

05-314

**ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>			For Insurance Company Use:
BUILDING OWNER'S NAME JEFFREY FROST, BUILDER			Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 836 NORTH STREET			Company NAIC Number
CITY OCEAN CITY	STATE NJ	ZIP CODE 08226	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 15.02 BLOCK 4			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL			
LATITUDE/LONGITUDE (OPTIONAL) ( ##° - ##' - ###.###" or ###.#####")		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 345310 OCEAN CITY		B2. COUNTY NAME CAPE MAY	B3. STATE NEW JERSEY
B4. MAP AND PANEL NUMBER 345310-0001	B5. SUFFIX C	B6. FIRM INDEX DATE 7-15-92	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9-5-84
B8. FLOOD ZONE(S) A-7		B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 9 FT	

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 1 (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 SAME Conversion/Comments NONE  
 Elevation reference mark used PRVT Does the elevation reference mark used appear on the FIRM?  Yes  No

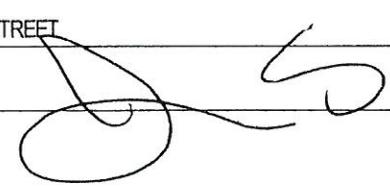
- o a) Top of bottom floor (including basement or enclosure) 10. 4 ft.(m)
- o b) Top of next higher floor 19. 4 ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) NA. ft.(m)
- o d) Attached garage (top of slab) 10. 3 ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 10. 21 ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 10. 0 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 10. 3 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA
- o i) Total area of all permanent openings (flood vents) in C3.h NA sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

GS 33536  
6/22/06

**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 JAMES E. SCHWAB III		LICENSE NUMBER GS 33,536	
TITLE LAND SURVEYOR	COMPANY NAME SCHWAB LAND SURVEYING AND PLANNING, LLC		
ADDRESS 8 EAST 10TH STREET	CITY OCEAN CITY	STATE NJ	ZIP CODE 08226
SIGNATURE 	DATE <u>6/22/06</u>	TELEPHONE 609-398-0565	

CITY OF OCEAN CITY  
CODE ENFORCEMENT

**NORTH STREET**

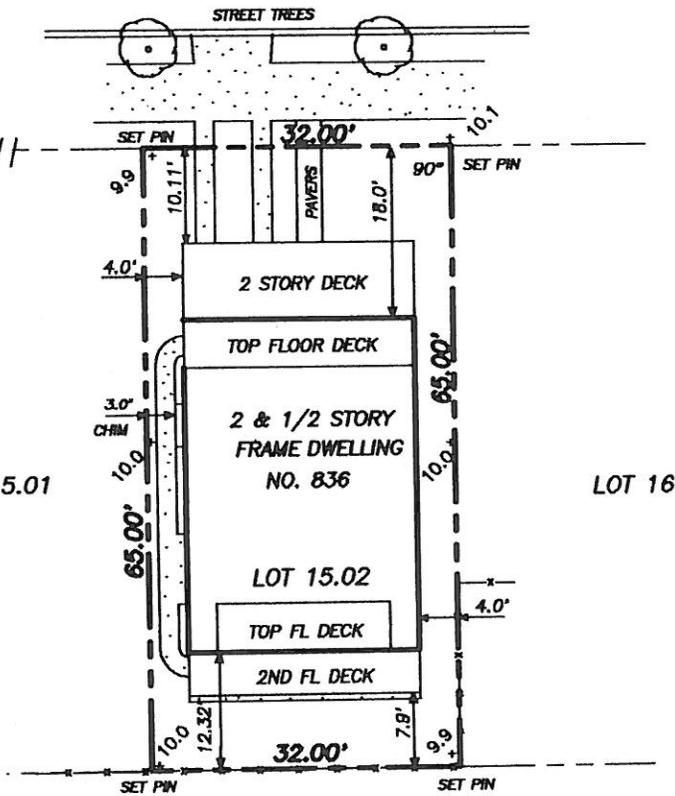
(60' WIDE)

2006 JUN 22 A 10:13

**ATLANTIC AVENUE**  
(70' WIDE)

LOT 15.01

LOT 16



+X.X= NGVD 1929 ELEVATION

**COVERAGE AND HEIGHT**

LOT AREA— 2,080 SF.
BUILDING AREA— 832 SF, 40.0%
3RD FLOOR AREA— 428 SF, 51.4% OF 2ND FLOOR AREA
IMPERVIOUS AREA— 1,315 SF, 63.2%
CENTERLINE ELEVATION— 9.99 FT.
PEAK ELEVATION— 37.9 FT.
BUILDING HEIGHT— 27.9 FT.

ISSUED TO:

JEFFREY FROST, BUILDER

**FINAL CONSTRUCTION SURVEY**

NOT FOR CONVEYANCE

**LOT 15.02 BLOCK 4  
CITY OF OCEAN CITY  
CAPE MAY COUNTY, NJ**

DATE: JUNE 6, 2006 SCALE: 1"= 20' DWN. BY: JES

THIS SURVEY IS FOR USE IN APPLYING  
FOR MUNICIPAL APPROVAL OF NEW  
CONSTRUCTION. THE SURVEYOR WILL NOT  
ACCEPT RESPONSIBILITY FOR ITS USE  
FOR ANY OTHER PURPOSE.

*[Signature]*  
**JAMES E SCHWAB III**  
PROFESSIONAL LAND SURVEYOR  
NEW JERSEY LICENSE NUMBER 33,536

**SCHWAB LAND SURVEYING  
AND PLANNING, LLC.**  
8 EAST 10TH STREET  
OCEAN CITY, NEW JERSEY 08226  
TELE 609-398-0565 FAX 398-1861  
CERTIFICATE OF AUTHORIZATION NO. 24GA28101600  
FILE: 05-314 FIELD BOOK: *nnn*

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 836 NORTH STREET			Policy Number
CITY OCEAN CITY	STATE NJ	ZIP CODE 08226	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  
C3A IS FIRST FLOOR SLAB, C3B IS SECOND FLOOR, C3E IS REAR HVAC UNIT.

Check here if attachments

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

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			

Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

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 2005-1793	G5. DATE PERMIT ISSUED 1/18/05	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 6/29/06
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- G7. This permit has been issued for:  New Construction  Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

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

Check here if attachments