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| **CITY OF JERSEY VILLAGE, TEXAS** 16501 Jersey Drive, Jersey Village, TX 77040 713-466-2100 (office) 713-466-2177 (fax) |



City of Jersey Village, TX

Residential Home Elevation Questionnaire

Owners Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
(must match Harris County Property Tax Records)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Foundation Type (Circle one) crawl space Slab on Grade  
Elevated on Piers, Piles Posts or Columns Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many stories is your house:\_\_\_\_\_\_\_\_ Is the home a rental home: \_\_\_\_\_\_\_\_\_

How many people live in your home: \_\_\_\_\_ How many of those people work:\_\_\_\_\_\_

Is there a reason to suspect hazardous and/or toxic material contaminants on the property? Yes or No

Checklist of Required Documents:

* Proof of current NFIP Flood Insurance Coverage
* Color photos of each side of the house
* Elevation Certificate
* FEMA Flood Loss History
* FEMA Declaration and Release
* Acknowledgement of Conditions for Mitigation of a Property in a SFHA with FEMA Grant Funds

Please return this form, **along with a copy of your elevation certificate, photos of each side of your home including the foundation, and a copy of your flood loss history.**

You may submit all required information via email (preferred) to Austin Bleess, City Manager, at   
[ableess@jerseyvillagetx.com](mailto:ableess@jerseyvillagetx.com), via mail to City of Jersey Village, Attn: City Manager, 16327 Lakeview Drive, Jersey Village, TX 77040-1999 or via fax to (713) 466-2177.

Please sign below to indicate your interest in participating in this voluntary program. Your signature does not obligate you to participate.

Owner:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_