

## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7.
SECTION A - PROPERTY OWNER INFORMATION

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

WO 18993.FF Important: Read

DI III DILLIO	The state of the s	OLUTION A	* PROPERTY OWNER INFO		
BUILDING OWNER'S	VAME		- PROPERTY OWNER INFO	UNIVIATION	For Insurance Company Use:
Steven and Carol I	_ongo				Policy Number
5 Central Road	DRESS (Including	Apt., Unit, Suite, and/or	Bldg. No.) OR P.O. ROUTE A	ND BOX NO	Co
CITY					Company NAIC Number
Ocean City			STATE	ZIP	CODE
PROPERTY DESCRIPT	FION (Lot and Bloc	x Numbers, Tax Parcel N	NJ lumber, Legal Description, etc	082	
BUILDING USE (e.g., R	esidential. Non-res	idential Addition Assess	ory, etc. Use a Comments an		
Residential		Access	ory, etc. Use a Comments an	ea, if necessary.)	
LATITUDE/LONGITUDE ( ##° - ##' - ##.##' or #	(OPTIONAL)	HORIZON	ITAL DATUM:	SOLIBOE: CLOBO	-
( "" "" " <del>"" "" "" "" "" "" "" "" "" "" "</del>	#.#####*)	☐ NAD 1927	☐ NAD 1983	SOURCE: GPS (	
	9	SECTION B. EL COD IN	CUDANCE DATE MADE		Quad Map Other:
B1. NFIP COMMUNITY NAME	& COMMINITY NI IA	ADED.	SURANCE RATE MAP (FIR	RM) INFORMATION	
City of Ocean City 345310			. COUNTY NAME pe May		B3. STATE
B4. MAP AND PANEL		Ca	pe iviay		NJ
NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE	B7. FIRM PANEL		BO BACE EL COD EL EMATIONES
345310 0001	C	7/15/92	EFFECTIVE/REVISED DATE 9/5/84	TOOD LOIVE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
B10. Indicate the source of the	Base Flood Elevati	on (BFF) data or base floor	donth entered in DO	A7	9'MSL
			ined Cothan (D	N 9 N	
B11. Indicate the elevation dat	um used for the BFE	in DO. 17 NOVE 4000		988 Other (Describe):	
b 12. Is the building located in a	a Coastal Barrier Re	sources System (CBRS) an	ed Of Utherwise Protected Area	MODALO DIV. KOLL	Davis
	SEC	TION C - BUILDING ELE	EVATION INFORMATION (S	SIPVEY PEOUIDED	Designation Date
C1. Building elevations are bas	COUNT   COUNTY	TIOU DESMINACE L LO			
A new Elevation Certificat	e will be required wit	On construction -fit I I II	en and the second secon	Finished Construction	
- Danding Diagram Number	1 Select the building	diagram most similar to the	ing is complete. e building for which this certificate		
accurately represents the b	ouilding, provide a sk	(etch or photograph.)	building for writer this certificate	e is being completed - see pa	ages 6 and 7. If no diagram
C3. Elevations – Zones A1-A3(	), AE, AH, A (with RE	E) VE V1 V20 V 4-44- DE	T) 15 1-1		
Complete Items C3a-i bel	ow according to the	building diagram specified in	n Item C2 State the datum used	DU, ARVAH, ARVAO	
Section B, convert the datu	m to that used for th	e BFE. Show field measure	ments and datum conversion as	i. It trie datum is different fron	n the datum used for the BFE in wided or the Comments area of
Section D or Section G, as	appropriate, to docu	ment the datum conversion		iculation. Use the space pro	wided or the Comments area of
Datum NGVD Conversion	/Comments				
Elevation reference mark us		elevation reference mark u	sed appear on the FIRM?	/or MNo	
o a) Top of bottom floor (in	Grading basement of	endosure)	8. 84 ft.(m)	J	
o b) Top of next higher floo	r		9. 15 ft.(m)	Seal	W License # 20509
o c) Bottom of lowest horizon	ontal structural mem	ber (V zones only)	<u>N/A</u> ft.(m)	pe e	
o d) Attached garage (top o	of slab)		8. 84 ft.(m)	Dat	September 30, 2003
o e) Lowest elevation of ma	achinery and/or equip	oment	<u> </u>	License Number, Embossed Seal, Signature, and Date	
servicing the building	(Describe in a Comr	ments area)	9. 15 ft.(m)	er,	400
o f) Lowest adjacent (finishe	ed) grade (LAG)	,	8 . 54 ft.(m)	umi	Mar Whyland
o g) Highest adjacent (finish	ed) grade (HAG)		0.7407	Sig	of the fame
o h) No. of permanent open	ings (flood vents) wi	thin 1 ft. above adjacent gra	de 4	Sense	,
o i) Total area of all perman	ent openings (flood	vents) in C3.h 40.32 sq. in. (	sq. cm)	Ľ.	
	SECT	ION D - SURVEYOR E	MICHEED OF ADOLUTEOT	CERTIFICATION	
This certification is to be sign					
I certify that the information in	n Sections A, B, ar	nd C on this certificate rep	r, or architect authorized by la presents my best efforts to inte	w to certify elevation infor	mation.
		unishable by fine or impri	resents my best efforts to inte sonment under 18 U.S. Code,	Section 1001	
CERTIFIER'S NAME Michael	el W. Hyland		3000		J 20509
TITLE P.E. & L.S.			00115		
			COMPANY NAME	Michael W. Hyland Associ	ates, PA
ADDRESS			CITY		
01 East Eighth Street	A		Ocean City	STATE	ZIP CODE
SIGNATURE	211/1		DATE	NJ TELEBUC	08226
J.	over for		9/30/03	TELEPHC (609) 398-	
				(000) 030-	

		formation from Postion A		For Insurance Company Use:
MPORTANT: In these sp	paces, copy the corresponding inf Including Apt., Unit, Suite, and/or Bldg. No.) Of	R P O ROUTE AND BOX NO.		Policy Number
5 Central Road	Tiduding Apt., Offic, Suite, and/or blog. 110.) Of	STATE .	ZIP CODE	Company NAIC Number
CITY Ocean City		NJ	08226	
	SECTION D - SURVEYOR, EN	NGINEER, OR ARCHITECT C	ERTIFICATION (CONTIN	JED)
Copy both sides of this Elevati	on Certificate for (1) community official, (	(2) insurance agent/company, and	(3) building owner.	
COMMENTS	Elev 8.84 (Inadequate Venting)			
C3b. Next Higher Floor - Mair	1 Floor - Elev 9.15			
				Check here if attachmen
SECTION E . F	BUILDING ELEVATION INFORMAT	TION (SURVEY NOT REQUIR	ED) FOR ZONE AO AND	
or Zone AO and Zone A (with	out BFE), complete items E1 through E4	If the Elevation Certificate is inter	nded for use as supporting info	rmation for a LOMA or LOMR-F,
nation C must be completed				
Building Diagram Number_	_(Select the building diagram most similar	ar to the building for which this cert	ificate is being completed – see	e pages 6 and 7. If no diagram accurate
represents the building, pro	ovide a sketch or photograph.) (including basement or enclosure) of the	building is ft.(m) in.(cm)	above or Delow (check of	one) the highest adjacent grade. (Use
natural grade if available).		is the second second		
3. For Building Diagrams 6-8	with openings (see page 7), the next high	her floor or elevated floor (elevation	b) of the building isft.(m)	in.(cm) above the highest adjacent
grade. Complete items C3	3.h and C3.i on front of form. nachinery and/or equipment servicing the	huilding is ft/m\ in/cm\	lahove or □ below (check o	one) the highest adjacent grade. (Use
	lachinery and/or equipment servicing the		Jabove of Distriction	only are ingreed algorith given (
natural arada it available)				
natural grade, if available). 5. For Zone AO only: If no flo	od depth number is available, is the top of	of the bottom floor elevated in acco	ordance with the community's fl	oodplain management ordinance?
5. For Zone AO only: If no flo	od depth number is available, is the top o known. The local official must certify this	s information in Section G.		
5. For Zone AO only: If no flo	nknown. The local official must certify this SECTION F - PROPERTY OV	s information in Section G. WNER (OR OWNER'S REPR	ESENTATIVE) CERTIFICA	ATION
5. For Zone AO only: If no flo  Yes No Ur  The property owner or owner	known. The local official must certify this SECTION F - PROPERTY OV 's authorized representative who comple	s information in Section G.  WNER (OR OWNER'S REPR etes Sections A, B, C (Items C3.h a	ESENTATIVE) CERTIFICA and C3.i only), and E for Zone A	ATION
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