

FEDERAL EMERGENCY MANAGEMENT AGENCY  
 NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077  
 Expires December 31, 2004

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION				For Insurance Company Use:	
BUILDING OWNER'S NAME 46 ASBURY AVENUE				Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 46 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 22.02 block 11					
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		B2. COUNTY NAME		B3. STATE	
B4. MAP AND PANEL NUMBER 345310 0001	B5. SUFFIX C	B6. FIRM INDEX DATE 7/15/92	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9-5-94	B8. FLOOD ZONE(S) A-7	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 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 (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, ARIA, ARIAE, ARIA/A1-A30, ARIA/AH, ARIA/O  
 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 \_\_\_\_\_

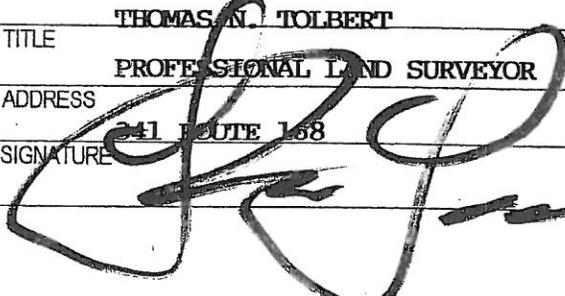
Elevation reference mark used \_\_\_\_\_ Does the elevation reference mark used appear on the FIRM?  Yes  No

- o a) Top of bottom floor (including basement or enclosure) 7.8 ft.(m)
- o b) Top of next higher floor 11.0 ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) N/A ft.(m)
- o d) Attached garage (top of slab) 8.2 ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 11.0 ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 7.7 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 8.0 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 13
- o i) Total area of all permanent openings (flood vents) in C3.h 264 sq. in. (sq. cm)

License Number, Signature, and Date  
  
 9.1.03  
 THOMAS N. TOLBERT  
 NJ LIC. 38608

**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 THOMAS N. TOLBERT		LICENSE NUMBER 38608	
TITLE PROFESSIONAL LAND SURVEYOR	COMPANY NAME DESIGN LAND SURVEYING		
ADDRESS 241 ROUTE 168	CITY TURNERSVILLE	STATE NJ	ZIP CODE 08012
SIGNATURE 	DATE 9.1.03	TELEPHONE 856-374-1134	

REV: 10-24-03  
 11-05-03

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. 46 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

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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 E3. 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 8 (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.
- E3. 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, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here.

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

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ADDRESS CITY STATE ZIP CODE

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SIGNATURE DATE TELEPHONE

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COMMENTS

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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 <u>03-1060</u>	G5. DATE PERMIT ISSUED <u>5/29/03</u>	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED <u>11/13/03</u>
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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

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COMMUNITY NAME TELEPHONE

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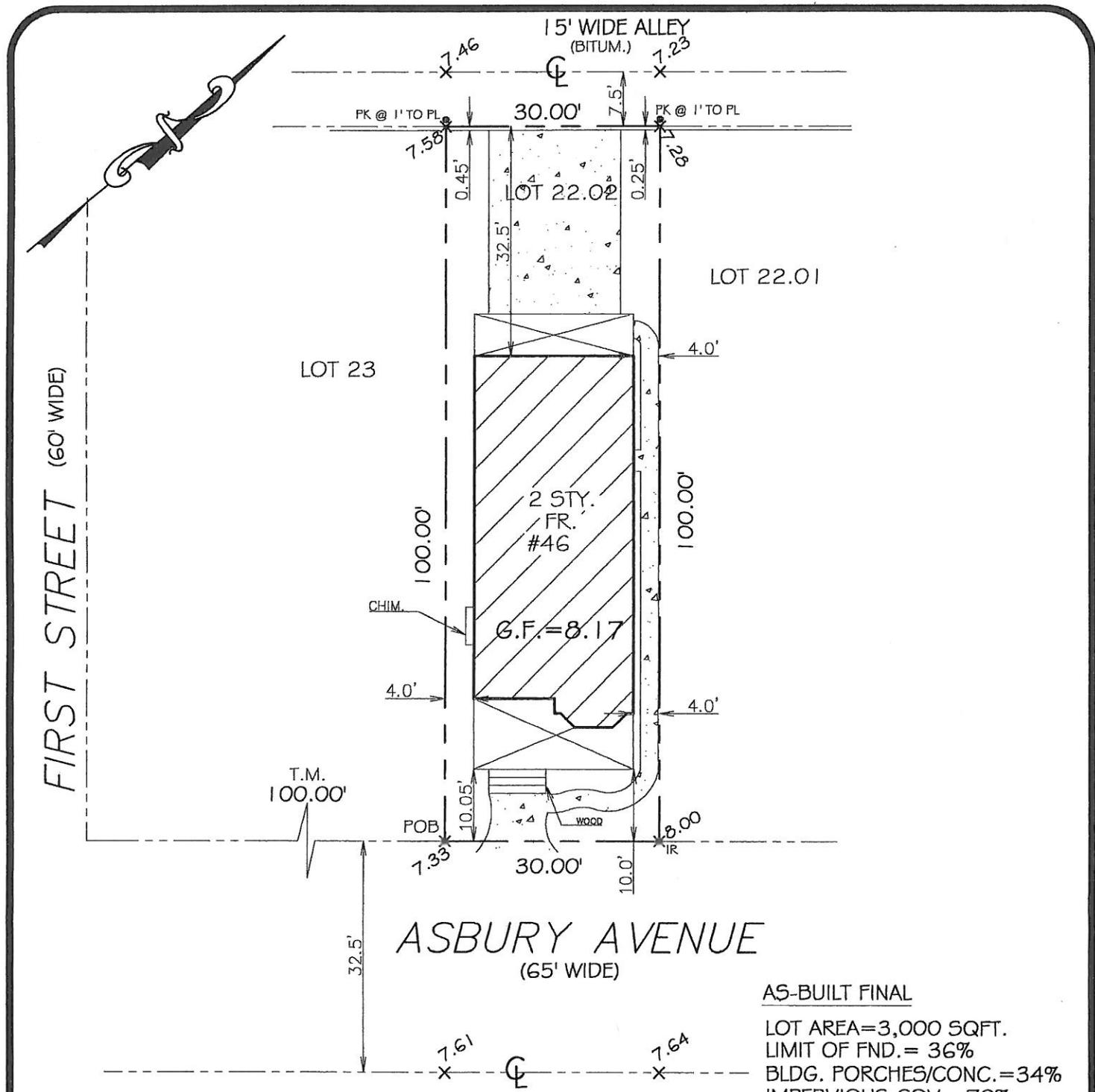
SIGNATURE DATE

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COMMENTS

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Check here if attachments

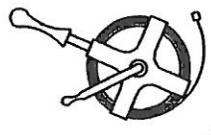


**AS-BUILT FINAL**

LOT AREA=3,000 SQFT.  
 LIMIT OF FND.= 36%  
 BLDG. PORCHES/CONC.=34%  
 IMPERVIOUS COV.=70%  
 ROOF PEAK ELEV=39.84  
 ROAD CENTERLINE ELEV.=7.64  
 (DIFF.=32.20)

- THIS PLAN IS BASED ON TAX MAP INFORMATION ONLY.
- THIS PLAN IS NOT A GUARANTEE OF OWNERSHIP
- BEING LOT 22.02, BLOCK 11, PLATE 10 TAX MAP OF THE CITY OF OCEAN CITY
- SURVEYOR RESERVES THE RIGHT TO REVISE THIS PLAN UPON RECEIPT AND REVIEW OF AN ACCURATE TITLE REPORT AND AN ACCURATE ABSTRACT ON ALL LOTS AFFECTED BY, OR ADJOINING TO, THE PROPERTY IN QUESTION.
- NO ATTEMPT WAS MADE TO LOCATE THE UTILITIES WHICH MAY EXIST ON THIS PROPERTY. PRIOR TO ANY EXCAVATION, CONTRACTOR SHALL BE RESPONSIBLE TO DETERMINE THEIR EXACT LOCATION.
- SUBJECT TO BUILDING REGULATIONS, RESTRICTIONS, EASEMENTS, RIGHTS-OF-WAY, COVENANTS, RESERVATIONS AND AGREEMENTS OF RECORD, IF ANY.

**Design Land Surveying**



341 RTE 168 Turnersville, N.J. 08012  
 Toll Free Phone 1-800-418-9373  
 Phone (856) 374-1134 - Fax (856) 374-1061

MEMBER OF:



DATE	03-21-03	SURVEY NO. 0306008
SCALE	1"=20'	
DRN:	JLG	

<b>SURVEY OF PREMISES</b>	<b>SITUATE IN:</b>
46 ASBURY AVENUE	CITY OF OCEAN CITY CAPE MAY COUNTY NEW JERSEY

- REV: 05-15-03 (HSE. S/O & SURVEY)
- REV: 06-06-03 (PIN FOOTING)
- REV: 08-29-03 (AS-BUILT)
- REV: 10-16-03 (FINAL SURVEY)

TO: SCOTT HALLIDAY

In consideration of the fee paid for making this plan, I hereby declare that the said plan accurately depicts the tax map furnished to me. No responsibility is assumed for (a) the location of easements that may be located below the surface of the lands, or (b) on the surface of the lands, and (c) other interests not visible, or matters of title. This declaration is issued solely to the herein named purchaser for any transaction of record, and within thirty (30) days of its date. The surveyor shall have no responsibility or liability for any reason unless the fee for the preparation of said plan is paid within thirty (30) days of its date. Surveyor's liability for any reason shall not exceed the sum of ONE HUNDRED DOLLARS (100.00)

**THOMAS N. TOLBERT**  
**PROFESSIONAL LAND SURVEYOR**  
 N.J. LIC. GS 38608

