

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM
ELEVATION CERTIFICATE

O.M.B. No. 3067-0077
Expires July 31, 2002

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

BUILDING OWNER'S NAME

JACKSON NEALL

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.
CITY

101 BATTLESEA RD.

For Insurance Company Use:

Policy Number

Company NAIC Number

ZIP CODE

08226

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

OCEAN CITY

STATE

NJ

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)

TAX MAP

Lot 24

Block 70.12

LATITUDE/LONGITUDE (OPTIONAL)
(##°-##'-##" or ##°-##'-##")

HORIZONTAL DATUM:

☐ NAD 1927 ☐ NAD 1983

SOURCE: ☐ GPS (Type):

☐ USGS Quad Map ☐ 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

N.J.

B4. MAP AND PANEL NUMBER

0001

B5. SUFFIX

C

B6. FIRM INDEX DATE

7.15.92

B7. FIRM PANEL EFFECTIVE/REVISED DATE

9/5/84

B8. FLOOD ZONE(S)

A7

B9. BASE FLOOD ELEVATION(S)
(Zone AO, use depth of flooding)

9 ELEV.

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 NAVD 1988 Conversion/Comments NONE

Elevation reference mark used RM 1 Does the elevation reference mark used appear on the FIRM? ☒ Yes ☐ No

- ☐ a) Top of bottom floor (Including basement or enclosure) 6.48 ft (m)
- ☐ b) Top of next higher floor 10.19 ft (m)
- ☐ c) Bottom of lowest horizontal structural member (V zones only) NA ft (m)
- ☐ d) Attached garage (top of slab) NA ft (m)
- ☐ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) water heater 9.18 ft (m)
- ☐ f) Lowest adjacent (finished) grade (LAG) 5.6 ft (m)
- ☐ g) Highest adjacent (finished) grade (HAG) 5.9 ft (m)
- ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 14
- ☐ i) Total area of all permanent openings (flood vents) in C3.h 42.48 sq. ft. (sq. cm)

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 P. KARR

KARR LAND SURVEYING

LICENSE NUMBER

GS 31269

TITLE

Prof. Land Surveyor

ADDRESS

PO BOX 89

SIGNATURE

Thomas P. Karr

CITY

Seaside

STATE

NJ

DATE

12/30/02

TELEPHONE

609 390-7936

FEMA Form 81-31 (11/01) 00

SEE REVERSE SIDE FOR CONTINUATION

REPLACES ALL PREVIOUS EDITIONS

ORIGINATION: 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.	For Insurance Company Use:
101 BAYLESEN RD	Policy Number
CITY: OCEAN CITY NJ STATE: 08226	Company NAIC Number
ZIP CODE	

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: 2003 JAN 14 A 10:38

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 E4. 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 8-8 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. 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 02-1228	G5. DATE PERMIT ISSUED 6/21/02	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 1/15/03
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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

