 18 USC Section 874), and the Contract Work Hours and Safety Standards Act (40 USC Sections 327-333) regarding labor standards for federally assisted construction subagreements.
14. Will comply with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (PL 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.
15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (PL 91-190) and Executive Order (EO) 11514, (b) notification of violating facilities pursuant to EO 11738, (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 USC Section 1451 et seq.), (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 USC Section 7401 et seq.), (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (PL 93-523), and (h) protection of endangered species under the Endangered Species Act of 1973, as amended (PL 93-205).
16. Will comply with the Wild and Scenic Rivers Act of 1968 (16 USC Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
17. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 USC Section 470), EO 11593 (identification and preservation of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 USC Section 469a-1 et seq.).
18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
19. Will comply with all applicable requirements of all other Federal laws, Executive Orders, regulations, and policies governing this program.
20. It will comply with the minimum wage and maximum hour provisions of the Federal Fair Labor Standards Act (29 USC Section 201) as they apply to employees of institutions of higher education, hospitals, and other nonprofit organizations.
21. It will obtain approval by the appropriate Federal agency of the final working drawings and specifications before the project is advertised or placed on the market for bidding; that it will construct the project, or cause it to be constructed, to final completion in accordance with the application and approved plans and specifications; that it will submit to the appropriate Federal agency for prior approval changes that alter the cost of the project, use of space, or functional layout, that it will not enter into a construction contract(s) for the project or undertake other activities until the conditions of the construction grant program(s) have been met.
22. It will operate and maintain the facility in accordance with the minimum standards as may be required or prescribed by the applicable Federal, State, and local agencies for the maintenance and operation of such facilities.
23. It will require the facility to be designed to comply with the "American Standard Specification for Making Buildings and Facilities Accessible to, and Usable by, the Physically Handicapped," Number A117 - 1961, as modified (41 CFR 101-17.703). The applicant will be responsible for conducting inspections to ensure

compliance with these specifications by the contractor

24 If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer of such property, any transfer, for the period during which the real property, or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

25 In making subgrants with nonprofit institutions under this Comprehensive Cooperative Agreement, it agrees that such grants will be subject to OMB Circular A-122, "Cost Principles for Nonprofit Organizations" included in Vol 49, Federal Register, pages 18260 through 18277 (April 27, 1984)

I, John Simsen, hereby sign this form as of 05-13-2011

You must read and sign these assurances by providing your password and checking the box at the bottom of this page.

Note: Fields marked with an * are required.

Certifications Regarding Lobbying; Debarment, Suspension and Other Responsibility Matters, and Drug-Free Workplace Requirements.

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 44 CFR Part 18, "New Restrictions on Lobbying, and 28 CFR Part 17, "Government-wide Debarment and suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants) " The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Federal Emergency Management Agency (FEMA) determines to award the covered transaction, grant, or cooperative agreement.

1 LOBBYING

A As required by the section 1352, Title 31 of the US Code, and implemented at 44 CFR Part 18 for persons entering into a grant or cooperative agreement over $100,000, as defined at 44 CFR Part 18, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement and extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any other funds than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure of Lobbying Activities", in accordance with its instructions,

Standard Form LLL Disclosure of Lobbying Activities Not Attached

(c) The undersigned shall require that the language of this certification be included in the award documents for all the sub awards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontract(s)) and that all subrecipients shall certify and disclose accordingly

2 DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 44 CFR Part 67, for prospective participants in primary covered transactions, as defined at 44 CFR Part 17, Section 17 510-A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three-year period preceding this application been convicted of or had a civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or perform a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or locally) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification, and

(d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and

B Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

Explanation:

3 DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 44 CFR Part 17, Subpart F, for grantees, as defined at 44 CFR part 17, Sections 17 615 and 17 623.

(A) The applicant certifies that it will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an on-going drug free awareness program to inform employees about:

(1) The dangers of drug abuse in the workplace;
(2) The grantee's policy of maintaining a drug-free workplace;
(3) Any available drug counseling, rehabilitation and employee assistance programs; and
(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant to be given a copy of the statement required by paragraph (a),

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will.

(1) Abide by the terms of the statement; and
(2)Notify the employee in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction

(e) Notifying the agency, in writing within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to the applicable FEMA awarding office, i e. regional office or FEMA office.
(f) Taking one of the following actions against such an employee, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Require such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement or other appropriate agency

(g) Making a good effort to continue to maintain a drug free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

(B) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance

Street	City	State	ZIP
1353 FM646 West, Suite 201	Dickinson	TX	77539

Section 17 630 of the regulations provide that a grantee that is a State may elect to make one certification in each Federal fiscal year A copy of which should be included with each application for FEMA funding. States and State agencies may elect to use a Statewide certification

I, John Simsen, hereby sign this form as of 05-13-2011

APPLICATION FOR FEDERAL ASSISTANCE (SF 424)

2 DATE SUBMITTED
05-13-2011

Applicant Identifier

1 TYPE OF SUBMISSION
Construction

3 DATE RECEIVED BY STATE
05-13-2011

State Application Identifier

4 DATE RECEIVED BY FEDERAL AGENCY

Federal Identifier

APPLICANT INFORMATION

Legal Name
Galveston County, Texas

Organizational Unit
Galveston County Emergency Management

Address
1353 FM646 West, Suite 201,
Dickinson, TX 77539

Name and telephone number of the person to be contacted on matters involving this application
John Simsen, 281-309-5002

6 EMPLOYER IDENTIFICATION NUMBER (EIN)
74-6000908

6 a. DUNS NUMBER
08150770

7 TYPE OF APPLICANT
Local Government

8 TYPE OF APPLICATION
Project Application

9 NAME OF FEDERAL AGENCY
Federal Emergency Management Agency

10 CATALOG OF FEDERAL DOMESTIC ASSISTANCE
NUMBER 97 110
CFDA TITLE SRL

11 DESCRIPTIVE TITLE OF APPLICANT'S PROJECT
Galveston County Elevation Application - SRL 2011

12. AREAS AFFECTED BY PROJECT (cities, counties states, etc.)
GALVESTON COUNTY

13. PROPOSED PROJECT
Start Date:
End Date

14 CONGRESSIONAL DISTRICTS OF
a Applicant TX14th
b Project TX14th

15 ESTIMATED FUNDING

16 IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?
YES 11-MAY-2011

a Federal	$ 31 028,398 97
b Applicant	$ 0 00
c. State	$ 0.00
d Local	$ 3,447,599 79
e. Other	$ 0 00
f Program Income	$ 0 00
g. TOTAL	$ 34,475 998 76

17 IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?
No

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF ALL DATA IN THIS APPLICATION ARE TRUE AND CORRECT THE DOCUMENT HAS BEEN DULY AUTHORIZED BY GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a Name of Authorized Representative
John Simsen

b Title

c.Telephone Number
2813095003

d.Signature of Authorized Representative
John Simsen

e Date Signed
05-13-2011

Comments for FEMA

The application has been reviewed and the State recommends funding.

C. Approach

After identifying the need for the project, Galveston County determined that submitting an application for the elevation of flood prone homes through the FEMA Severe Repetitive Loss (SRL) grant program was in the best interest of the residents of the County. Once the County resolved to submit the SRL elevation application, it was determined that the services of a professional disaster recovery consultant were needed to properly complete the application and submit it within the allotted time frame, and to manage and execute the grant once approved. Galveston County chose to engage Science Application International Corporation (SAIC), which had been competitively procured by the County and approved by the Commissioners Court through an RFP process. SAIC will manage all aspects of this project. This will include parcel-specific and overall project management. SAIC will provide labor and the necessary resources to allow a dedicated staff to manage the project from application completion to closeout.

Taking into account Galveston County's interest in elevations, previous mitigation goals and extensive repetitive prior flood losses as well as depth and proximity to the floodplain, 225 properties were identified for this application that were eligible and interested in an offer to assist with the elevation of their homes. These elevation projects will provide an estimated $35 million in benefits to reduce future claims to the NFIP.

Galveston County has only two alternatives to these options; acquisition and demolition and no action. These homes sit deep in the floodplain and are damaged structurally but are sound enough to withstand elevation; therefore, acquisition is not a desirable alternative. Not taking action is not an acceptable alternative because it leaves the homes and residents in harm's way. If left alone, it is anticipated that these homes will continue to experience losses. The affected citizens would be burdened with tremendous expenditures for repair and/or relocation to avoid future flood losses. Elevating these structures would result in the best reduction of flood costs for the private citizens, NFIP, and emergency services.

EXHIBIT C

TASK BUDGET

TASK	DESCRIPTION	AMOUNT
Pre-award and Administration		
1	Pre-Award	$850,000 80
2	Administration	2,131,118 72
Elevation of Private Structures – Riverine		
3	Elevation and Engineering	27,173,905 40
4	Construction Management and Inspection	1,316,000 00
Elevation of Private Structures – Coastal		
5	Elevation and Engineering	2,780,971 84
6	Construction Management and Inspection	224,000 00
Total		**$34,475,996.76**

EXPENSE BUDGET

Expense Category	AMOUNT
Salaries and Wages[1]	$30,000 00
Fringe[2]	11,568 00
Travel	0 00
Elevation Costs[3]	29,954,877 24
Subcontractor	4,479,551 52
Other Expenses[4]	0 00
Overhead[5]	0 00
Total	**$34,475,996.76**

[1] Salaries and Wages is defined as the cost of salaries of engineers, draftsmen, stenographers, surveymen, clerks, laborers, etc , for time directly chargeable to this contract.

[2] Fringe is defined as the cost of social security contributions, unemployment, excise, and payroll taxes, employment compensation insurance, retirement benefits, medical and insurance benefits, sick leave, vacation, and holiday pay applicable thereto

[3] Elevation Costs are defined as expenses that are required to elevate a house including engineering and actual elevation of the structure

[4] Other Expenses is defined to include expendable supplies, communications, reproduction, postage, and costs of public meetings directly chargeable to this CONTRACT

[5] Overhead is defined as the costs incurred in maintaining a place of business and performing professional services similar to those specified in this contract These costs shall include the following

- Direct salaries, including that portion of the salary of principals and executives that is allocable to general supervision,
- Indirect salary fringe benefits,
- Accounting and legal services related to normal management and business operations,
- Travel costs incurred in the normal course of overall administration of the business,
- Equipment rental,
- Depreciation of furniture fixtures, equipment, and vehicles,
- Dues, subscriptions, and fees associated with trade, business, technical, and professional organizations,
- Other insurance, Rent and utilities, and
  Repairs and maintenance of furniture, fixtures, and equipment

AGENDA ITEM #22a

CONFLICT OF INTEREST AFFIDAVIT

THE STATE OF TEXAS

COUNTY OF GALVESTON

I, Patrick F. Doyle, as a member of Commissioners' Court of Galveston County, make this affidavit and hereby on oath state the following: I, and/or a person or persons related to me in the first degree by consanguinity or affinity, have a substantial interest as such term is defined in Chapter 171 of the Local Government Code of the State of Texas in a business entity or in real property that would be affected by a vote or decision of the Commissioners' Court

(Select One)

The business entity is South Land Title

The real property is _____

BUSINESS ENTITY CONFLICT

* Patrick F. Doyle, (~~have~~/has) a substantial interest in this business entity for the following reasons: (Check all which are applicable.)

(x) Ownership of 10% or more of the voting stock or shares of the business entity

(x) Ownership of 10% or more of the fair market value of the business entity.

(x) Ownership of $15,000. or more of the fair market value of the business entity.

**

( ) Funds received from the business entity exceed 10% of _____ gross income for the previous year

( ) A person related to me in the first degree by consanguinity or affinity has a substantial interest in the business entity that would be affected by a decision of the Commissioners' Court.

REAL PROPERTY CONFLICT

*_____ (have/has) a substantial interest in this real property for the following reasons: (Check all which are applicable.)

***

( ) Real property is involved and _____ have an equitable or legal ownership with a fair market value of at least $2,500

( ) A person related to me in the first degree by consanguinity or affinity has a substantial interest in the real property that would be affected by a decision of the Commissioners' Court

Upon the filing of this affidavit with the County Clerk, I affirm that I will abstain from voting on any decision involving this business entity or the real property and from any further participation on this matter

This Affidavit is being executed on Claim No 22a dated January 10, 2012. (Fill in if applicable.)

_____
Signature of Official

County Commissioner, Precinct 1
Title

Before me, the undersigned authority, on this day personally appeared Patrick F. Doyle and on oath stated that the facts herein above stated are true to the best of his knowledge or belief.

Sworn to and Subscribed before me on this 10th day of January 2012

DWIGHT D. SULLIVAN,, County Clerk
Galveston County, Texas

By: Brandy Chapman
Brandy Chapman Deputy

* ("I" or name of relative or relationship)
** (my, his, her)
*** (I, he, she)

FLOOD DAMAGED PROPERTY CONTRACT FOR SALE

THIS AGREEMENT is made and entered into this 27th day of Oct., 2011, by and between **Galveston County a political subdivision of the State of Texas ("County")**, and **David Knoblock, ("Seller")**, regardless of the number of signatories. /Barbara Knoblock

County is acting under a federal grant from the Texas Division of Emergency Management (TDEM) and /or Texas Department of Housing and Community Affairs (TDHCA) desires to purchase from **Seller** all that certain tract or parcel of land together with all improvements located thereon located in Galveston County, Texas ("Premises") more particularly described as follows, to-wit 1017 Mae St, Gilchrist TX 77617, Legal Description ABST 64 E FRANKS LOT 5 BLK 1 BAYVIEW S-D OF PARWINTIER TR and ABST 64 E FRANKS 1/2 OF LOT 6 BLK 1 BAYVIEW S-D OF PARWINTIER TR

Seller represents and understands

- The **Premises** was damaged by flood,
- **Seller** qualifies for the assistance being granted under the federal grant,
- The **Seller** has no obligation to sell the **Premises** under this program and does so voluntarily, and
- That if **Seller** withdraws from this sale, **County** will not exercise its power of eminent domain but will release **Seller** from the terms and conditions of this Contract for Sale

The parties agree as follows

1 **Seller** agrees to sell the **Premises** described above to **County** for the sum of **$11,565.00** and to execute and deliver a good and sufficient General Warranty Deed conveying marketable title to said **Premises** in fee simple, clear of all liens and encumbrances.

2 **County** agrees to pay **Seller** for said Premises the sum of **$11,565.00** payable at closing after the acceptance of this Agreement and approval of **Seller's** title

3 **Seller** acknowledges that the price to be paid for the property is seventy-five percent (75%) of the pre-flood value of **$129,000.00** with deductions for any insurance payment received by SELLER for structural damage from flood insurance of **$58,000.00** and structural damage from wind insurance of **$55,580.00** and **$0.00** for any Disaster Housing Assistance program (DHA) (structural repairs) and/or **$0.00** for Other Needs Assistance (ONA) for which SELLER cannot document as expended on repair of the damaged structure, and a reimbursement of **$0.00** for certain repairs for which receipts were provided have been added.

4 **Seller's** proceeds from the sale of the Premises shall first be applied to satisfy all liens on the property, including real estate taxes, which are due and payable to the date of settlement.

5 **Seller** understands that **Hazard Mitigation Grant Program** funds being used for the purchase of the Premises cannot and will not duplicate benefits received by **Seller** for the same or from any other funds **Seller** agrees to return any disaster aid monies received if such monies amount to a duplicity of benefits

6 **Seller** will execute all necessary documents to transfer good and marketable fee simple title to the Premises to County **Seller** also agrees to execute now and in the future, any and all documents required by County and/or GDEM to complete this transaction and to comply with County, state or federal regulations relating to the federal grants

7 **Seller** will not, without prior written notification to and written approval received from **County**, remove any improvements on the **Premises** Upon application to remove such improvements **Seller** must provide appraisals of such improvements as is required by **County** The value of the improvements allowed to be removed by **County**, as unilaterally determined by **County**, will be deducted from the purchase price at closing or, if post closing, paid by **Seller** to **County** within ten (10) days after removal.

8 **Seller** agrees that no fixtures, materials or improvements to the real estate may be removed by **Seller** or by anyone acting under his direction or with his permission from the **Premises**

9 **Seller** also agrees that due to the price he is paid for the **Premises** and due to third party liability concerns, he will not be permitted by **County** to salvage any materials now or at time of demolition Should such materials be removed, the purchase price for the **Premises** will be reduced to correspond with the fair market value of the **Premises** less the fair market value of the materials removed

10 **Seller** understands this is a voluntary transaction Accordingly, **Seller** further understand that he is not entitled to relocation benefits provided by the **Uniform Relocation Assistance and Real Property Acquisition Policies Act (URA)**, and will not claim any such benefits

R176769 (F)

11 **Seller** acknowledges that he has had an opportunity to review this **Contract for Sale**, that he has had an opportunity, if he so chose, to engage the services of an attorney of his choice to review this document, that he has executed this **Contract for Sale** fully understanding its terms and conditions and the nature thereof and that he **Saves and Holds Harmless County, TDEM** and **TDHCA** incurred by **Seller** as a result of executing this **Contract for Sale**, and/or for selling the **Premises** to **County.**

12 This **Contract for Sale** is binding upon **Seller's** and **County's** heirs, executors, successors and assigns

DATED this 10th day of January, 2012

David Knoblock
Seller Signature

X Barbara Knoblock

David Knoblock
Seller Printed Name

Galveston County

By: Kenneth Clark
~~**Mark Henry**~~**Kenneth Clark**
Acting County Judge

Attest:
Dwight Sullivan
County Clerk
Brandy Chapman **Deputy**
Brandy Chapman

RP16769

FLOOD DAMAGED PROPERTY CONTRACT FOR SALE

THIS AGREEMENT is made and entered into this 24th day of Oct, 2011, by and between **Galveston County a political subdivision of the State of Texas ("County")**, and **Michael Sparks, ("Seller")**, regardless of the number of signatories.

County is acting under a federal grant from the Texas Division of Emergency Management (TDEM) and /or Texas Department of Housing and Community Affairs (TDHCA) desires to purchase from **Seller** all that certain tract or parcel of land together with all improvements located thereon located in Galveston County, Texas ("Premises") more particularly described as follows, to-wit. 1279 Waco, Gilchrist TX 77617, Legal Description ABST 64 E FRANKS LOTS 70 THRU 75 BLK 3 FAGGARD SLIP EXTN

Seller represents and understands.

- The **Premises** was damaged by flood,
- **Seller** qualifies for the assistance being granted under the federal grant,
- The **Seller** has no obligation to sell the **Premises** under this program and does so voluntarily; and
- That if **Seller** withdraws from this sale, **County** will not exercise its power of eminent domain but will release **Seller** from the terms and conditions of this Contract for Sale

The parties agree as follows

1 **Seller** agrees to sell the **Premises** described above to **County** for the sum of **$65,625.00** and to execute and deliver a good and sufficient General Warranty Deed conveying marketable title to said **Premises** in fee simple, clear of all liens and encumbrances

2 **County** agrees to pay **Seller** for said Premises the sum of **$65,625.00** payable at closing after the acceptance of this Agreement and approval of **Seller's** title

3 **Seller** acknowledges that the price to be paid for the property is seventy-five percent (75%) of the pre-flood value of **$87,500.00** with deductions for any insurance payment received by SELLER for structural damage from flood insurance of **$0.00** and structural damage from wind insurance of **$0.00** and **$0.00** for any Disaster Housing Assistance program (DHA) (structural repairs) and/or **$0.00** for Other Needs Assistance (ONA) for which SELLER cannot document as expended on repair of the damaged structure, and a reimbursement of **$0 00** for certain repairs for which receipts were provided have been added.

4 **Seller's** proceeds from the sale of the Premises shall first be applied to satisfy all liens on the property, including real estate taxes, which are due and payable to the date of settlement.

5 **Seller** understands that **Hazard Mitigation Grant Program** funds being used for the purchase of the Premises cannot and will not duplicate benefits received by **Seller** for the same or from any other funds **Seller** agrees to return any disaster aid monies received if such monies amount to a duplicity of benefits

6 **Seller** will execute all necessary documents to transfer good and marketable fee simple title to the Premises to County **Seller** also agrees to execute now and in the future, any and all documents required by County and/or GDEM to complete this transaction and to comply with County, state or federal regulations relating to the federal grants

7 **Seller** will not, without prior written notification to and written approval received from **County**, remove any improvements on the **Premises**. Upon application to remove such improvements **Seller** must provide appraisals of such improvements as is required by **County**. The value of the improvements allowed to be removed by **County**, as unilaterally determined by **County**, will be deducted from the purchase price at closing or, if post closing, paid by **Seller** to **County** within ten (10) days after removal

8 **Seller** agrees that no fixtures, materials or improvements to the real estate may be removed by **Seller** or by anyone acting under his direction or with his permission from the **Premises**

9 **Seller** also agrees that due to the price he is paid for the **Premises** and due to third party liability concerns, he will not be permitted by **County** to salvage any materials now or at time of demolition Should such materials be removed, the purchase price for the **Premises** will be reduced to correspond with the fair market value of the **Premises** less the fair market value of the materials removed

10. **Seller** understands this is a voluntary transaction Accordingly, **Seller** further understand that he is not entitled to relocation benefits provided by the **Uniform Relocation Assistance and Real Property Acquisition Policies Act (URA)**, and will not claim any such benefits

RM7442 (F)

11 **Seller** acknowledges that he has had an opportunity to review this **Contract for Sale**, that he has had an opportunity, if he so chose, to engage the services of an attorney of his choice to review this document, that he has executed this **Contract for Sale** fully understanding its terms and conditions and the nature thereof and that he **Saves and Holds Harmless County, TDEM** and **TDHCA** incurred by **Seller** as a result of executing this **Contract for Sale**, and/or for selling the **Premises** to **County**

12 This **Contract for Sale** is binding upon **Seller's** and **County's** heirs, executors, successors and assigns

DATED this 10th day of January, 201x2.

Seller Signature

Michael Sparks
Seller Printed Name

Galveston County

By: ~~Mark Henry~~ Kenneth Clark
Acting County Judge

Attest:
~~Dwight Sullivan~~
County Clerk
By: Brandy Chapman **Deputy**
Brandy Chapman

R177442 (E)

FLOOD DAMAGED PROPERTY CONTRACT FOR SALE

THIS AGREEMENT is made and entered into this 12th day of October, 2011, by and between **Galveston County a political subdivision of the State of Texas ("County")**, and **James Wise, Billye Wise, Bob Mulliuns, Kathy Mullins, Colleen Gray, Dan Sharp and ~~Sherman~~ Sharp ("Seller")**, regardless of the number of signatories
Shannon

County is acting under a federal grant from the Texas Division of Emergency Management (TDEM) and /or Texas Department of Housing and Community Affairs (TDHCA) desires to purchase from **Seller** all that certain tract or parcel of land together with all improvements located thereon located in Galveston County, Texas ("Premises") more particularly described as follows, to-wit. 1332 Emerald Dr Crystal Beach TX 77650, Legal Description Lots 296 and 297, Emerald Beach Abstract 179, Page 14

Seller represents and understands

- The **Premises** was damaged by flood,
- **Seller** qualifies for the assistance being granted under the federal grant,
- The **Seller** has no obligation to sell the **Premises** under this program and does so voluntarily, and
- That if **Seller** withdraws from this sale, **County** will not exercise its power of eminent domain but will release **Seller** from the terms and conditions of this Contract for Sale

The parties agree as follows

1 **Seller** agrees to sell the **Premises** described above to **County** for the sum of **$210,000.00** and to execute and deliver a good and sufficient General Warranty Deed conveying marketable title to said **Premises** in fee simple, clear of all liens and encumbrances

2 **County** agrees to pay **Seller** for said Premises the sum of **$210,000.00** payable at closing after the acceptance of this Agreement and approval of **Seller's** title

3 **Seller** acknowledges that the price to be paid for the property is seventy-five percent (75%) of the pre-flood value of **$400,000.00** with deductions for any insurance payment received by SELLER for structural damage from flood insurance of **$135,000.00** and structural damage from wind insurance of **$80,644.09** and **$0.00** for any Disaster Housing Assistance program (DHA) (structural repairs) and/or **$0.00** for Other Needs Assistance (ONA) for which SELLER cannot document as expended on repair of the damaged structure, and a reimbursement of **$0.00** for certain repairs for which receipts were provided have been added Note that the above deduction of insurance resulted in a valuation of less than land value Therefore, the valuation was increased to land value of $280,000 00

4 **Seller's** proceeds from the sale of the Premises shall first be applied to satisfy all liens on the property, including real estate taxes, which are due and payable to the date of settlement

5 **Seller** understands that **Hazard Mitigation Grant Program** funds being used for the purchase of the Premises cannot and will not duplicate benefits received by **Seller** for the same or from any other funds **Seller** agrees to return any disaster aid monies received if such monies amount to a duplicity of benefits

6 **Seller** will execute all necessary documents to transfer good and marketable fee simple title to the Premises to County **Seller** also agrees to execute now and in the future, any and all documents required by County and/or GDEM to complete this transaction and to comply with County, state or federal regulations relating to the federal grants

7 **Seller** will not, without prior written notification to and written approval received from **County**, remove any improvements on the **Premises**. Upon application to remove such improvements **Seller** must provide appraisals of such improvements as is required by **County** The value of the improvements allowed to be removed by **County**, as unilaterally determined by **County**, will be deducted from the purchase price at closing or, if post closing, paid by **Seller** to **County** within ten (10) days after removal

8 **Seller** agrees that no fixtures, materials or improvements to the real estate may be removed by **Seller** or by anyone acting under his direction or with his permission from the **Premises**

9 **Seller** also agrees that due to the price he is paid for the **Premises** and due to third party liability concerns, he will not be permitted by **County** to salvage any materials now or at time of demolition Should such materials be removed, the purchase price for the **Premises** will be reduced to correspond with the fair market value of the **Premises** less the fair market value of the materials removed

10 **Seller** understands this is a voluntary transaction Accordingly, **Seller** further understand that he is not entitled to relocation benefits provided by the **Uniform Relocation Assistance and Real Property Acquisition Policies Act (URA)**, and will not claim any such benefits

R216299 (F)

11 **Seller** acknowledges that he has had an opportunity to review this **Contract for Sale**, that he has had an opportunity, if he so chose, to engage the services of an attorney of his choice to review this document, that he has executed this **Contract for Sale** fully understanding its terms and conditions and the nature thereof and that he **Saves and Holds Harmless County, TDEM** and **TDHCA** incurred by **Seller** as a result of executing this **Contract for Sale**, and/or for selling the **Premises** to **County.**

12 This **Contract for Sale** is binding upon **Seller's** and **County's** heirs, executors, successors and assigns

DATED this 12th day of oct., 2011

Billye M. Wise
Seller Signature

Billye Wise
Seller Printed Name

James C Wise
Seller Signature

James Wise
Seller Printed Name

Seller Signature

Colleen Gray
Seller Printed Name

Seller Signature

Sherman Sharp
Seller Printed Name

Seller Signature

Bob Mullins
Seller Printed Name

Seller Signature

Kathy Mullins
Seller Printed Name

Seller Signature

Dan Sharp
Seller Printed Name

Galveston County

By: Kenneth Clark
~~**Mark Henry**~~**Kenneth Clark**
Acting County Judge

Attest:
Dwight Sullivan
County Clerk
By: Brandy Chapman **Deputy**
Brandy Chapman

R216299 (F)

11 **Seller** acknowledges that he has had an opportunity to review this **Contract for Sale**, that he has had an opportunity, if he so chose, to engage the services of an attorney of his choice to review this document, that he has executed this **Contract for Sale** fully understanding its terms and conditions and the nature thereof and that he **Saves and Holds Harmless County, TDEM** and **TDHCA** incurred by **Seller** as a result of executing this **Contract for Sale**, and/or for selling the **Premises** to **County.**

12 This **Contract for Sale** is binding upon **Seller's** and **County's** heirs, executors, successors and assigns

DATED this ____day of _____, 2011

_____
Seller Signature

Billye Wise
Seller Printed Name

_____
Seller Signature

James Wise
Seller Printed Name

Seller Signature

Colleen Gray
Seller Printed Name

Seller Signature

~~Sherman Sharp~~ Shermane Gray
Seller Printed Name

Bob Mullins
Seller Printed Name

Seller Signature

Kathy Mullins
Seller Printed Name

Seller Signature

Dan Sharp
Seller Printed Name

Galveston County

By: _____
Mark Henry
County Judge

Attest:

_____
Dwight Sullivan
County Clerk

R21299

AGENDA ITEM #22b

PCR 2
GLO did not require the property be a year around rental. just that the owner provide proof that the house was a rental property prior to Ike.

PCR 3
After the Rental property is reconstructed with GCLAP funds the owners are required to rent the home to low to moderate income families for the next five (5) years

PCR 4
If we cannot determine the size of the home before Ike we will provide a
2 bedroom 1 bath home

PCR 5
All homes will have at least one (1) handicapped accessible bath

PCR 6
All "non-commercial" properties will be eligible for demolition grants up to $10,000

Policy/Guidelines/Process Change or Clarification Request Form

Date December 13, 2011 Tracking No PCR- 2	Initiated by ☐ GCHD ☐ TDHCA/GLO X GCHAP - S&B ☐ Other Initiator Jerry Lozano Category Policy Clarification

Title of Clarification Request: Clarification of GUIDELINES V 5.6.16.11

Issue/Problem Statement:

GALVESTON COUNTY LANDLORD ASSISTANCE PROGRAM GUIDELINES V 5 6 16 11 ON PAGE 3 UNDER PROPERTY OWNER ELIGIBILITY currently states

"The owner must be able to prove that he or she owned the property as a rental unit at the time of Hurricane IKE (September 13, 2008) Properties that are not year round permanent housing are ineligible

Reason(s) for Change Proposal:

After conference call with GLO we discovered It is not a requirement that the house be a year-round permanent housing only that the house is a rental property and they will be required to rent to low to moderate income families for five (5) years after the completion of the rebuild

Program and Budget Impact:

This policy change will have no impact on a site by site basis It will, however, help ensure the availability of more low to moderate income rental prosperities

Risks:

None

Proposed Change:

We purpose changing the paragraph to read

The owner must be able to provide proof that he or she owned the property as a rental unit at the time of Hurricane IKE (September 13, 2008)

And carrying this change to all paragraphs phrased in the same manor throughout this Policy

GCHAP Action:

If GCHAP initiated Date _____ Approve ☐ Reject ☐ Make Revisions ☐ Elevate to GCHD

If other initiated Date _____ ☐ Concur ☐ Recommend Changes ☐ _____ (Other)

Policy/Guidelines/Process Change or Clarification Request Form

GCHD Decision: ☐ Approve ☐ Reject ☐ Make Revisions

Client	Signature (only one signature is required)	Date
Brenda Bock, Housing Director Galveston County Housing Dept		
Jim Gentile, Asst. Director Galveston County Housing Dept		12/16/11

Client Notes:

Policy/Guidelines/Process Change or Clarification Request Form

Date December 13 2011	Initiated by ☐ GCHD ☐ TDHCA/GLO X GCHAP - S&B ☐ Other
Tracking No PCR- 3	Initiator Jerry Lozano Category Policy Clarification

Title of Clarification Request: Clarification of GUIDELINES V 5.6.16.11

Issue/Problem Statement:

GALVESTON COUNTY LANDLORD ASSISTANCE PROGRAM GUIDELINES V 5.6.16.11 ON PAGE 3 UNDER ELIGIBLE OWNERS/FUTURE OBLIGATIONS currently states:

A covenant shall be placed on the property requiring that all future owners comply with the affordability requirements during the affordability period. In the event the owner sells the property prior to the expiration of the affordability period the new owner must continue the terms of affordability through the term of the affordability period or return the applicable portion of the grant to the GCLAP The document conveying the ownership interest must be recorded in the Galveston County Official Public Records *prior* to determining Program eligibility

An owner must provide documentation supporting the condition that the unit was a rental at the time of the storm

An owner must provide evidence that the unit is not currently occupied at the time of application

Reason(s) for Change Proposal:

The document is silent on the subject of terms required for rental of property after the work has been completed

Program and Budget Impact:

This policy change will have no impact on a site by site basis It will, however, help ensure the availability of more low to moderate income rental prosperities

Risks:

None

Proposed Change:

We purpose adding to the paragraph

Owner(s) of the rental property agrees to maintain property affordable to renters who are at or below 80% AMFI for a minimum of five years.

And carrying this change to all paragraphs phrased in the same manor throughout this Policy

Policy/Guidelines/Process Change or Clarification Request Form

GCHAP Action:

If GCHAP initiated Date _____ Approve ☐ Reject ☐ Make Revisions ☐ Elevate to GCHD

If other initiated Date _____ ☐ Concur ☐ Recommend Changes ☐ _____ (Other)

GCHD Decision: ☐ Approve ☐ Reject ☐ Make Revisions

Client	Signature (only one signature is required)	Date
Brenda Bock, Housing Director Galveston County Housing Dept		
Jim Gentile, Asst Director Galveston County Housing Dept		12-16-11

Client Notes:

Policy/Guidelines/Process Change or Clarification Request Form

Date December 13, 2011 Tracking No PCR- 4	Initiated by. ☐ GCHD ☐ TDHCA/GLO X GCHAP - S&B ☐ Other Initiator Jerry Lozano Category · Policy Clarification

Title of Clarification Request: Clarification of GUIDELINES V 5.6.16.11

Issue/Problem Statement:

GALVESTON COUNTY LANDLORD ASSISTANCE PROGRAM GUIDELINES V 5.6.16.11 ON PAGE 7 Household Composition for Unit Size Determination currently states:

The unit type and number of bedrooms for the Reconstruction of a qualified home, including MHUs will be determined in accordance with the Occupancy Standards set forth in HUD Handbook 4350 3 §3-23(E)(6)

Structure types will be either a 2 bedroom/1 bath, 3 bedroom/2 bath, or 4 bedroom/2bath The determination of units awarded will be to match if possible the existing bedroom quantity while staying within the overall limits of GCLAP.

Reason(s) for Change Proposal:

The document is silent on the subject of replacement if Owner cannot prove number of rooms prior to Ike

Program and Budget Impact:

This policy change will have no impact on a site by site basis

Risks:

None

Proposed Change:

We purpose adding to the paragraph

The structure will be replaced with the same number of rooms that were present prior to Ike If it is not determinable from a site visit and/or the Owner(s) cannot provide proof of the number of rooms prior to Ike the Owner(s) will be provided with a 2 bedroom 1 bath structure

GCHAP Action:

If GCHAP initiated Date _____ Approve ☐ Reject ☐ Make Revisions ☐ Elevate to GCHD

If other initiated Date _____ ☐ Concur ☐ Recommend Changes ☐ _____ (Other)

GCHD Decision: ☐ Approve ☐ Reject ☐ Make Revisions

Policy/Guidelines/Process Change or Clarification Request Form

Client	Signature (only one signature is required)	Date
Brenda Bock, Housing Director Galveston County Housing Dept		
Jim Gentile, Asst Director Galveston County Housing Dept		12-16-11

Client Notes:

Policy/Guidelines/Process Change or Clarification Request Form

Date December 13, 2011 Tracking No PCR- 5	Initiated by ☐ GCHD ☐ TDHCA/GLO X GCHAP - S&B ☐ Other Initiator Jerry Lozano Category Policy Clarification

Title of Clarification Request: Clarification of GUIDELINES V 5.6.16.11

Issue/Problem Statement:

GALVESTON COUNTY LANDLORD ASSISTANCE PROGRAM GUIDELINES V 5.6.16.11 ON PAGE 7 Household Composition for Unit Size Determination currently states:

The unit type and number of bedrooms for the Reconstruction of a qualified home, including MHUs will be determined in accordance with the Occupancy Standards set forth in HUD Handbook 4350 3 §3-23(E)(6)

Structure types will be either a 2 bedroom/1 bath, 3 bedroom/2 bath, or 4 bedroom/2bath The determination of units awarded will be to match if possible the existing bedroom quantity while staying within the overall limits of GCLAP

Reason(s) for Change Proposal:

The document is silent on the subject of Accessibility

Program and Budget Impact:

This policy change will have no impact on a site by site basis

Risks:

None

Proposed Change:

We purpose adding to the paragraph

It is required that a Handicapped accessible shower or bathtub is installed for all 2 bedroom structures, it is the Owner(s) preference as to whether it is a shower or bathtub

This is also requirement for all 3 and 4 bedroom structures The requirement is that the hall (not master) bathroom be accessible, it is the preference of the Owner as to whether it is to be a bathtub or shower

GCHAP Action:

If GCHAP initiated Date _____ Approve ☐ Reject ☐ Make Revisions ☐ Elevate to GCHD

If other initiated Date _____ ☐ Concur ☐ Recommend Changes ☐ _____ (Other)

Policy/Guidelines/Process Change or Clarification Request Form

GCHD Decision: ☐ Approve ☐ Reject ☒ Make Revisions

Client	Signature (only one signature is required)	Date
Brenda Bock, Housing Director Galveston County Housing Dept		
Jim Gentile, Asst Director Galveston County Housing Dept		12-16-11

Client Notes:

Policy/Guidelines/Process Change or Clarification Request Form

Date December 14, 2011 Tracking No PCR- 6	Initiated by ☐ GCHD ☐ TDHCA/GLO X GCHAP - S&B ☐ Other Initiator Jerry Lozano Category Policy Clarification

Title of Clarification Request: Guidelines for Elimination of Slum and Blight V 6 27 11

Issue/Problem Statement:

The Galveston County Housing Assistance Program Guidelines for Elimination of Slum and Blight V 6 27.11 currently states

"Based on the Action Plan, Galveston County can assist applicants with demolition grants of up to $10,000, whose primary residence, secondary residence and/or rental property was impacted by the storm, if the structure is now vacant and deteriorated"

Reason(s) for Change Proposal:

It is not a requirement of the HUD National Objective that the program be limited to Primary Residence only

Program and Budget Impact:

This policy change will have no impact on a site by site basis It will, however, help ensure expeditious elimination of blighted areas in the community

Risks:

None

Proposed Change:

We purpose changing the paragraph to read

Based on the Action Plan, Galveston County can assist applicants with demolition grants of up to $10,000 This is to include all non-commercial properties that were impacted by the storm, if the structure is now vacant and deteriorated

And carrying this change to all paragraphs phrased in the same manor throughout this Policy

GCHAP Action:

If GCHAP initiated Date _____ Approve ☐ Reject ☐ Make Revisions ☐ Elevate to GCHD

If other initiated Date _____ ☐ Concur ☐ Recommend Changes ☐ _____ (Other)

GCHD Decision: ☐ Approve ☐ Reject ☐ Make Revisions

Policy/Guidelines/Process Change or Clarification Request Form

Client	Signature (only one signature is required)	Date
Brenda Bock, Housing Director Galveston County Housing Dept		
Jim Gentile, Asst Director Galveston County Housing Dept		12-16-11

Client Notes:

Galveston County Housing Assistance Program

Guidelines for Elimination of Slum and Blight

Version 6.27.~~11~~12

Galveston County Housing Assistance Program

Guidelines for Slum and Blight (Spot Basis)

1.0 Overview

Galveston County's Action Plan and Method of Distribution describe eligible housing activities for owner occupied, rental properties, and unoccupied structures Of the total housing allocation of $99,503,498, one percent (1%) or $995,035, is planned to be spent for demolition and clearance of unoccupied structures meeting HUD slum and blight national objectives

The Demolition activity listed under "Housing – Owner Occupied" includes **total removal of all standing structural components and any building debris** The purpose is to address slum and blight on a spot basis, and will assist in the removal of vacant, deteriorated, or abandoned buildings This activity does not require reconstruction to take place on the site

If demolition and clearance of an existing structure is needed **to replace/reconstruct** a unit (for homeowner OR owner of rental properties) that complies with all other program requirements, then the activity is eligible in the Reconstruction process (not Demolition) Funds to complete Demolition associated with the Reconstruction process are not used from the Slum and Blight allocation

~~Based on the Action Plan, Galveston County can assist applicants with demolition grants of up to $10,000, whose primary residence, secondary residence or rental property was impacted by the storm, if the structure is now vacant and deteriorated~~

Based on the Action Plan, Galveston County can assist applicants with demolition grants of up to $10,000 This is to include all non-commercial properties that were impacted by the storm, if the structure is now vacant and deteriorated

These cases should meet the HUD definition of slum and blight and be documented as removing conditions that are detrimental to public health and safety The following checklist will ensure complete documentation and compliance with HUD requirements Also attached are the workflow procedures documenting process

1.2 Type of Work to Perform

The "Work" consists of the demolition of Hurricane Ike damaged dilapidated structures, standing structural components and any building debris to address slum and blight according to HUD's National

Objectives as identified by Galveston County The demolition and proper disposal of this associated debris is part of this work

1.2.2 Type of Activities and Debris to remove

*** may include but not limited to the following**

- Rubble from structures and other improvements
- Vegetation and Tree debris
- Construction and Building materials of all types
- HVAC equipment
- Dead animals
- Hazardous and industrial waste materials, asbestos
- Concrete slabs and black top
- Various types of home foundations
- Septic Systems
- Buried water lines / water wells
- Buried waste water lines and field lines
- Clearing and snagging of all items located under water
- Fences
- Vehicles, trash
- Busting and filling septic tanks and swimming pools

1.3 Location of Work Areas

The location of the work will be determined from properties identified from the Galveston County Nuisance Abatement Services Group The work areas include unincorporated areas within Galveston County (specifically excluding the City of Galveston), Bacliff, San Leon, Freddiesville, Bolivar Peninsula, Bayou Vista, Clear lake Shores, Dickinson, Friendswood, Hitchcock, Jamaica Beach, Kemah, La Marque, League City, Santa Fe, Texas City, and Tiki Island, Texas

2.0 Designated Authority to administer Program

The Program was authorized by Congress in Public Law 110-329, the *Consolidated Security, Disaster Assistance, and Continuing Appropriations Act*

2.2 Program Governance

This program shall be governed by the State of Texas Action Plan for CDBG Disaster Recovery Grantees (Action Plan) and operated in accordance with all applicable rules and regulations of

i The US Department of Housing and Urban Development ("HUD"),

ii The Texas General Land Office ("GLO"),

iii The Galveston County Housing Assistance Program ("GCHAP") including associated documentation e g the Galveston County Method of Distribution (MOD) and contract between GLO and Galveston County for the provision of these disaster recovery services initially executed by the parties and including any subsequent modifications,

iv Applicable Historical and Environmental rules and regulations

2.3 Program Director

The Program shall be under the direct supervision of ~~Brenda Bock~~ Galveston County Director of Housing and Economic Development or County designee

2.4 Maximum Funding for Demolition per Property

Maximum benefit for demolition of blighted areas is $10,000 per property

A lien will be applied to the property until Round 1 of the Hurricane Ike recovery program administered by Galveston County is closed with the State of Texas The amount of the lien will match the amount expended by the program in support of activities associated with the property

3.0 Eligible Properties

Based on the Action Plan, Galveston County can assist applicants with demolition grants of up to $10,000 This is to include all non-commercial properties that were impacted by the storm, if the structure is now vacant and deteriorated

Rental Units

The program will approve at a maximum, four (4) rental property units per owner and/or grant amount not to exceed $40,000/$10,000 a unit For the purposes of this program a unit or

property equates to each individual ~~housing residence, secondary residence and/or rental~~non-~~commercial property~~commercial property This means in cases of single family-one (1) unit, duplex-two (2) unit, triplex-three (3) unit and quadplex-four (4) unit structure, each residence will equate to a unit or property

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These cases should meet the HUD definition of slum and blight and be documented as removing conditions that are detrimental to public health and safety The following procedures will ensure complete documentation and compliance with HUD requirements

3.1 Priority of Eligible Properties

The focus is to prioritize work in the areas which had the highest impact in accordance to flood zones from Hurricane Ike and other areas which are suggested by the Galveston County Nuisance Abatement Department Each site will have identified specific flood zones and in addition storm surge maps utilized

The program will initially move forward with primary residence structures Then the program will move forward with ~~rental structures~~all non-commercial properties based on funding availability

1 Primary Residence
2 Non-Commercial Properties (Rental properties or abandoned lots)

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4.0 Procedures for Addressing Slum and Blight Structures

The Program will follow a 6-step process for addressing slum and blight in Galveston County

4.1 Procedures: Step One

The GCHAP program will confirm that the subject property is listed on the County list of properties determined to be in violation of the Chapter 343 Texas Health and Safety Code and has been determined to be an

> " *unmaintained premises that creates an unsanitary condition likely to attract and or harbor mosquitoes, rodents, vermin, or disease carrying pests, a building that is structurally unsafe, poorly maintained, unsanitary, dilapidated or is a fire hazard and constitutes a hazard to public health and safety* "

Galveston County is following the ***"Galveston County Neighborhood Nuisance Abatement Procedures"*** version 300-19-2007 This process is as follows

1 Complaint noted
2 Notice sent to owner certified and non-certified
3 Receive notice response Owner given 3 weeks to respond and then proceed
    a If response received then case is reviewed by Justice of the Peace
    b Ruling given to proceed accordingly at this time
    c If case is appealed then must wait for ruling before moving to step 4
4 Check title report and check probate as needed
5 Confirm paper work with County Legal
6 Citation issued by Publication (2 times)
7 Post Citation at site
8 Receive approval from Commissioners Court as needed
9 Proceed with Demolition
10 Document and update records accordingly

4.2 Procedures Step 2

The Galveston County Nuisance Abatement office refers the approved slum and blight list to Galveston County Housing Assistance Program The Galveston County Housing Assistance Program then proceeds with

1 The Site Inspection and estimated cost to complete determined
2 The Environmental Review
3 GCHAP verifies that a file and checklist is set up for each property
4 GCHAP verifies that the first 8 required items on the "GCHAP Demolition Activity Checklist" are complete before submitting the Environmental Review to GLO for review

4.3 Procedures Step 3

Once GCHAP verifies that the first 8 items on the "GCHAP Demolition Activity Checklist" are complete then the Environmental review is completed as required by GLO and HUD

4.4 Procedures Step 4

After all the required site specific environmental reports are completed the information is sent to GLO for review and approval

4.5 Procedure Step 5

Once the program receives clearance from GLO then the program will notify the Galveston County Enforcement Officer that demolition is approved

4.6 Procedure Step 6

At this time bids will be requested from the contractors selected through the RFQ # B101008 process Once the bids are received, they will be reviewed and work will be awarded in accordance with Galveston County Procurement Policy

4.7 Procedure Step 7

At this time a "Notice to Proceed" is requested of the Galveston County Housing Department Once the Housing department receives a purchase order number and the Notice to proceed is signed, the contractor is given the notice to move forward with demolition

4.8 Procedure Step 8

1 Work commences
2 Work is completed
3 Work is documented
4 Work site inspected
5 County Nuisance Abatement Officer notified that work is completed

4.9 Procedure Step 9

Once the site is inspected and approved by the program then the contractor may request payment Payment request will be submitted to the Galveston County Housing Department

4.10 Procedure Step 10

The system of record and all files are updated with required documentation

1 A file documenting the eligibility of each site for demolition under the "spot basis" will contain
   - GLO form entitled "Slum & Blight for Spot Basis National Objective Form"
   - Photographs of the subject property documenting the specific conditions creating the threat to health and safety
   - Property location map/GPS Coordinates
   - Brief narrative description of condition of property (vacant, deteriorated, abandoned)
   - Notice of code enforcement action obtained from County Code Enforcement Officer
   - Copy of contract authorization to contractor to undertake the demolition
   - Cost documentation

- Photographs showing that the demolition has resulted in total removal of all standing structural components and any building debris, overgrown vegetation, grading concerns, standing water issues
- Narrative of how demolition aids in the elimination of slum or blight
- Environmental review and release - must be completed prior to initiating activity
- Program administer certifies slum and blight conditions were corrected to project close out

5.0 Contractor Procurement

Galveston County issued RFQ# B101008 to procure demolition contractors to work in this program The contractors approved by The Galveston County Commissioners Court are available to bid on the work associated with GCHAP

6.0 Contractor Requirements to Participate

Unless otherwise directed by Galveston County Commissioners Court, the approved contractors should reference the RFQ# 101008 for definitions of obligations Such references are as follows,

- Bonding requirements
- Insurance requirements
- Descriptions of Work
- Contractor Duties
- Quality Control
- Sequence of work
- Use of Construction Site
- Site descriptions and Work Summaries
- Technical Specifications

7.0 Project Lien Applied

At this time, lien is to be applied to the property until Round 1 of the Hurricane Ike recovery program administered by Galveston County is closed with the State of Texas The amount of the lien will match the amount expended by the program in support of activities associated with the property

8.0 Project Close out

GCHAP shall maintain accurate files and records on each applicant All pertinent documentation must be maintained for five years after GLO notifies GCHAP that HUD has closed out the

Program Such files shall be open for public inspection in accordance with the Texas Public Information Act, and be available at GCHAP's offices

DEMOLITION ACTIVITY CHECKLIST

Eligible under SLUM AND BLIGHT SPOT BASIS

TYPE OF ACTIVITY

_____Demolition

_____Clearance

DOES THE ACTIVITY.

_____Eliminate conditions detrimental to public health or safety

_____ Aid in elimination or prevention of slum and blight

Property Owner Participation

_____Voluntary

_____Involuntary

Documentation

_____ 1 GLO form entitled "Slum & Blight for Spot Basis National Objective Form"

_____ 2 Proof of physical damage to structure as a result of Hurricane Ike

_____3 Certify debris removal was not covered by FEMA, SBA or Army Corps of Engineers

_____4 Photograph of property damage (Before Demo Photos)

_____ 5 Property location map / GPS Coordinates

_____6 Narrative description of condition of property (vacant, deteriorated or abandoned)

_____7 Galveston County Code Enforcement Officer certifies condition of blight or decay

_____8 Narrative of how demolition and/or clearance aids in elimination or prevention of slum and blight

_____ 9 Environmental Review and release

_____10 Environmental Review completed prior to initiating activity

_____ 11 Program certifies Slum and Blight conditions corrected to close out project This includes photo documentation to ad to the file

END

Galveston County Landlord Assistance Program

(GCLAP) Guidelines

Version 6.27.12

GALVESTON COUNTY LANDLORD ASSISTANCE PROGRAM (GCLAP) GUIDELINES (v5.6.16.~~11~~12)

Purpose and Limitations

The purpose of these Guidelines is to offer a general description and summary of the key features of the Galveston County Landlord Assistance Program The Program is governed in detail by the GCLAP Policy and Procedures Manual, and applicable federal, state, and county requirements Where these guidelines appear to conflict with the Policy and Procedures Manual or other requirements, the Manual and applicable federal state and local regulations govern These guidelines do not fully detail every Program requirement or provision nor are they meant to govern the decisions or determinations of the Program Manager or the GCLAP

Program Director

The program shall be under the direct supervision of ~~Brenda Brock~~, Galveston County Director of Housing and Economic Development, or County designee

Overview of the Program

The purpose of the Community Development Block Grant Disaster Recovery Program (the Program) is to provide housing assistance to those affected by Hurricane Ike, which occurred September 13, 2008 Under the Landlord Assistance Program (GCLAP), financial assistance will be provided for the rehabilitation and reconstruction of one (1) to four (4) unit rental housing structures with total assistance not to exceed $500,000 per applicant The focus of the Program is to quickly provide safe, sanitary, and secure housing for low to moderate income renters, by bringing Ike affected rental units into compliance with applicable health and safety codes or replacing those existing structures that cannot be technically or economically repaired

All proposed Program activities meet one of the following Community Development Block Grant National Program Objectives

- Principally benefit low- and moderate income persons, or
- Aid in the elimination of slums or blight, or
- Meet other community development needs of particular urgency, which represent an immediate threat to the health and safety of the residents of the community

CDBG Disaster Recovery grants primarily benefit low-income residents in and around communities that have experienced a natural disaster Generally grantees must use at least one

half of disaster recovery funds for activities that principally benefit low to moderate income persons For a single family dwelling the unit must be rented to people of low to moderate income For multiple unit dwellings 51% of the units must be rented to people of low to moderate incomes Landlords are not required to be of low to moderate income in order to qualify for assistance in the Landlord Assistance Program

Call Center Services

The GCLAP will maintain a Call Center designed to assist property owners to inquire about the status of their application, assist owners with the requirements for completing their application and securing the required documentation, schedule appointments with the In-Take Services Center or mobile appointment for those with special needs, screen and manage files and uploading verification, oversee mail-outs and communications with the applicants

Intake Center Services

The main intake centers will be established in Galveston Island with Bacliff and Bolivar sites staffed as needed for mobile intake The center(s) will offer Program guidance and direction, provide notary services, refer applicants to local contacts/resources, conduct mobile visits, arrange for Mobile Intake Days (Community Days), receive dropped-off materials, transmit documents and applications to the Call Center daily, and oversee the benefit selection process

First-Come First Served

Intake Group A - Applications shall be accepted on a first-come first-served basis, with priority to applications received for the CDBG Disaster Recovery Program funding authorized by Public Law 109-148 until all funds are utilized. The program will initially move forward with single-family (1) unit structures since the plans are reviewed and approved. Then the program will move forward with the processing of duplex-two (2) unit, triplex-three (3) unit and quadplex-four (4) unit structure applications as plans are approved

Third Party Designee

Each applicant has the opportunity to designate a third party to communicate with the Program on the applicant's behalf by completing a Designation of Communications Designee form The Designee will be copied on correspondence and may inquire as to the status of the applicant's application, but may not sign documents of Affidavits on behalf of the applicant without a Power of Attorney

Property Owner Eligibility
The owner must be able to prove that he or she owned the property as a rental unit at the time of Hurricane IKE (September 13, 2008) ~~Properties that are not year-round permanent housing are ineligible~~

Ownership Size
The Program will only approve at a maximum, four (4) rental property units per Owner and/or a grant amount not to exceed $500,000 For the purpose of this program, a unit or property equates to each individual housing residence This means in cases of single family-one (1) unit, duplex-two (2) unit, triplex-three (3) unit and quadplex-four (4) unit structure, each residence will equate to a unit or property Residential requirements do not apply to individual owners and as such the owners may reside outside the state of Texas. In addition, Program requirements are designed to assist corporations that are licensed to do business in the state of Texas, partnerships, and nonprofits who own single family-one (1) unit, duplex-two (2) unit, triplex-three (3) unit and quadplex-four (4) unit structures and who owned those structures on September 13, 2008

Eligible Owners/Future Obligations
A covenant shall be placed on the property requiring that all future owners comply with the affordability requirements during the affordability period In the event the owner sells the property prior to the expiration of the affordability period, the new owner must continue the terms of affordability through the term of the affordability period or return the applicable portion of the grant to the GCLAP The document conveying the ownership interest must be recorded in the Galveston County Official Public Records *prior* to determining Program eligibility

An owner must provide documentation supporting the condition that the unit was a rental at the time of the storm

The owner of the rental property agrees to maintain property affordable to renters who are at or below 80% AMFI for a minimum of five (5) years

An owner must provide evidence that the unit is not currently occupied at the time of application

Ownership
An owner is the Trustee of an Irrevocable Living Trust created by the applicant or a sole owner (individual) or a partnership or a trust or a corporation

Owner Death
If the owner of the damaged structure dies after Hurricane Ike (September 13th, 2008), the Owner's heir may be eligible if such heir is an heir under the will of the deceased or is named in an Heirship Affidavit

Recordation of Acquisition Deed
If an Ownership deed was not recorded in the County land records, the ownership/acquisition deed must have notarized signatures dated prior to September 13th, 2008

Ineligible Applicants
Any applicant who is unable to provide evidence of ownership; or whose ownership has been transferred after September 13, 2008, or who is currently under Contract for Deed or lease Purchase Agreement, or which is an estate is ineligible to receive assistance

Required Documentation for Manufactured Housing Units (MHU)
For evidence of ownership and location of the MHU, the applicant must provide. a title to the MHU or registration of the MHU, or Statement of Ownership and Location, a Manufactured Housing Unit Ownership Affidavit and supporting documentation as required

Power of Attorney
The Program will accept a properly signed and notarized Power of Attorney for any applicant in the application process.

Fraud Prevention & Identity Check
The Program must confirm that all owners of the damaged property are checked against the Office of Foreign Asset Control (OFAC) Further, all applicants must present a current, non-expired and verifiable Government Issued Photo Identification Card

Property Eligibility Requirements

Property Location
The Owner's damaged rental unit must be located within Galveston County, outside the city limits of the City of Galveston as documented by a current Tax Bill and verified by the verification team

Delinquent Property Taxes
Property taxes must be either paid, current, deferred, or subject to a payment plan with the Galveston County Tax Collector and its status documented and verified

Child Support Obligations
If applicant owes child support. applicant must supply evidence that all child support owed by applicant is paid to date, or must provide evidence of an approved payment plan and compliance therewith

Mortgage Liens
The applicant must submit the names and contact information of all valid and existing mortgage lien holders The GCLAP will subordinate the GCLAP deferred loan to new mortgage placed on the property after filing the mortgage lien

Hurricane Ike Damage and Documentation of Damage
Hurricane Ike damage is defined as rain wind tornado and/or flood damage received as a direct result of the hurricane to the damaged property on September 13, 2008, plus subsequent related damage An applicant must provide documentation of damage to the property as a direct result of Hurricane Ike on September 13th, 2008 The methods to verify Ike damage will be through either the Galveston Central Appraisal District's 2008 Assessor database, SBA databases or the FEMA databases Documentation may be forthcoming from Galveston Central Appraisal District, FEMA, SBA Property Owner's Insurance, the Council of Governments, an assessment by a Faith Based Organization or Third Party Disaster Assistance Organization, or a Federal, State or Local Inspector

Illegal Displacement
All owners are restricted to properties in which all of the units are currently vacant (as of the date of application) If any property owner is found to have improperly asked a tenant to leave or some other illegal displacement has occurred, the owner is not eligible to receive an award and may be subject to legal penalties.

Program Insurance Requirements
The property owner will maintain and document flood insurance, if the property is located in a floodplain, as well as wind and/or hazard insurance as required by federal state and local regulations in perpetuity If this requirement is not met by the landlord, there is a risk of not receiving federal funding in the future The expectation for this program is that the owner will supply evidence of insurance within 5 days of the final inspection

Elevation Requirement
The rehabilitated or reconstructed property will comply with the latest available FEMA guidance for base flood elevations, unless exceptions are granted by Galveston County where the action is

designed or modified to minimize harm to or within a floodplain The GCLAP has the ability to recognize an authorized exception for historic properties eligible to be listed on the National Register for Historic Places, as approved by the appropriate Historical Commission and/or State Historic Preservation Officer

Inspection

Cost to Rehabilitate Determination

The cost to rehabilitate an eligible unit must exceed $5,000 per unit as determined by the GCLAP Inspection The maximum rehabilitation benefit is $85,000 per an individual unit and this would include each unit within single family-one (1) unit, duplex-two (2) unit, triplex-three (3) unit and quadplex-four (4) unit structures

Environmental Clearance

The applicant must receive a site-specific environmental clearance for the damaged property in order to be eligible for rehabilitation or reconstruction of the damaged property Among the environmental concerns to be evaluated are considerations such as noise, hazardous operations and project site proximity, airport and airfield proximity, contamination, presence of lead-based paint, location in a Coastal Barrier Resource System, and/or presence of asbestos containing materials Determination of any of the above referenced condition may affect property eligibility, rehabilitation costs, benefit eligibility, or remediation requirements

Unit Affordability Requirements

Units receiving GCLAP funding must be occupied by low and moderate income individuals as defined in 24CFR 570 3 Rents including utilities may not exceed the Fair Market Rents Updated income limits and rent levels will be published annually The table below lists the maximum monthly rents allowable for the 2011 fiscal year These rents include the cost of utilities

2011	Efficiency	1 BR	2 BR	3 BR	4 BR
Rent	690	767	931	1241	1560

Tenant Selection

Property owners shall select their own tenants and must comply with the requirements of the Fair Housing Act (42 U S C 3601-3620), which prohibits discrimination based on race, color religion, sex, national origin, familial status, and disability Property owners are required to sign a fair housing and affirmative housing statement as part of the application Property owners must submit tenant income information to the Galveston County after

rehabilitation/reconstruction is complete and before tenant occupancy Galveston County staff must approve the proposed tenant's income eligibility prior to the signing of a lease or occupancy

Tenant Income

The Renter's household must be eligible under the applicable low to moderate income limits (less than 80% of the Area Median Income for the household size) as defined by the HUD Handbook 4350 3 Chapter 5 Income is defined as the projected Adjusted Gross Income (4350 3 Chapter 5-5) for the year beginning at the time of application Income will be calculated for all members of the household 18 years of age or older at the time of the application for existing tenants and prior to executing an initial lease and as listed on the Household Size Affidavit

All potential tenants of the GCLAP-assisted unit must complete a tenant income certification form (http://www treasurer ca.gov/ctcac/compliance/tic pdf~~worksheet~~, provide documentation of income and certify to the accuracy of the information. It is the responsibility of the Property Owner to collect the required tenant income information and supporting documentation and submit it to the GCLAP staff Property owners must receive GCLAP approval before a tenant signs a lease or occupies a GCLAP-assisted unit

Household Composition for Unit Size Determination

The unit type and number of bedrooms for the Reconstruction of a qualified home, including MHUs will be determined in accordance with the Occupancy Standards set forth in HUD Handbook 4350 3 §3-23(E)(6)

Structure types will be either a 2 bedroom/1 bath, 3 bedroom/2 bath, or 4 bedroom/2 bath The determination of units awarded will be to match if possible the existing bedroom quantity while staying within the overall limits of GCLAP

The structure will be replaced with the same number of rooms that were present prior to Ike If it is not determinable from a site visit and/or the Owner(s) cannot provide proof of the number of rooms prior to Ike the Owner(s) will be provided with a 2 bedroom 1 bath structure

It is required that a Handicapped accessible shower or bathtub is installed for all 2 bedroom structures, it is the Owner(s) preference as to whether it is a shower or bathtub

This is also requirement for all 3 and 4 bedroom structures The requirement is that the hall (not master) bathroom be accessible, it is the preference of the Owner as to whether it is to be a bathtub or shower

Benefit Determination

The maximum benefit for Minor Repair. Rehabilitation and Reconstruction of a qualified home is based on the amount of the damage assessment

- Minor Repair $5,000 up to $24,999
- Rehabilitation $25,000 up to $84,999
- Reconstruction $85,000 up to $125,000
- Elevation limit is $50,000 per individual unit and is limited to reconstruction projects
    - As a reference a multi-family structure is composed of multiple units

Eligible structure types may vary from benefit level to benefit level In some instances, where the cost exceeds the applicable benefit level, the applicant may be required to provide gap financing prior to signing event
Under certain circumstances due to site conditions or codes, the Galveston County Housing Director may request a variance to these guidelines regarding an allowable benefit This variance will be presented to and approved by Galveston County Commissioners Court

Once the ECR (Estimated Cost to Repair) is determined the Benefit Determination Team will determine the program benefit for which the applicant is eligible based on the following schedule

The estimated cost to repair will dictate whether the assistance needed will constitute a Minor Repair, Rehabilitation, or Reconstruction based on the following ECR levels

i Between $5,000 and $25,000 – Minor Repair

ii Between $25,000 and $ $70,000 – Rehabilitation (NTE (Not-to-Exceed) $85,000 in total program cost)

iii If the Estimated Cost to rehabilitate a single family rental home is 200% or more of the 2008 Galveston County appraised value of each single family rental home valued less than or equal to $35,000, the project will automatically be changed to a Reconstruction project, even if the home has been deemed "repairable" The requisite Environmental Review approval for a Reconstruction will still be required For each housing unit, a repair estimate for more than $ $70,000 – will be changed to a Reconstruction project

- If the Estimated Cost to rehabilitate single family-one (1) unit, duplex-two (2) unit, triplex-three (3) unit and quadplex-four (4) unit rental structure is 200% or more of the 2008 Galveston County appraised value of the rental

structure where the value is less than or equal to $35,000 per unit. the project will automatically be changed to a Reconstruction project, even if the home has been deemed "repairable" The requisite Environmental Review approval for a Reconstruction will still be required

(a) Also, single family-one (1) unit, duplex-two (2) unit, triplex-three (3) unit and quadplex-four (4) unit structures will automatically trigger a reconstruct project for the entire structure when a total repair cost for the combined units is more than $70,000 per unit As a reference (2) two unit (duplex), (3) unit (triplex) and (4) four unit (quadplex) structures are composed of multiple units

(1) In cases where the a unit or units exceeds $70,000 but the total repair cost to the entire structure is below the total structure not-to-exceed repair value($140,000 for duplex, $210,000 for triplex, and $280,000 for quadplex) then the case will be reviewed by the county housing department for a final decision as to repair or rebuild

- There will be no elevation allowed on any home considered for Rehabilitation
- Any home's initial inspection that resulted in Form 11 01a being applicable will automatically be changed to a Reconstruction project

iv For each housing unit, a repair estimate for more than $ $70,000 – will be changed to a Reconstruction project

v The final decision on whether a home is Rehabilitated or Reconstructed must be approved via the program policies and guidelines The State must also approve the setup and verify the documentation before any action is taken by the County The applicant will be made aware of and counseled on this requirement The applicant will also be required to initial the statement "PENDING STATE APPROVAL" on the Benefit Selection and/or signing event documents

Any exceptions to the above stated caps will be governed by the Performance Statement in Contract NO 70090014 between Galveston County and the State of Texas Department of Housing and Community Affairs

Grant Determination

As a component of the Grant Determination, the Program shall determine if any duplication of benefits (DOBs) exists as defined by the Stafford Act Duplication exists if funds were received from any of the following sources and not used for a recognized "Allowable Activity "

i Private insurance payments related to the structure as opposed to contents
ii Payments from FEMA
iii Loan amounts received from SBA
iv Funds received for mitigation activities such as Increased Cost of Compliance
v Any other source resulting in a monetary payout to address disaster damage

Recognized allowable activities that can be used to offset what would otherwise be a duplication of benefits may include the following

- Structure repairs (i e roof, foundation, electrical, plumbing, and windows)
- Tree/shrub removal if the tree/shrub blocked access to the home
- Labor, material, and equipment rental to repair the damaged residence (includes carpeting, cabinetry, appliances, flooring, fixtures, doors, walls, and ceilings)
- Demolition costs related to the damaged home
- Repair or replacement of wells, sewer system including septic tanks, electricity, air conditioning and heating systems, plumbing, and water heaters
- Grading or leveling of property
- Other costs or expenses associated with repairing, stabilizing, or reconstructing the property Tools, Tarps, Building Supplies, Siding, and Paint,

Gap Funding

If the cost to repair, rehabilitate or reconstruct the home exceeds that covered by the benefit, then the homeowner must provide evidence that they have available funds or can obtain funding from an outside source to cover the funding gap

Flood Zone

Assistance provided in a special flood hazard area (defined as zone "A," "V," "M," and "E" series (24 CFR 64 3) as shown on a current Flood Insurance Rate Map (FIRM), as amended by Letters of Map Amendment (LOMA) or Letters of Map Revision (LOMR) will be in the form of a grant, but the homeowner will be required to carry flood insurance in perpetuity on the property

Subrogation of Insurance
To receive assistance under this funding activity, the owner must subrogate claims for unpaid and outstanding insurance claims designated as structure related claims to the Program

Appeals
Applicants seeking to appeal a Program determination may access the appropriate level of the Appeals process as detailed in the GCHAP policies and Procedures Manual

Construction Management and Oversight

The GCLAP will

- Prepare a Construction Estimate for Damaged Properties, including the initial inspection, contractor selection and eligible construction activities
- Provide construction management services for the rehabilitation of damaged properties, including contracting with rehabilitation contractors, construction management, initial inspections, progress inspections and final inspections
- The GCLAP will provide Construction Oversight services for reconstruction of damaged properties, including up to four inspections per reconstructed house Contracting with reconstruction contractors will be between Galveston County, the contractors and the applicant/owner

Contractor Bid and Selection
A pool of rehabilitation contractors will be developed utilizing a Request for Qualifications (RFQ) process developed by the GCLAP For each house requiring rehabilitation a Rehabilitation Contractor will be assigned by the GCLAP from the pool to submit a bid based on a Construction Work Order Packet Bids will be evaluated by the GCLAP as to acceptability and cost within the cap

A pool of Reconstruction Contractors will be developed utilizing a Request for Proposals (RFP) process developed by the GCLAP. Contractors will submit unit prices to demolish an existing home, build a new home, provide all related appurtenances to complete the new construction and obtain a certificate of occupancy or equivalent by meeting all applicable codes

Eligible Construction Activities
Eligible Construction activities are detailed in the GCHAP Program policy and Procedures Manual These include, but are not limited to the following items as shown in ranked order of priority

- Mandatory work items

- Modification to increase accessibility
- Items to address threats to health and safety
- Storm weatherization and mitigation for future storm events
- Code deficiencies other than threats to health and safety or that are incipient code violations, such as major systems in danger of failure
- Items related to conservation of water or energy
- General non-luxury property improvements necessary to put the property in a generally good and readily maintainable condition

Ineligible Construction Activities

- Additions to an existing structure unless necessary to meet housing and building codes or occupancy standards
- Purchase of tools or equipment
- Purchase of washer, dryers or removable air conditioning/heating units not attached to the dwelling structure

Qualified Contractor Pool

The GCLAP will form separate rehabilitation and reconstruction pools of contractors capable of construction under the scope of work

Contractors must demonstrate the following

- Ability to meet insurance and/or bonding requirements
- Experience in similar projects of the magnitude projected for the GCLAP
- Past performance on similar projects with references
- Required registration and certifications; and
- Other GCLAP defined criteria

The Signing Event Process

The Signing Event Agent is responsible for the coordination, scheduling, and involvement of all the parties in the signing event transaction, including Galveston County, the contractor and homeowners and to ensure that all required documentation is properly prepared At the signing event table, the signing event agent guides all parties through proper and full execution of all documentation and receipt of necessary Gap Funds Following the signing event the signing event agent ensures the proper recordation of documents, receipt of any GAP funds, and the imaging and distribution of the original documents

Marketing

The availability of the Program funds shall be publicized in accordance with Fair Housing Standards and the information made available via a comprehensive marketing program including press releases, public service announcements, and informational pamphlets

Affirmative Marketing Plan – In addition to marketing through widely available media outlets, GCHAP will take additional measures to affirmatively market the CDBG Disaster Recovery Fund program services, as follows

GCLAP will contact and market to the following local organizations that provide unique access for persons who are considered members of a protected class under the Fair Housing Act

GCLAP will advertise with the following media outlets which provide unique access for persons who are considered members of a protected class under the Fair Housing Act including *Ethnic newspapers and/or radio stations*

In addition, GCHAP will take the following measures to make the program accessible to persons who are considered members of a protected class under the Fair Housing Act *Hold informational meetings in buildings that are compliant with the Americans with Disabilities Act (ADA), provide sign language assistance when requested, and provide special assistance for those who are visually impaired when requested*

Documentation of all marketing measures used, including copies of all advertisements and announcements, will be retained by GCLAP and made available to the public upon request

Whenever possible, GCLAP will use the Fair Housing logo in advertising, post Fair Housing posters and related information, and, in general, inform the public of its rights and obligations under Fair Housing regulations

FILES AND RECORDS

GCLAP shall maintain accurate files and records on each applicant All pertinent documentation must be maintained for five years after TDHCA notifies GCLAP that HUD has closed out the Program Such files shall be open for public inspection in accordance with the Texas Public Information Act, and be available at GCLAP's offices.

Project Close-Out GCLAP shall ensure that upon completion of each project, the following closeout forms are submitted to GCLAP/TDHCA·

Appeals and Grievance Process

GCLAP will maintain a documented grievance procedures policy and associated procedure

In order for a complaint to be processed it must be received in writing (includes fax and email) and must include

i The name of the complainant and contact information of the complainant

ii Complaints may be submitted in the following ways

By mail: GCHAP 722 Moody (21st St), 6th Floor, Galveston, Texas 77550

By fax 409-572-2107

Upon receipt of a written complaint, the following steps will occur.

i A control number will be assigned to the complaint

ii A review and/or investigation of the complaint will occur

iii A determination will be made as to which program the complaint refers

iv The findings will be submitted to an individual designated by GCLAP

v A copy of GCLAP policies and procedures relating to investigation and resolution will be provided to the complainant and to each person who is subject of the complaint.

vi The complainant will be notified of the resolution within fifteen (15) business days after the complaint was received

vii If the applicant is not satisfied with the response to GCHAP findings, they may make an appeal in writing directly to the TDHCA within seven (7) business days after the date of the appealed response, and ultimately to the TDHCA Governing Board

Citizens will be provided with the address, phone numbers, and times for submitting complaints or grievances

The Complaint Tracking System will categorize complaints, track the resolution process. and report on complaint status

Corrective action is implemented, where warranted

GCHAP Employees Not To Be Held Liable

No member, officer, agent, or employee of GCLAP shall be personally liable concerning any matters arising out of or in relation to, the commitment of CDBG Disaster Recovery Fund Program funds with regard to feasibility or viability of the proposed project

Changes, Waivers and/or Conflicts

i The Galveston County Director of Housing shall have the right to change, modify, waive or revoke all or any part of these guidelines in writing by a majority vote taken at an open meeting held by the Housing Director and approved by TDHCA

ii No member of the governing body of GCLAP and no other official, employee, or agent of GCHAP who exercises policy or decision-making functions or

responsibilities in connection with the planning and implementation of this Program shall be eligible for rehabilitation assistance, in accordance with 24 CFR Section 570 489(h), Conflict of Interest

ADDENDUM

Desired changes and/or additions to this program design may be allowed Please cite the section that is to be replaced along with the proposed and/or alternative language Only amendments submitted in this way will be considered for TDHCA approval

APPROVED: _____

Signature Authority

DEFINITION OF ACRONYMS

AMI	Area Median Income
ADA.	Americans with Disabilities Act
BFE	Base Flood Elevation
CBR	Coastal Barrier Resource
CDBG	Community Development Block Grant
DOB	Duplication of Benefits
ECR.	Estimated Cost to Repair
FBO	Faith Based Organizations
FEMA	Federal Emergency Management Association
GCHAP	Galveston County Housing Assistance Program
GCLAP·	Galveston County Landlord Assistance Program
HQS	Housing Quality Standards
HUB	Historically Underutilized Businesses
HUD	US Department of Housing and Urban Development
HVAC	Heating Ventilation and Air Conditioning
IBC	International Business Code
IECC	International Energy Conservation Code
IRC	International Resident Code
MEPS	Mechanical/Electrical/Plumbing Structural
MOD	Method of Distribution
PM.	Project Manager
PSA	Public Service Announcement
RFP	Request for Proposal

RFQ	Request for Qualifications
SBA	Small Business Association
TDHCA	Texas Department of Housing and Community Affairs
UFAS	Uniform Federal Accessibility Standards

AGENDA

ITEM

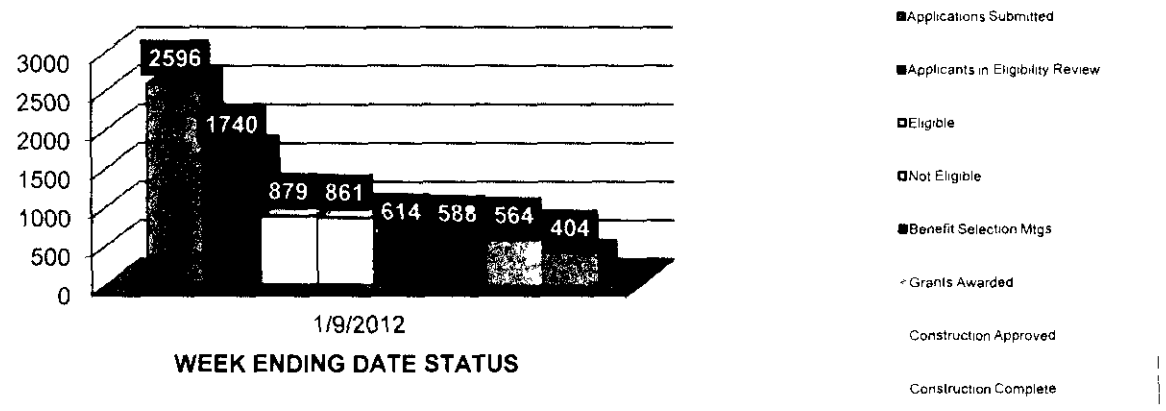
#22c

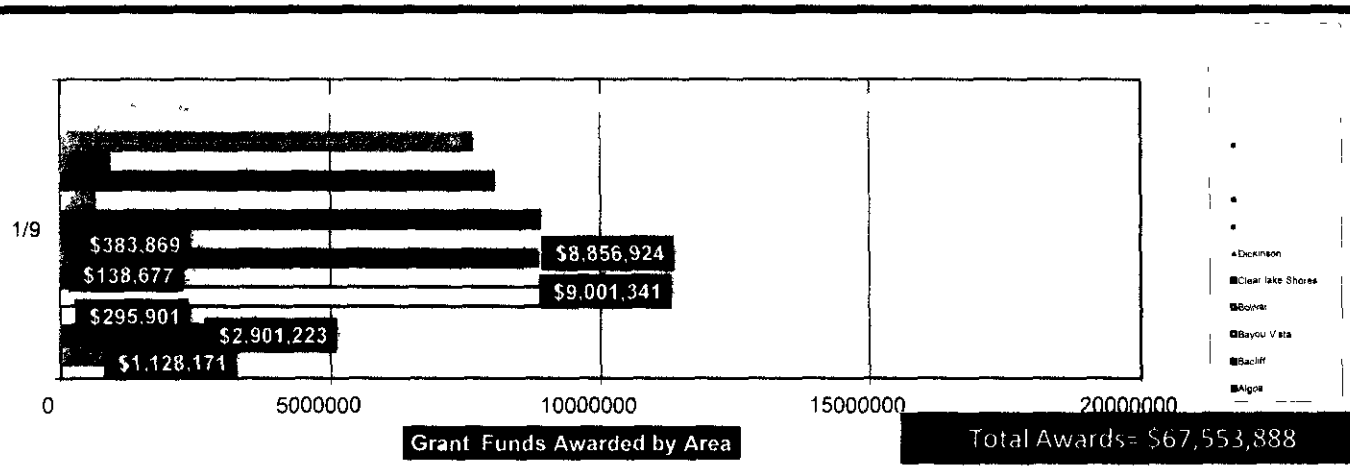
To: **Commissioners Court**
From: Jim Gentile
Galveston County Director of Housing

Date: Monday, January 9, 2012

Subject: Project Status Report – thru Friday Jan 6, 2012

GALVESTON COUNTY HOUSING ASSISTANCE PROGRAM





Accomplishments – Tasks accomplished during the reporting period

2596 applications initiated since Dec 2, 2009

1740 applicants provided required information to be qualified for eligibility review

1740 determinations of ineligibility and eligibility complete (1740=879+861)

879 determined eligible

861 Do not Qualify (DNQ)

0 new files in eligibility/DOB review

921 Environmentals submitted to TDHCA 921 environmental reviews approved.

613 Benefit Selection Meetings completed.

588 grants awarded to date totaling over $67 5 million.

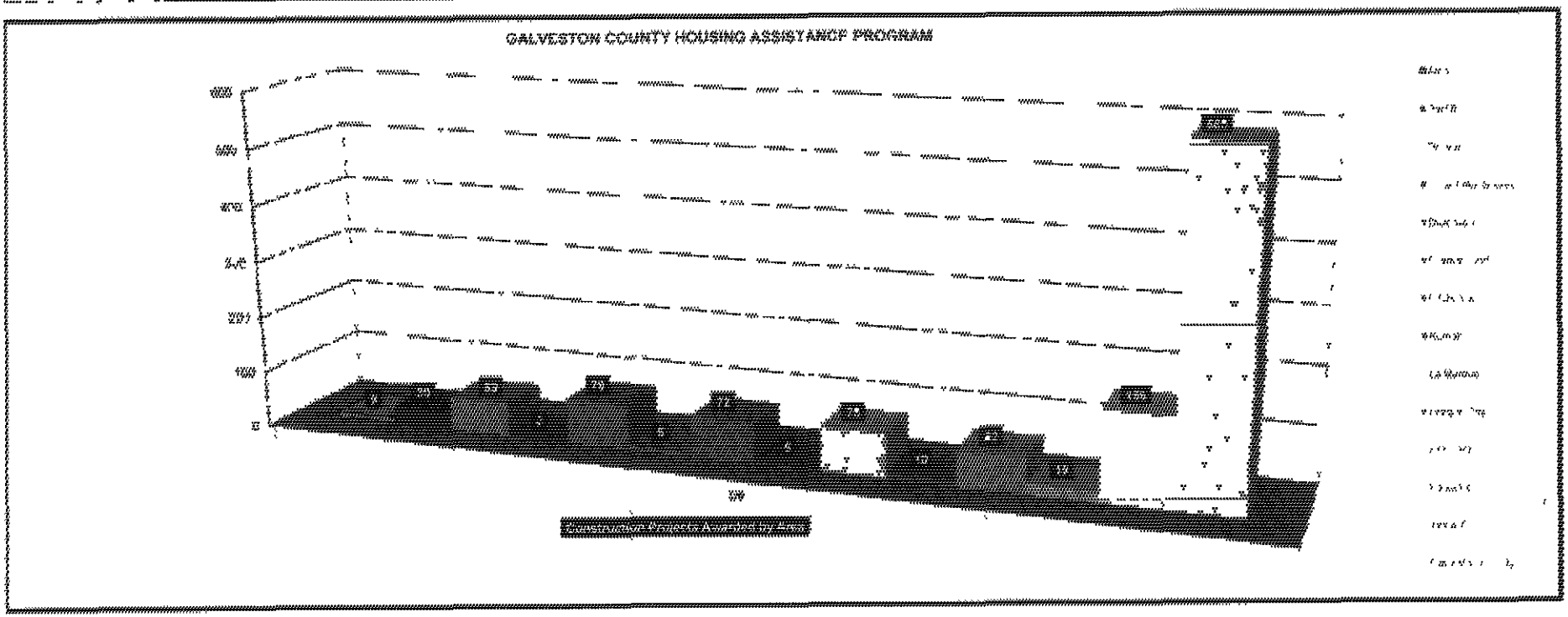
157 homes in construction, 404 homes completed & 5 need final construction paperwork = 566 total homes

404 applicants have keys in hand & 438 homes have a completed final inspection

Over **$67.5 MILLION** in **GRANTS AWARDED** to date

CCHP Percentage Awarded by City

Date	Algoa	Bacliff	Bayou Vista	Bolivar	Clear Lake Shores	Dickinson	Friendswood	Hitchcock	Kemah	La Marque	League City	San Leon	Santa Fe	Texas City	Galveston County	% in construction to complete
1/9/2012	9	39	2	59	2	79	4	72	8	78	18	62	19	156	566	94.1%
1/9/2012	2%	5%	0.3%	10%	0.3%	13%	1%	12%	1%	13%	2%	11%	3%	27%	100%	
Dollars 1/9/12	2%	4%	0.4%	13%	0.2%	12%	1%	13%	1%	12%	1%	11%	3%	24%	100%	96%



GCHAP HOUSING SUMMARY

Date:		January 9, 2012
	Construction Projects with a Notice-to-Proceed(NTP) and building Complete	404(438 finals)
	Construction Projects with a Notice-to-Proceed and building In-Process	126
	Construction Projects with Notice-to-Proceed but not yet started	31
Total Construction projects with Notice-to-Proceed		561
	Projects Approved by TDHCA but Awaiting Bond/Insurance	3
	Projects Awaiting State/TDHCA Approval	2
Total Projects approved with NTP, plus projects approved but awaiting bond/insurance plus projects submitted that are awaiting TDHCA approval		566
	Projects with Builder Assignment and Benefit Selection Meeting in-process, or Benefit Selection Meeting completed, or signing event complete	32
Total projects between the builder assignment stage and construction complete stage		598
	Project pending builder assignment, pending rehab sow, pending rehab bid	4
Total Projects on Construction Pipeline		**602**