

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Louis Becker		FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29 Sindia Road		Policy Number:
City Ocean City	State NJ	ZIP Code 08226
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 70.07, Lot 8		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential		
A5. Latitude/Longitude: Lat. <u>N 39° 17' 27.1"</u> Long. <u>W 074° 33' 49.4"</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number 6		
A8. For a building with a crawlspace or enclosure(s):		
a) Square footage of crawlspace or enclosure(s) <u>122*</u> sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>2*</u>		
c) Total net area of flood openings in A8.b <u>400</u> sq in		
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
A9. For a building with an attached garage:		
a) Square footage of attached garage <u>665</u> sq ft		
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>5</u>		
c) Total net area of flood openings in A9.b <u>1000</u> sq in		
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

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 0001	B5. Suffix C	B6. FIRM Index Date 7/15/1992	B7. FIRM Panel Effective/Revised Date 9/5/1984	B8. Flood Zone(s) A-7	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9.00
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.
Benchmark Utilized: PID AM6985 Vertical Datum: NAVD 1988*

Indicate elevation datum used for the elevations in items a) through h) below. ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source: _____
Datum used for building elevations must be the same as that used for the BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>8.49*</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>17.42*</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A.</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>7.22</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>17.42*</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>7.03</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>7.15</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A.</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters

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. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

☒ Check here if attachments.

Certifier's Name Michael W. Hyland, P.E & L.S.	License Number 20509
Title Prof. Land Surveyor	Company Name Hyland Design Group, Inc
Address 701 West Ave., Suite 301	City Ocean City State NJ ZIP Code 08226
Signature <i>Michael W. Hyland</i>	Date 3/17/2014 Telephone 609-398-4477

PLACE
SEAL
HERE

ELEVATION CERTIFICATE, page 2

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 Sindia Road		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 A8a. Foyer / Stair Box = 122 sf A8b. Exterior Vent within 12" of interior floor elev; Interior Vent in garage wall
C2. The benchmark for the Certificate "AM6985 USC&GS 5 D 2 = 6.21 (NAVD 1988). Datum Conversion to NGVD 1929 per the attachment; see
www.agc.army.mil/corpscon for further information as to the methodology.
C2a. Enclosure Area (Foyer / Stair Box) Elev 8.49
C2b. Main Floor Elev 17.42
C2e. Lowest Mechanicals Main Floor Elev 17.42

Signature

Date 3/17/2014

SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

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, crawlspace, or enclosure) is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ ☐ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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

☐ 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. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- 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–G10) is provided for community floodplain management purposes.

G4. Permit Number 20131877	G5. Date Permit Issued 8/19/13	G6. Date Certificate Of Compliance/Occupancy Issued 3/20/14
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial ImprovementG8. Elevation of as-built lowest floor (including basement) of the building: _____ ☐ feet ☐ meters Datum _____G9. BFE or (in Zone AO) depth of flooding at the building site: _____ ☐ feet ☐ meters Datum _____G10. Community's design flood elevation: _____ ☐ feet ☐ meters Datum _____

Local Official's Name Title

Community Name Telephone

Signature Date

Comments

☐ Check here if attachments.

Building Photographs

See Instructions for Item A6.

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 Sindia Road

Policy Number:

City Ocean City

State NJ

ZIP Code 08226

Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



View: Front / Right Side

Building Photographs

Continuation Page

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 Sindia Road

Policy Number:

City Ocean City

State NJ

ZIP Code 08226

Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



View: Rear / Right Side

View: Rear / Left Side
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Hyland Design Group, Inc.

AM6985 5 D 2

4 April 2013

INPUT

State Plane, NAD83
2900 - New Jersey, U.S. Feet
Vertical - NAVD88, U.S. Feet

OUTPUT

State Plane, NAD27
2900 - New Jersey, U.S. Feet
Vertical - NGVD29 (Vertcon94), U.S. Feet

Accuracies of conversions from NAD 83 to NAD 27 are typically 12 to 18 cm.

AM6985

1/1

Northing/Y: 166059	Northing/Y: 166035.272
Easting/X: 473610	Easting/X: 2028544.218
Elevation/Z: 6.21	Elevation/Z: 7.493
Convergence: -0 02 29.13465	Convergence: 0 03 49.89395
Scale Factor: 0.999900392	Scale Factor: 0.999975961
Combined Factor: 0.999905519	Combined Factor: 0.999975603
Grid Shift (U.S. ft.): X/Easting = 1554934.2, Y/Northing = -23.7	
Datum Shift (m.): Delta Lat. = -12.846, Delta Lon = 34.540	

Remark: