U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008 Expires March 31, 2012

Replaces all previous editions

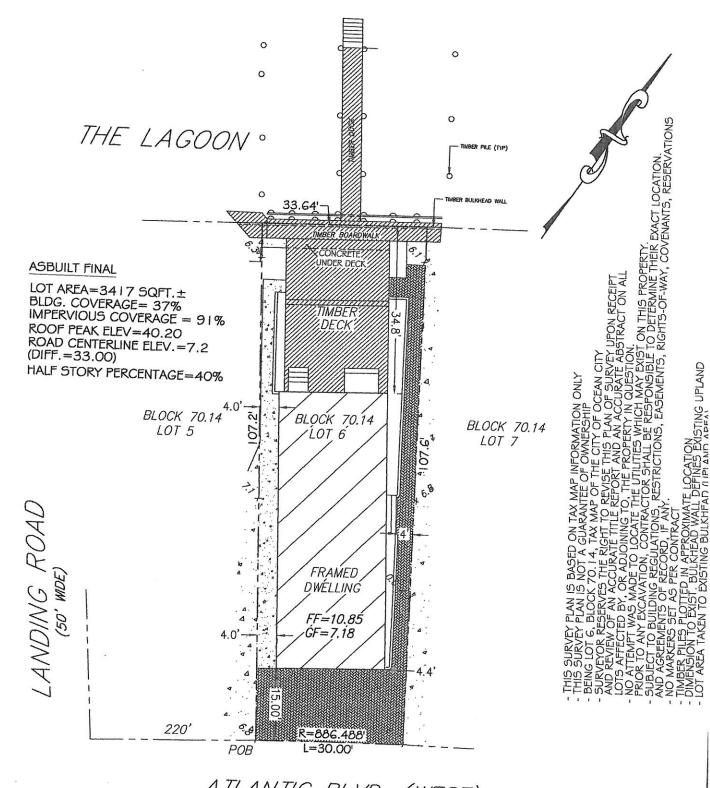
			SE	CTION A	PROPER	Y INFORM	TATION	For Insurance Company Use:
A1.	Building Owner's Nar	ne					~	Policy Number
A2. 220	Building Street Addre	ss (including Apt.	, Unit, Suite, and/o	r Bldg. No.)	or P.O. Rou	te and Box N	lo.	Company NAIC Number
	City OCEAN CITY	State NJ ZI	IP Code 08226				1/	
A3. LOT	Property Description (Lot and Block Nu	ımbers, Tax Parcel	Number, L	egal Descrip	tion, etc.)	110	
A4.	Building Use (e.g., Re	sidential Non-Re	esidential Addition	A	-t- \ DE015			
A6. A7.	Latitude/Longitude: La Attach at least 2 photo Building Diagram Num For a building with a co	at. <u>39-17'-36" N</u> ographs of the bu ober 8	Long. <u>74-33'-42" Walled in the Certificant to the </u>	1		in flood insu	ance.	n: 🛛 NAD 1927 🗌 NAD 1983
	 a) Square footage of b) No. of permanent enclosure(s) withir 	crawlspace or en flood openings in 1.0 foot above a	the crawlspace or	<u>715</u> 5	sq ft	a) Sq b) No	ouilding with an atta ware footage of atta of permanent floo nin 1.0 foot above a	ached garage <u>544</u> sq ft d openings in the attached garage
	c) Total net area of fluid) Engineered flood of	penings?] Yes ⊠ No		sq in	c) Tot d) En	al net area of flood gineered flood oper	openings in A9.b 600 sq in nings? ⊠ Yes □ No
R1 N	NEID Community Name	SECT	ION B - FLOOD			MAP (FIRM	I) INFORMATIO	N
3453	NFIP Community Name 100001 C	& Community N	umber	B2. Count CAPE MA				B3. State NJ
B4.	Map/Panel Number 345310-0001	B5. Suffix C	B6. FIRM Index Date 7/15/92	lei e	B7. FIRM P		B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zo AO, use base flood depth)
10 1	Indicate the source of t				9/5/84		A-7	9
A 2. Ele	uilding elevations are bare new Elevation Certifica evations – Zones A1-A low according to the bare	ased on:	Construction Drad when construction the REE VE V1-V1	awings n of the bui	☐ Buil	ding Under (JRVEY REQUIRICONSTRUCTION* AR/A1-A30, AR/AH	ED) ⊠ Finished Construction , AR/AO. Complete Items C2.a-h
Be	low according to the bunchmark Utilized LOC onversion/Comments N	ALVertical Datum		Use the sa	ime datum as	s the BFE.		, Alvao. Complete items C2.a-n
						Ch	eck the measurem	ent used.
a) b)	Top of bottom floor (in Top of the next higher	ncluding baseme	nt, crawlspace, or	enclosure fl			meters (Puerto	Rico only)
c)	Bottom of the lowest		ıral member (V Zon	es only)	<u>10.9</u> <u>N/A</u>	⊠ feet	☐ meters (Puerto	Rico only)
d)	Attached garage (top	of slab)		37.5	<u>7.3</u>	leet	meters (Puerto	Rico only)
e)	Lowest elevation of n (Describe type of equ	ipment and locati	ion in Comments)	building	<u>9.2</u>		meters (Puerto	Rico only)
f) g)	Lowest adjacent (finis Highest adjacent (finis	shed) grade next t	to building (LAG)		<u>7.1</u>		☐ meters (Puerto	Rico only)
h)	Lowest adjacent grad structural support	e at lowest elevat	to building (HAG) tion of deck or stair	s, including	<u>7.2</u> <u>6.4</u>	⊠ feet ⊠ feet	☐ meters (Puerto ☐ meters (Puerto	Rico only) Rico only)
		SECTION	D - SURVEYOR	ENGINE	ER, OR AR	CHITECT (CERTIFICATION	
derst	rtification is to be signe tion. I certify that the in and that any false state ack here if comments a	d and sealed by a nformation on this ement may be pu	a land surveyor, en Certificate represe nishable by fine or n ock of form.	gineer, or a ents my bes imprisonme Vere latitude	rchitect author t efforts to in nt under 18 t	orized by law terpret the da U.S. Code, S	to certify elevation	PLACE
ertifier	's Name THOMAS N. 7	OLBERT				lumber 3860		SEAL
le PR	RESIDENT	Co	ompany Name DE	SIGN LAND				HERE
	P.O. BOX 667		Y FURNERSVILLE		State NJ		P Code 08012	-
natur) /	Date 5/25	5/10	Telephone	856-374-1	134	-
A Fo	orm 81-31, Mar 09		See	reverse si	de for contir	nuation		Deal.
				0	101 001101	idaliUII.		Replaces all previous editions

TANT: In these spaces, copy the corresponding suilding Street Address (including Apt., Unit, Suite, and/or Bldg. No. 220 WEST ATI ANTIC BLVD.	illiormation from Secti	on A.	For Insurance Company Use
ZZO TYZOT MEDITATIO BEVD.	0.	Policy Number	
City OCEAN CITYState NJ ZIP Code 08226	, , , , , , , , , , , , , , , , , , ,		Company NAIC Number
SECTION D - SURVEYOR, ENGIN	IEER, OR ARCHITECT C	CERTIFICATION (CO	NTINUED)
copy both sides of this Elevation Certificate for (1) community offici	ial (2) insurance agent/com-	2021 1 (0) 1 11 11	
Comments VENT AREA BASED ON MANUFACTURERS SPECII	FICATIONS (200 SQ. INCH/	INITY "SMART VENTS	Mer.
Signature	Date		
SECTION E - BUILDING ELEVATION INFORMATION	SUBVEY NOT BEOLUB		☐ Check here if attach
SECTION E - BUILDING ELEVATION INFORMATION (For Zones AO and A (without BFE), complete Items E1-E5. If the C and C. For Items E1-E4, use natural grade, if available. Check the	SURVEY NOT REQUIRE	ED) FOR ZONE AO	AND ZONE A (WITHOUT BF
 E1. Provide elevation information for the following and check the a grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or end b) Top of bottom floor (including basement, crawlspace, or end For Building Diagrams 6-9 with permanent flood openings proved (elevation C2.b in the diagrams) of the building is 	ppropriate boxes to show when the closure) is closure) is by ided in Section A Items 8 an feet meters labove or building is feet	feet meters feet meters feet meters feet meters feet meters feet below the selow the HAG.	ers. bove or below the highest adjace above or □ below the HAG. above or □ below the LAG. f Instructions), the next higher fice HAG.
SECTION F - PROPERTY OWNER	OR OWNER'S REDDES	ENTATIVE) OFFITE	
ne property owner or owner's authorized representative who complete	oton Continue A D		CATION
	are correct to the best of my	knowledge.	A-issued or community-issued B
roperty Owner's or Owner's Authorized Representative's Name			
ddress	City	State	ZIP Code
gnature	Date		
omments		Telephone)
SECTION G - COMM	IUNITY INFORMATION (OPTIONAL)	Check here if attachr
local official who is allinorized by law or ordinance to edministrative		The same of the sa	complete Sections A. B. C. (or F
G of this Elevation Certificate. Complete the applicable item(s) and The information in Section C was taken from other documenta is authorized by law to certify elevation information. (Indicate	tion that the track are measured	screment used in items	G8 and G9.
A community official completed Section E for a building located			
The following information (Items G4-G9) is provided for commi	unity floodplain management	t purposes	isued BFE) or Zone AO.
Permit Number G5. Date Permit Issued,		Certificate Of Complian	200/000
2009/08/	3/09 6	3/10	nce/Occupancy Issued
This permit has been issued for: New Construction	Substantial Improvement		
Elevation of as-built lowest floor (including basement) of the building	g: feet [] meters (PR) Datum _	
BFE or (in Zone AO) depth of flooding at the building site:	feet [] meters (PR) Datum _	
Community's design flood elevation		meters (PR) Datum _	
al Official's Name	Title		
			· ·
munity Name	Telephone		`
al Official's Name munity Name ature			

FEMA Form 81-31, Mar 09

Check here if attachments

Replaces all previous editions



ATLANTIC BLVD. (WEST) (100' MDE)

Design Land Surveying P.A. MEMBER OF:

P.O. Box 667 Turnersville, N.J. 08012

Toll Free Phone 1—800—418—9373

Phone (856) 374—1134 — Fax (856) 589—0246

DATE 09/17/09 SURVEY NO.

SCALE 1"=20' 0908001

DRN: TNT

SKETCH PLAT

220 W. ATLANTIC BLVD.

SITUATE IN:

CITY OF OCEAN CITY CAPE MAY COUNTY NEW JERSEY REV: 10/01/09 (ADDED BUILD. TIES)

REV: 01/04/10 (ASBUILT U.C.)

REV: 01/12/10 (HALF STY.)

REV: 05/12/10 (FINAL)

REV: 05/25/10 (PER REVIEW)

TO: KEITH LEONARD

ourvey accurately depicts the legal description furnished to me. No remaility is

THOMAS N. TOLBERT
PROFESSIONAL LAND SURVEYOR
N.J. LIC. GS 38608