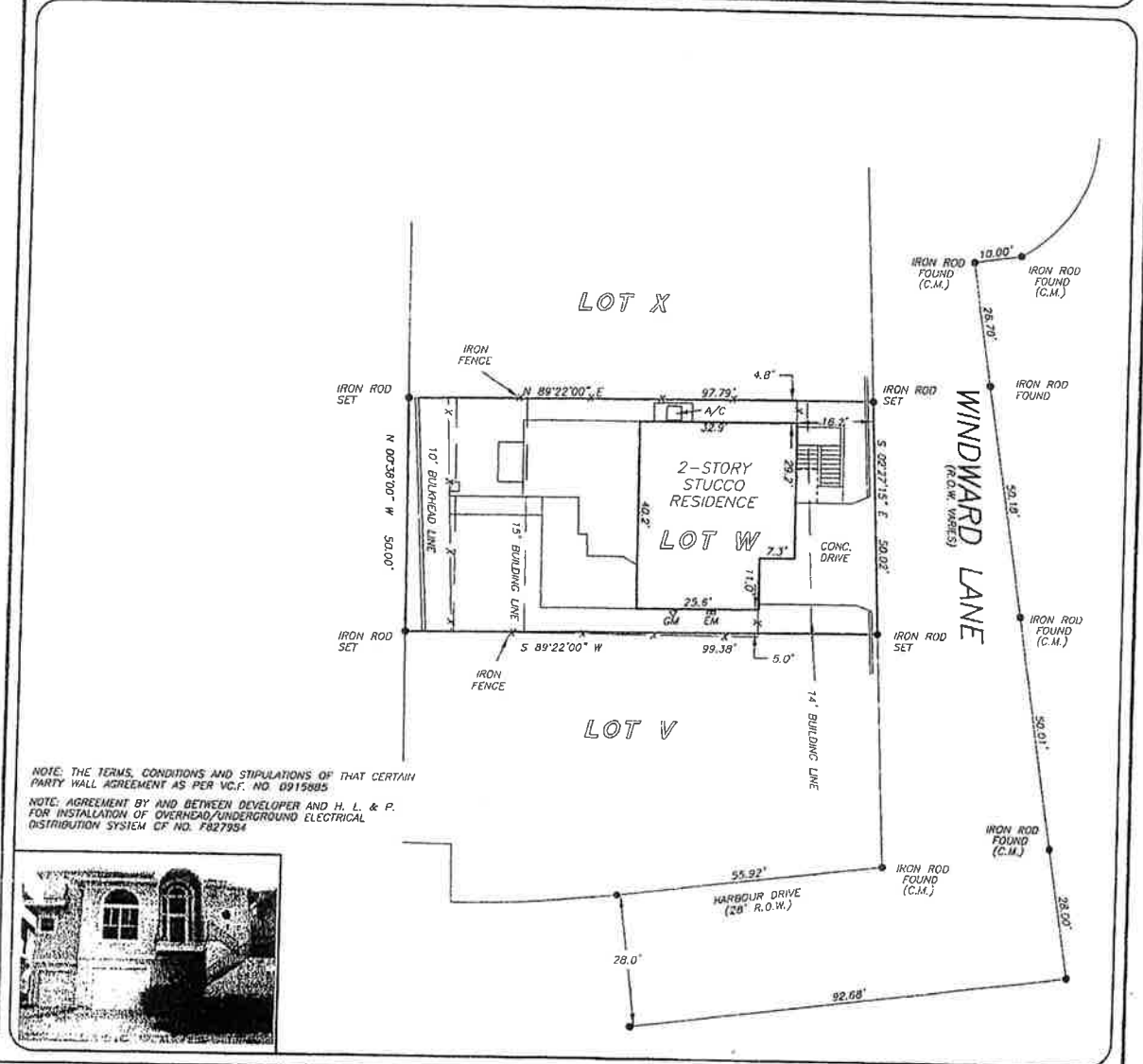


ADDRESS: 18822 WINDWARD LANE
NASSAU BAY, TEXAS 77058
BORROR: RICHARD A. CRONER AND
JANICE L. TRINKLEIN

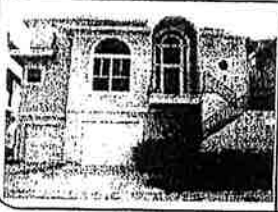
SCALE: 1" = 30'

LOT W REPLAT OF HARBOUR MARTINIQUE

ACCORDING TO THE MAP OR PLAT THEREOF RECORDED
IN VOLUME 203, PAGE 136 OF THE MAP RECORDS
OF HARRIS COUNTY, TEXAS



NOTE: THE TERMS, CONDITIONS AND STIPULATIONS OF THAT CERTAIN PARTY WALL AGREEMENT AS PER V.C.F. NO. D915885
NOTE: AGREEMENT BY AND BETWEEN DEVELOPER AND H. L. & P. FOR INSTALLATION OF OVERHEAD/UNDERGROUND ELECTRICAL DISTRIBUTION SYSTEM OF NO. F827994



THIS PROPERTY LIES WITHIN THE
100 YEAR FLOOD PLAIN AS PER FIRM
PANEL NO. 49201C 1090 K
MAP REVISION: 04-20-2000
ZONE: "AE"
BASED ONLY ON VISUAL EXAMINATION OF MAPS.
INACCURACIES OF FEMA MAPS PREVENT EXACT
DETERMINATION WITHOUT DETAILED FIELD STUDY

A SUBSURFACE INVESTIGATION
WAS BEYOND THE SCOPE OF THIS SURVEY

RECORD BEARING, VOL. 203, PG. 136, H.C.M.R.

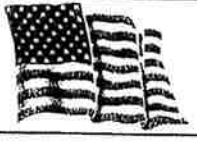
I HEREBY CERTIFY THAT THIS SURVEY WAS MADE
ON THE GROUND, THAT THIS PLAT CORRECTLY
REPRESENTS THE FACTS FOUND AT THE
TIME OF SURVEY AND THAT THERE ARE NO
ENCROACHMENTS APPARENT ON THE GROUND,
EXCEPT AS SHOWN HEREON. THIS SURVEY IS
CERTIFIED FOR THIS TRANSACTION ONLY AND
ABSTRACTING PROVIDED IN THE ABOVE
REFERENCED TITLE COMMITMENT WAS RELIED
UPON IN PREPARATION OF THIS SURVEY.

MAARTEN DE WAAL
PROFESSIONAL LAND SURVEYOR
NO. 5112
JOB NO. 06-08022
JULY 18, 2006



Chicago Title
Insurance Company

DANIELLE PARKS
281-280-8383



PRECISION SURVEYORS, INC.

1-800-LANDSURVEY 281-496-1586
1-800-525-3787 FAX 281-496-1867
14925 MEMORIAL DRIVE SUITE 8100 HOUSTON, TEXAS 77079

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

| SECTION A - PROPERTY OWNER INFORMATION | | | For Insurance Company Use: |
|---|-------------|--|----------------------------|
| BUILDING OWNER'S NAME Richard A. Croner and Janice L. Trinklein | | Policy Number | |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 18822 Windward Lane | | Company NAIC Number | |
| CITY Houston | STATE Tx | ZIP CODE 77058 | |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot W, Replat of Harbour Martinique | | | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential | | | |
| LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.###" or ###.#####" NA | | HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 | |
| | | SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____ | |

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| | | | | | |
|---|-----------------|---------------------------------|---|-------------------------|--|
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER City of Nassau Bay 485491 | | B2. COUNTY NAME Harris | | B3. STATE Texas | |
| B4. MAP AND PANEL NUMBER 48201 C 1090 | B5. SUFFIX K | B6. FIRM INDEX DATE 04-20-00 | B7. FIRM PANEL EFFECTIVE/REVISED DATE 04-20-00 | B8. FLOOD ZONE(S) AE | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) EL 12 |

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): _____
 NAVD 1988 Other (Describe): _____

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929

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)

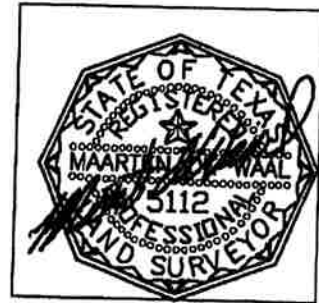
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

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 C3.-a-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 1929 Conversion/Comments 1973 Adj.
 Elevation reference mark used 43 Does the elevation reference mark used appear on the FIRM? Yes No

| | |
|---|---------------------|
| <input type="checkbox"/> a) Top of bottom floor (including basement or enclosure) | <u>17. 2</u> ft.(m) |
| <input type="checkbox"/> b) Top of next higher floor | <u>NA.</u> ft.(m) |
| <input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only) | <u>NA.</u> ft.(m) |
| <input type="checkbox"/> d) Attached garage (top of slab) | <u>6. 1</u> ft.(m) |
| <input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) | <u>17. 1</u> ft.(m) |
| <input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG) | <u>5. 9</u> ft.(m) |
| <input type="checkbox"/> g) Highest adjacent (finished) grade (HAG) | <u>6. 0</u> ft.(m) |
| <input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade <u>NA</u> | |
| <input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h <u>NA</u> sq. in. (sq. cm) | |

License Number, Embossed Seal, Signature, and Date



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 Maarten de Waal | LICENSE NUMBER 5112 | | |
| TITLE | COMPANY NAME Precision Surveyors, Inc. | | |
| ADDRESS 14925 Memorial Drive Suite B100 | CITY Houston | STATE Tx | ZIP CODE 77079 |
| SIGNATURE | DATE 07-17-06 | TELEPHONE 281-496-1586 | |

Copy the corresponding information from Section A.

| | | | |
|--|-------------|-------------------|----------------------------|
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 18822 Wjndward Lane | | | For Insurance Company Use: |
| CITY Houston | STATE Tx | ZIP CODE 77058 | Policy Number |
| | | | Company NAIC Number |

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS
C3e = A/C pad

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

Check here if attachments

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number __ (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.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?
 Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

| | | | |
|-----------|------|-----------|----------|
| ADDRESS | CITY | STATE | ZIP CODE |
| SIGNATURE | DATE | TELEPHONE | |
| COMMENTS | | | |

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

Check here if attachments

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

| | | |
|-------------------|------------------------|---|
| G4. PERMIT NUMBER | G5. DATE PERMIT ISSUED | G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED |
|-------------------|------------------------|---|

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____
_____ ft.(m) Datum: _____

| | |
|-----------------------|-----------|
| LOCAL OFFICIAL'S NAME | TITLE |
| COMMUNITY NAME | TELEPHONE |
| SIGNATURE | DATE |
| COMMENTS | |

Check here if attachments