

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-8

OMB No. 1660-0008  
Expires February 28, 2009

08-060

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name SCAFISI, INC.

For Insurance Company Use:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
31- 33 CENTRAL ROAD

Policy Number

City OCEAN CITY State NJ ZIP Code 08226

Company NAIC Number

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
LOT 8 BLOCK 70.04

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

A5. Latitude/Longitude: Lat. 39° 17' 18.99" Long. 74° 33' 43.95"

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

Horizontal Datum: ☒ NAD 1927 ☐ NAD 1983

A7. Building Diagram Number 7

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

a) Square footage of crawl space or enclosure(s) 215 sq ft

b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 2

c) Total net area of flood openings in A8.b 312 sq in

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

a) Square footage of attached garage 1,167 sq ft

b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade 11

c) Total net area of flood openings in A9.b 1,320 sq in

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
OCEAN CITY 345310

B2. County Name  
CAPE MAY

B3. State  
NEW JERSEY

B4. Map/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 base flood depth)  
9 FT

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)?  
Designation Date \_\_\_\_\_ ☐ CBRS ☐ OPA ☐ Yes ☒ No

## 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 PRVT Vertical Datum 1929

Conversion/Comments NONE

a) Top of bottom floor (including basement, crawl space, or enclosure floor) 8.2

b) Top of the next higher floor 17.4

c) Bottom of the lowest horizontal structural member (V Zones only) NA

d) Attached garage (top of slab) 8.2

e) Lowest elevation of machinery or equipment servicing the building  
(Describe type of equipment in Comments) 10.0

f) Lowest adjacent (finished) grade (LAG) 8.1

g) Highest adjacent (finished) grade (HAG) 8.5

Check the measurement used.

☒ feet ☐ meters (Puerto Rico only)

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## 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

JAMES E. SCHWAB III

Title

LAND SURVEYOR

License Number 24GS03353600

Address

8 EAST 10<sup>TH</sup> STREET

Signature

City OCEAN CITY

Date

8/13/08

State NJ

ZIP Code 08226

Telephone 609-398-0565

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
31-33 CENTRAL ROAD

City OCEAN CITY State NJ ZIP Code 08226

For Insurance Company Use:

Policy Number

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 THERE ARE TWO SHOWERS NOT INCLUDED IN THE ENCLOSED AREA AS THEY ARE ACCESSED FROM THE EXTERIOR OF THE BUILDING BY LOUVERED DOORS. C2A IS GROUND LEVEL SLAB, C2B IS FIRST FLOOR. C2E IS AC CONDENSOR. THERE ARE ELEVEN 16 X 16 IN. ALUMINUM LOUVER VENTS WITH AN ESTIMATED NET FREE AREA OF 112 SQ.IN EACH. ONE GARAGE AND ONE FOUNDATION VENT ARE "SMART VENT" BRAND MODEL 1540-510- 8 X 16 IN. RATED BY THE MANUFACTURER AS EQUIVALENT TO 200 SQ.IN.NET FREE AREA EACH (SEE ATTACHMENT).

Signature

Date

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)** ☒ Check here if attachments

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E5. 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. The statements in Sections A, B, 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)** ☐ Check here if attachments

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. Check the measurement used in Items G8. and G9.

- G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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

G5. Date Permit Issued

G6. Date Certificate Of Compliance/Occupancy Issued

G7. This permit has been issued for:

☐ New Construction

☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_

Local Official's Name

Title

Community Name

Telephone

Signature

Date

Comments