

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

For Insurance Company Use:

A1. Building Owner's Name 21st Century Oncology

Policy Number

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
3426 N. Roosevelt Blvd.

Company NAIC Number

City Key West State FL ZIP Code 33040

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
RE: 00065590-000100

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Non-Residential

A5. Latitude/Longitude: Lat. 24.5717 N Long. 81.7613 W

Horizontal Datum: NAD 1927 NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 8

A8. For a building with a crawl space or enclosure(s), provide

A9. For a building with an attached garage, provide:

- a) Square footage of crawl space or enclosure(s) 2601+/- sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 1
c) Total net area of flood openings in A8.b 1127+/- sq in

- a) Square footage of attached garage NA sq ft
b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade NA
c) Total net area of flood openings in A9.b NA sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number
City of Key West 120168

B2. County Name
Monroe

B3. State
FL

B4. Map/Panel Number
12087C 1509

B5. Suffix
K

B6. FIRM Index Date
2/18/05

B7. FIRM Panel Effective/Revised Date
2/18/05

B8. Flood Zone(s)
AE

B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
10

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

- FIS Profile FIRM Community Determined Other (Describe) _____

B11. Indicate elevation datum used for BFE in Item 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 _____ CBRS OPA

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. 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 C2.a-g below according to the building diagram specified in Item A7.

Benchmark Utilized local Vertical Datum 1929

Conversion/Comments _____

Check the measurement used.

- a) Top of bottom floor (including basement, crawl space, or enclosure floor) 5.9 feet meters (Puerto Rico only)
b) Top of the next higher floor 10.0 feet meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) NA feet meters (Puerto Rico only)
d) Attached garage (top of slab) NA feet meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) 10.0 feet meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG) 5.9 feet meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG) 7.8 feet meters (Puerto Rico only)

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 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.

Check here if comments are provided on back of form.

Certifier's Name J. Lynn O'Flynn

License Number 6298

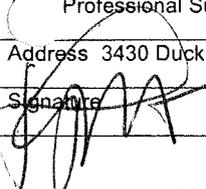
Professional Surveyor & Mapper

Company Name J. Lynn O'Flynn, Inc.

Address 3430 Duck Avenue

City Key West

State FL ZIP Code 33040

Signature 

Date 8/22/06

Telephone (305) 296-7422

PLACE
SEAL
HERE