

ELEVATION CERTIFICATE

**Important: Read the instructions on pages 1-7.**

<b>SECTION A - PROPERTY OWNER INFORMATION</b>		For Insurance Company Use:	
BUILDING OWNER'S NAME Walter Maguire		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 214 North Point Road		Company NAIC Number	
CITY Ocean City	STATE NJ	ZIP CODE 08226	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 70.15, Lot 9			
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: _____	

<b>SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION</b>					
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Ocean City 345310		B2. COUNTY NAME Cape May		B3. STATE NJ	
B4. MAP AND 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 depth of flooding) 9'
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): _____					
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____					

<b>SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)</b>	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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 _____ Does the elevation reference mark used appear on the FIRM? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	7.35 ft.(m)
<input type="checkbox"/> b) Top of next higher floor	10.11 ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	N/A. ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	N/A. ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	10.35 ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	7.47 ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	7.85 ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 24	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h 960 sq. in. (sq. cm)	

License Number, Embossed Seal, Signature, and Date

<b>SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION</b>			
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 A. Prendergast		LICENSE NUMBER 37604	
TITLE Professional Land Surveyor	COMPANY NAME		
ADDRESS 318 Discovery Lane	CITY Egg Harbor Township	STATE NJ	ZIP CODE 08234
SIGNATURE <i>Thomas A. Prendergast</i>	DATE 5/8/2003	TELEPHONE 609-653-2047	

<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. 214 North Point 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

House is in Zone A-7, Base Flood Elevation 9.0 feet.

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 LOMRF, 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 02-1966	G5. DATE PERMIT ISSUED 10/17/02	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 5/9/03
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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

Check here if attachments

LOT AREA= 7,880 ±

LOT COVERAGE= 27%

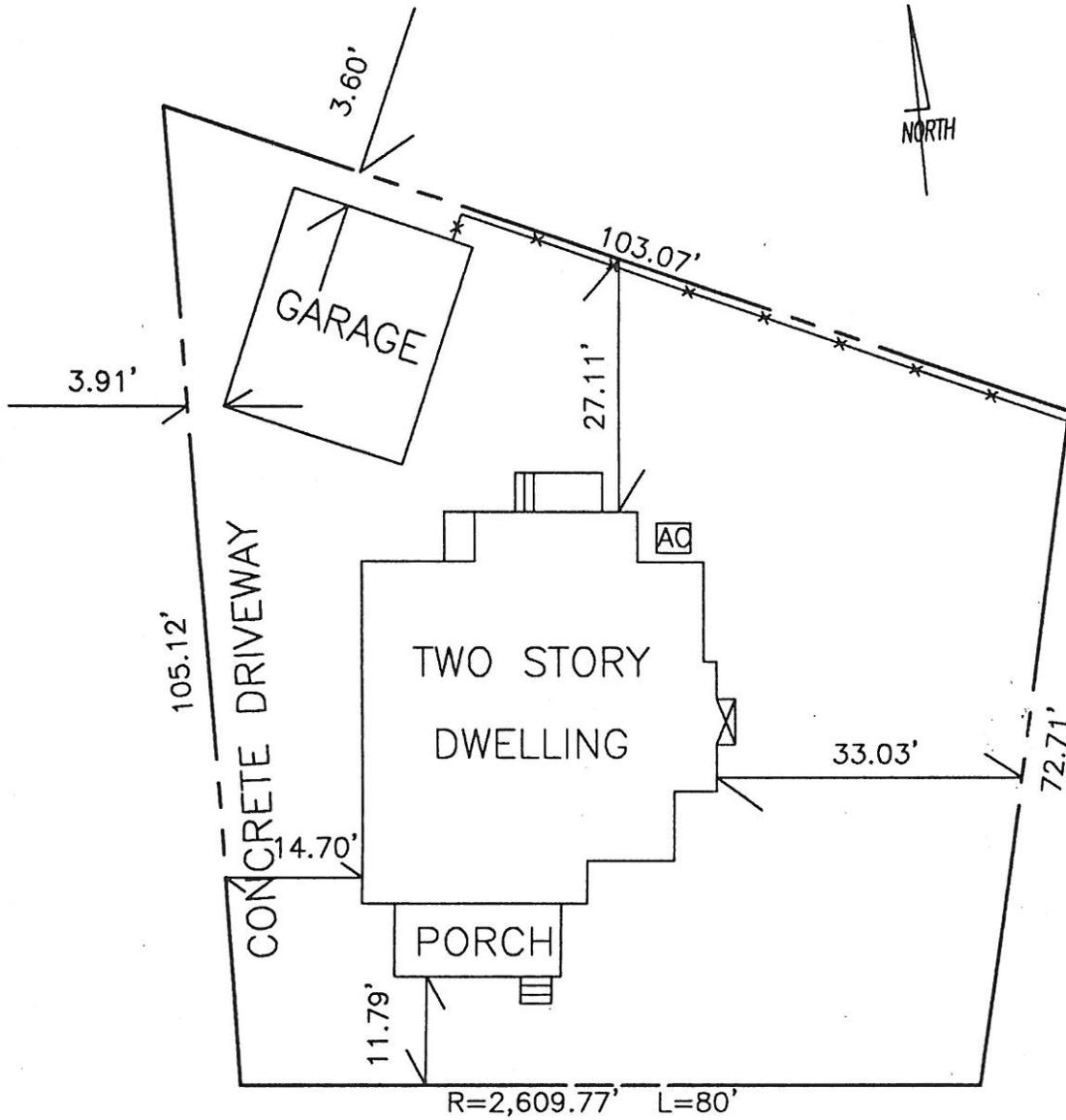
ROOF HEIGHT=23.98'

FF ELEV.=10.11'

CROWN ELEV.=6.76'

CITY OF OCEAN CITY  
CODE ENFORCEMENT

2003 MAY -1 P 3: 20



NORTH POINT ROAD 60'

FINAL AS BUILT SURVEY

This lot is located in FEMA Zone A-7

Owner: Maguire House

To the above parties, any insuror of title relying hereon and any other party of interest. In consideration of the fee paid for making this survey, I hereby certify to its accuracy (except such easements if any that may be located below the surface of lands and not visible) as an inducement for any insuror of title to insure the title of lands and premises shown hereon. This certification is only for the above named parties for purchase and/or mortgage. No liability or responsibility is assumed for the use of survey for any other purpose including but not limited to survey affidavit, resale of property, new construction or use by any other person not listed in certification. SURVEY NOT VALID WITHOUT RAISED SEAL.

Thomas A. Prendergast NJ License No. 37604

Block 70.15 Lot 9 Address: 214 North Point Drive

Municipality: Ocean City County: Cape May

Scale: 1"= 20' by: tap Date: 4/29/2003 Revised:

Thomas A. Prendergast, P.L.S., 318 Discovery Lane, Egg Harbor Twp., NJ 08234 (609) 653-2047