

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

O.M.B. No. 3067-0077  
 Expires December 31, 2006

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:	
BUILDING OWNER'S NAME Sean Scarborough			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1 Sindia Road			Company NAIC Number	
CITY Ocean City	STATE New Jersey	ZIP CODE 08226		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 1, Block 70.07				
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 Ocean City 345310		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

- 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)**

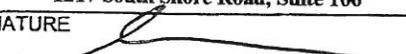
- C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
 \*A new Elevation Certificate will be required when construction of the building is complete.
- C2. Building Diagram Number 8 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- 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 \_\_\_\_\_ Conversion/Comments \_\_\_\_\_
- Elevation reference mark used Local Control Does the elevation reference mark used appear on the FIRM?  Yes  No
- |  |                                |
|--|--------------------------------|
| <input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)  | <u>7</u> . <u>5</u> ft.(m)     |
| <input type="checkbox"/> b) Top of next higher floor   | <u>11</u> . <u>3</u> ft.(m)    |
| <input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)   | <u>N/A</u> . <u>   </u> ft.(m) |
| <input type="checkbox"/> d) Attached garage (top of slab)  | <u>N/A</u> . <u>   </u> ft.(m) |
| <input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) | <u>10</u> . <u>4</u> ft.(m)    |
| <input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)   | <u>6</u> . <u>6</u> ft.(m)     |
| <input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)  | <u>7</u> . <u>4</u> ft.(m)     |
| <input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade                            | <u>10</u>                      |
| <input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h   | <u>2000</u> sq. in. (sq. cm)   |

License Number, Embossed Seal, Signature, and Date

  
 10/16/06

**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 Stephen C. Martinelli		LICENSE NUMBER 30089	
TITLE Professional Land Surveyor	COMPANY NAME Stephen C. Martinelli, LS, LLC		
ADDRESS 1217 South Shore Road, Suite 106	CITY Palermo	STATE New Jersey	ZIP CODE 08230
SIGNATURE 	DATE February 17, 2006	TELEPHONE 609-390-9618	

<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. 1 Sindia Road			Policy Number
CITY Ocean City	STATE New Jersey	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**

Lowest elevation of machinery servicing = Air conditioner units

Installed flood vents are "Smart Vents" utilizing 200 sq. in. per vent = 2000 sq. in. See Brochure attached.

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 E5. 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 20052532	G5. DATE PERMIT ISSUED 12/6/05	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 11/26/06
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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: \_\_\_\_\_

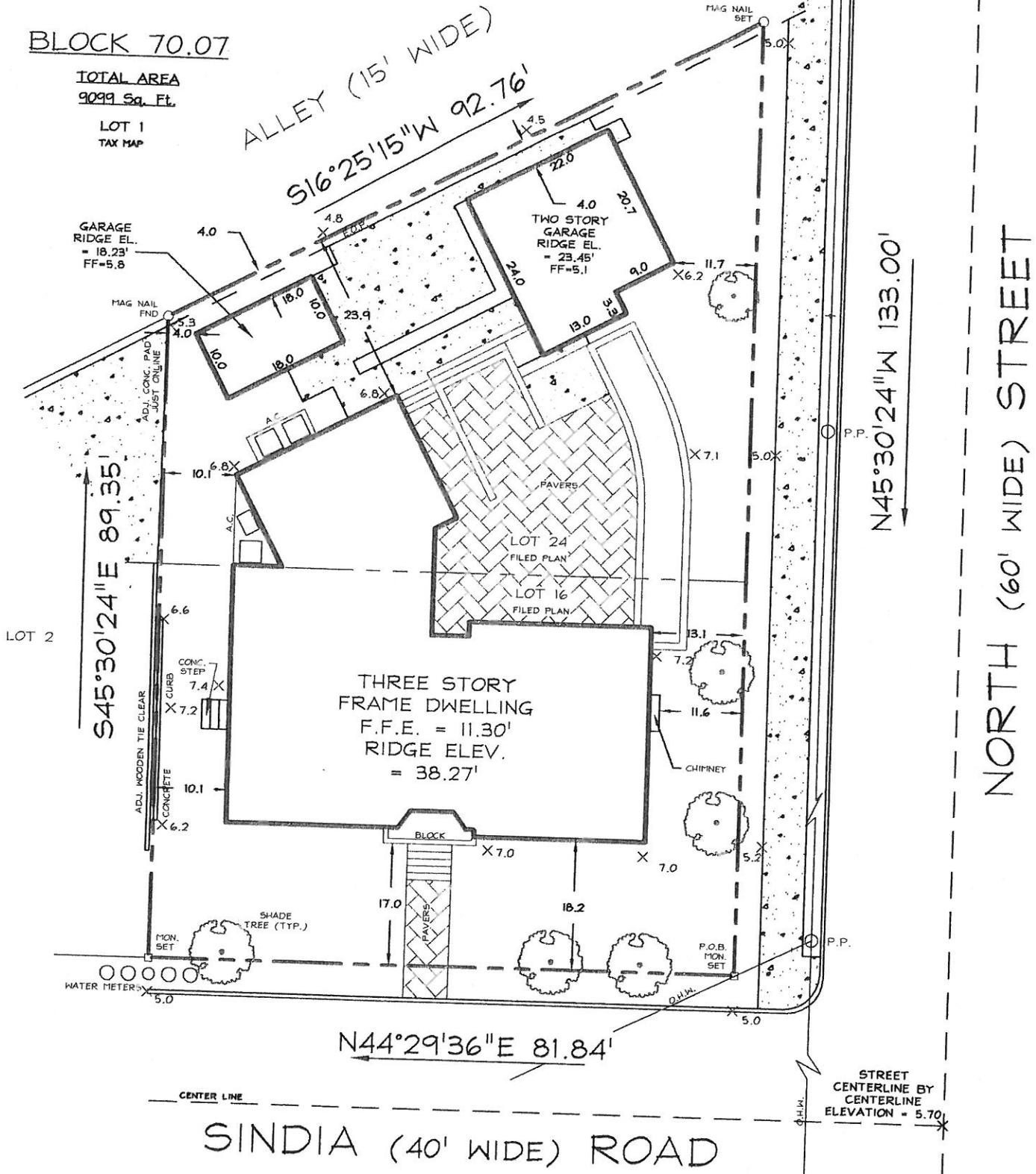
LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

Check here if attachments



E: SQUARE FOOTAGE BASED ON ARCHITECTURAL PLAN, DATED 09-13-05  
 HABITABLE FIRST FLOOR BUILDING AREA = 2458 S.F.  
 HABITABLE SECOND FLOOR BUILDING AREA = 2367 S.F.  
 HABITABLE THIRD FLOOR BUILDING AREA = 641 S.F. = 27.19% OF SECOND FLOOR  
 COVERED AREA = 3100 S.F. = 34.06%, FIELD MEASUREMENT

- ELEVATION OF RIDGE IS 32.57' ABOVE THE CENTERLINE BY CENTERLINE OF NORTH STREET AND SINDIA ROAD
- THIS PLAN WAS PREPARED FOR PERMIT PURPOSES ONLY
- ELEVATIONS IN FEET, BASED ON N.G.V.D. 29

- REVISED 11-01-06
- REVISED 10-12-06
- REVISED 03-02-06

SPOT ELEVATIONS  
 FINAL SURVEY  
 PERCENTAGES, SETBACKS & GARAGE ELEV.

-THE ORIGINAL OF THIS DRAWING IS THE PROPERTY OF STEPHEN C. MARTINELLI, L.S., L.L.C.

-ONLY COPIES FROM THE ORIGINAL OF THIS PLAT, CLEARLY MARKED BY LAND SURVEYOR'S EMBOSSED SIGNATURE, SHALL BE CONSIDERED TO BE VALID.

**FINAL SURVEY**

SITUATE IN  
 BLOCK 70.07  
 LOT 1  
 CITY OF  
 OCEAN CITY  
 CAPE MAY CO.

**STEPHEN C. MARTINELLI**  
 LAND SURVEYING  
 PLANNING  
 L.S., L.L.C.  
 PHONE : (609) 390-9618 FAX : (609) 390-9574

*[Signature]*  
**STEPHEN MARTINELLI**