

AGTM Engineering, LLC

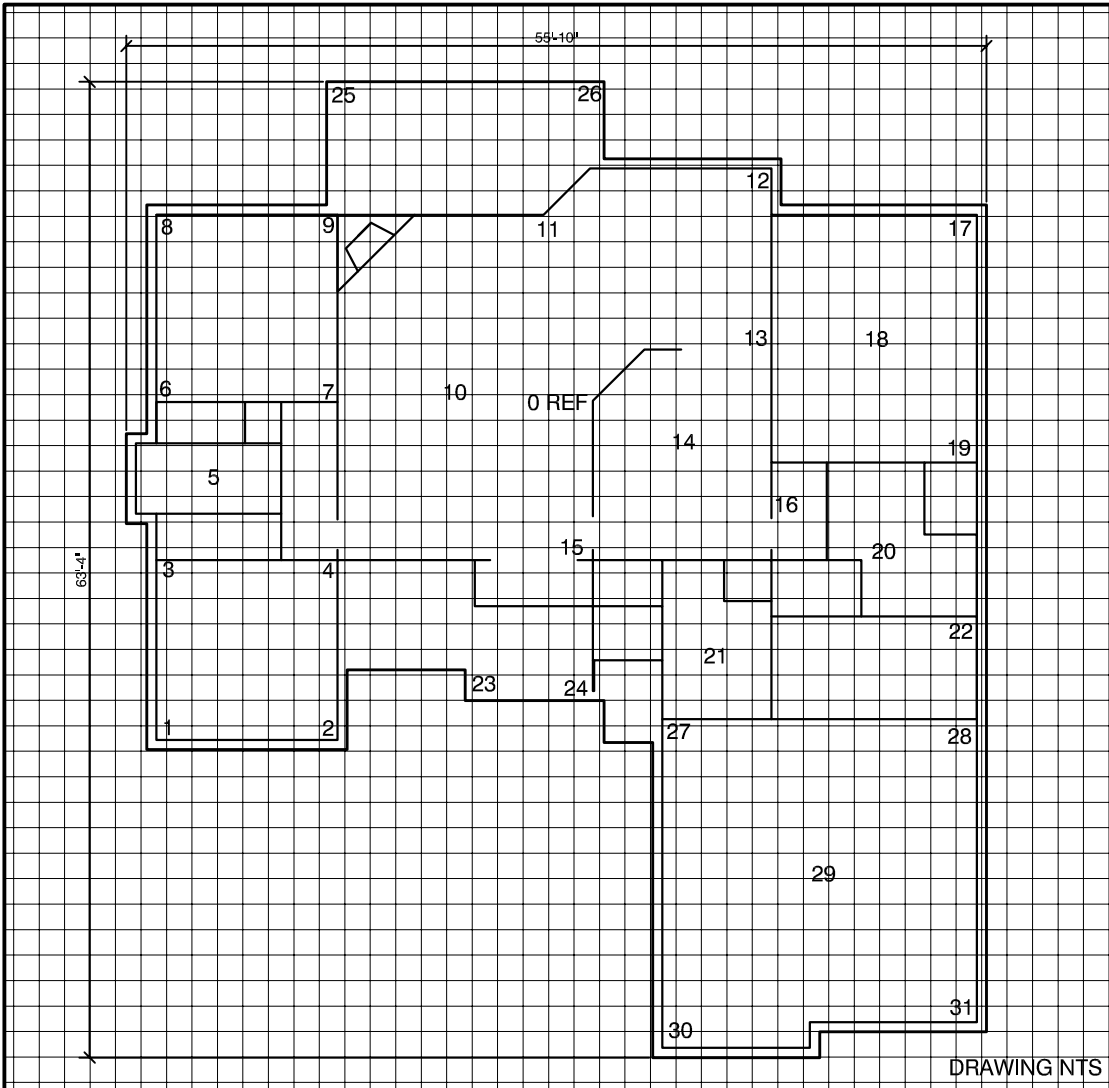
ORIGINAL CONSTRUCTION ELEVATION

401 S. CLAY ST.
ENNIS, TX 75119

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Builder Name: PAT CUMMINGS Contact: (214) 552-6718
 Property Address: 1007 LOUISE LN. Subdivision: CASA LINDA ADDITION
 Lot: 21 Block: 14 City: ENNIS State: TX Builder Warranty I.D. _____



| POINT | ELEV. | POINT | ELEV. |
|-------|-------|---------------------|-------|
| HOUSE | | 19 | 0.0 |
| 0 REF | 0.0 | 20 | 0.0 |
| 1 | 0.1 | 21 | -0.1 |
| 2 | 0.0 | 22 | -0.3 |
| 3 | 0.1 | FRONT PORCH | |
| 4 | -0.4 | DOWN STEP 2.2 | |
| 5 | 0.0 | 23 | -4.3 |
| 6 | 0.1 | 24 | -4.2 |
| 7 | 0.2 | BACK PORCH | |
| 8 | 0.2 | DOWN STEP 2.7 | |
| 9 | 0.0 | 25 | -3.8 |
| 10 | -0.1 | 26 | -3.8 |
| 11 | 0.0 | GARAGE | |
| 12 | -0.2 | DOWN STEP 0.5 | |
| 13 | -0.1 | 27 | -0.9 |
| 14 | -0.1 | 28 | -1.0 |
| 15 | -0.6 | 29 | -0.8 |
| 16 | -0.2 | 30 | -0.2 |
| 17 | -0.1 | 31 | -0.5 |
| 18 | 0.0 | Area = 2443 Sq. Ft. | |

Survey Instrument
 Claibration Date: JUN-07
 Serial No.: 15235

Construcion Status:
 Frame Sheetrock
 Flooring Final

Field Notes: _____

All elevation measurements are relative to the reference "0 REF".
 All measurements are normalized to a "Top of Slab" flat plain.
 Habitable areas of the Home are level to +/-0.75 inches
 Habitable areas of the Home are more than +/-0.75 inches out of level

Certification I certify that I have personally and physically measured the above structure to the best of my knowledge and ability, that I have no interest, present, or prospective in the same and that I have reported all conditions as observed. This evaluation does not constitute any type of guarantee or warranty on the structure.

The above foundation elevation survey is the original as built conditions of the levelness of the foundation and establishes the reference from which future foundation movements will be compared to. This survey is to be maintained as "a master original" by the builder. Any future foundation movements will be compared to this master to determine deviation compliance.

This survey is performed in accordance with the requirements as set forth by the *Texas Residential Construction Commission*.



Inspector Name (Printed) _____ Signature _____ Date _____ OCE0308024
 AGTM Engineering Job Code