

FEDERAL EMERGENCY MANAGEMENT AGENCY

NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077

Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME

S & T Royale, Inc.

Policy Number

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.
19803 Unit 402 Gulf Blvd.

Company NAIC Number

CITY
Indian Shores STATE
FL ZIP CODE
33785

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

Lot 11, PALM COVE

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)
ResidentialLATITUDE/LONGITUDE (OPTIONAL)
(#° - #'" - ##.##" or ##.#####°) HORIZONTAL DATUM: SOURCE: GPS (Type):
 NAD 1927 NAD 1983 USGS Quad Map Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER		B2. COUNTY NAME		B3. STATE	
Indian Shores 125118		Pinellas		Florida	
B4. MAP AND PANEL NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
125118 0001	C	3/2/83	3/2/83	A 11	10.0'

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

 FIS Profile FIRM Community Determined Other (Describe): _____B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): _____B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
Designation Date: _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

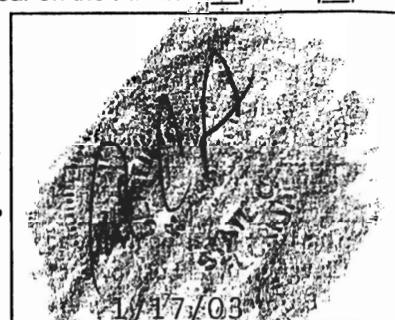
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 7 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO
Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.Datum NGVD 1929 Conversion/Comments _____Elevation reference mark used Narrow A Does the elevation reference mark used appear on the FIRM? Yes No

a) Top of bottom floor (including basement or enclosure) 6. 5 ft.(m)
 b) Top of next higher floor 16. 1 ft.(m)
 c) Bottom of lowest horizontal structural member (V zones only) N/A ft.(m)
 d) Attached garage (top of slab) 6. 2 ft.(m)
 e) Lowest elevation of machinery and/or equipment servicing the building 11. 7 ft.(m)
 f) Lowest adjacent grade (LAG) 5. 1 ft.(m)
 g) Highest adjacent grade (HAG) 6. 2 ft.(m)
 h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 40
 i) Total area of all permanent openings (flood vents) in C3h 1037 sq. in. (sq. cm)

License Number, Embossed Seal
Signature, and Date

1/17/03

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.

I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.

I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME

Edward C. Elliott

LICENSE NUMBER

3983

TITLE

Professional Surveyor & Mapper

COMPANY NAME

Overbeck & Elliott, Inc.

ADDRESS

3089 Roosevelt Blvd.

CITY

Clearwater

STATE

FL

ZIP CODE

33760

SIGNATURE

DATE

1/17/03

TELEPHONE

(727) 524-9666