

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME DOUGHERTY AND JOHNSON, BUILDERS		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 29 ASBURY AVENUE		Company NAIC Number
CITY OCEAN CITY	STATE NJ	ZIP CODE 08226
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 9 BLOCK 10		
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.

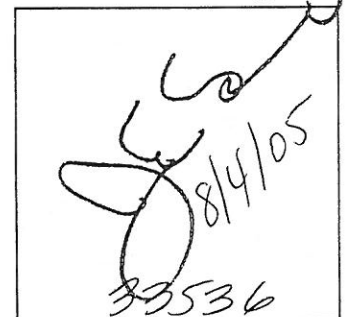
C2. Building Diagram Number 6 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

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 NONEElevation reference mark used PRVT Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

- | | |
|---|-----------------|
| <input type="checkbox"/> a) Top of bottom floor (including basement or enclosure) | 8. 0 ft.(m) |
| <input type="checkbox"/> b) Top of next higher floor | 13. 1 ft.(m) |
| <input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only) | NA. ____ ft.(m) |
| <input type="checkbox"/> d) Attached garage (top of slab) | 8. 3 ft.(m) |
| <input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) | 11. 3 ft.(m) |
| <input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG) | 7. 4 ft.(m) |
| <input type="checkbox"/> g) Highest adjacent (finished) grade (HAG) | 7. 9 ft.(m) |
| <input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade <u>13</u> | |
| <input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h <u>2,808</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 JAMES E. SCHWAB III		LICENSE NUMBER 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 8/4/05	TELEPHONE 609-398-0565	

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 29 ASBURY AVENUE			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 CRAWL SPACE AT GARAGE ENTRANCE. C3b IS FIRST FLOOR. C3e IS HVAC.
C3i IS GROSS VENT AREA. SIX VENTS ARE LOCATED IN THE GARAGE WITH A GROSS VENT AREA OF 1,296 SQ. IN. ONE VENT IS LOCATED IN THE STORAGE/AIR HANDLER ROOM WITH A GROSS VENT AREA OF 216 SQ. IN.

BUILDING FOUNDATION AREA IS 1,150 SQ. FT. ☐ 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			

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 0386 / 20050387	G5. DATE PERMIT ISSUED 2/25/05	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 8/8/05
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

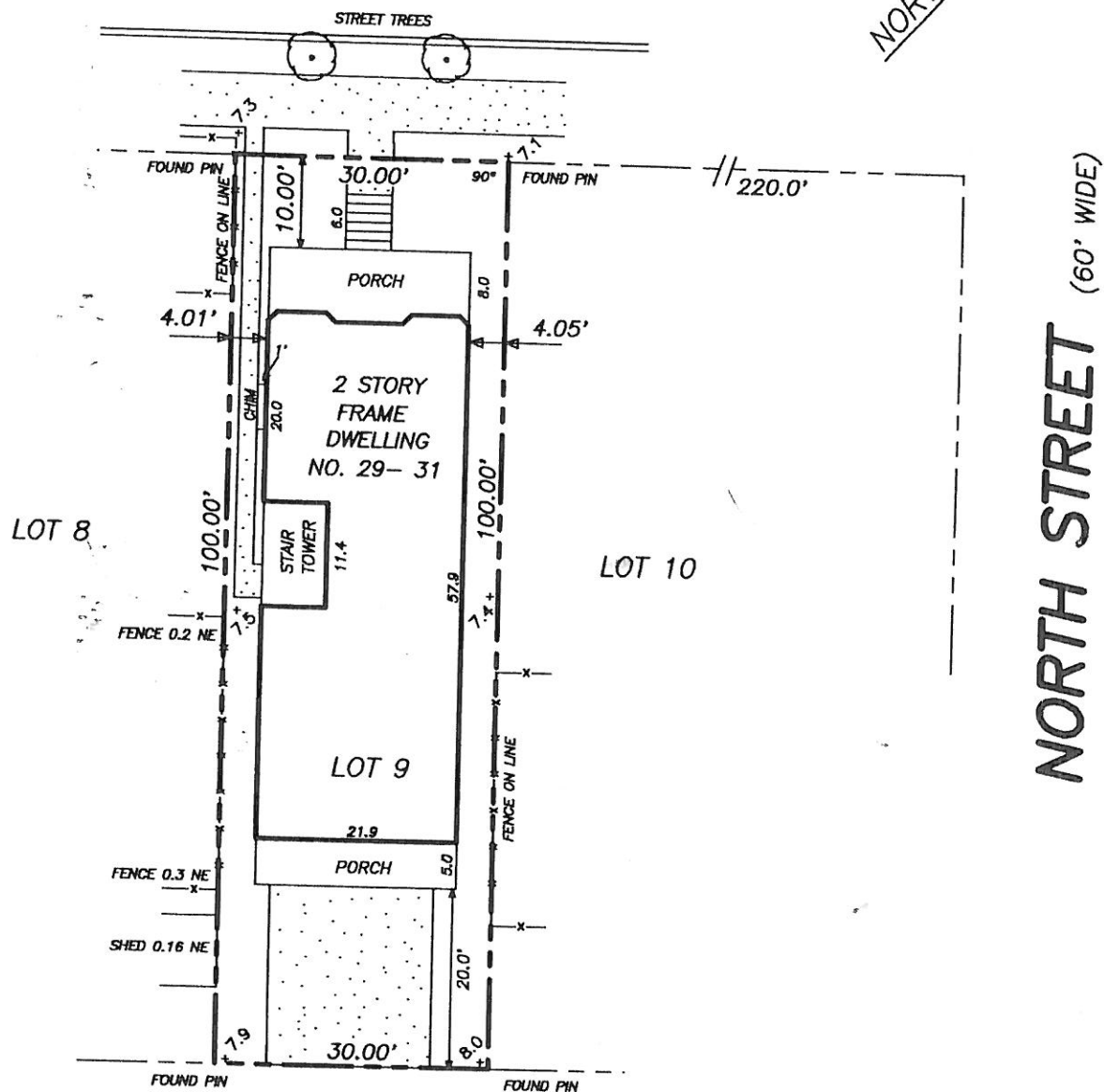
G8. Elevation of as-built lowest floor (including basement) of the building is: ___ ft.(m) Datum: ___

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	

ASBURY AVENUE (65' WIDE)

NORTH



15 FEET WIDE PUBLIC ALLEY

+ X.X= EXISTING NGVD 1929 ELEVATION

ISSUED TO:

DOUGHERTY AND JOHNSON, BLDRS.

COVERAGE AND HEIGHT

LOT AREA- 3,000 SF
BUILDING AREA- 1,185 SF., 39.5%
IMPERVIOUS AREA- 2,047 SQ.FT., 68.2%
CENTERLINE ELEVATION- 7.61 FT.
PEAK ELEVATION- 39.13 FT.
BUILDING HEIGHT- 31.5 FT.

FINAL
CONSTRUCTION SURVEY

LOT 9 BLOCK 10
CITY OF OCEAN CITY
CAPE MAY COUNTY, NJ

DATE: AUG. 3, 2005 SCALE: 1"= 20' DWN. BY: JES

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: 05-071

FIELD BOOK: ~~~

[Signature] 8/4/05
JAMES E SCHWAB III
PROFESSIONAL LAND SURVEYOR
NEW JERSEY LICENSE NUMBER 33,536