

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

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

ELEVATION CERTIFICATE

Important: Read the Instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use
BUILDING OWNER'S NAME		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 336 SURF ROAD		Company NAIC Number
CITY OCEAN CITY	STATE NJ	ZIP CODE 08226
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX MAP Lot 11 Block 70.18		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (#° - #' - #' or #° - #' - #')		HORIZONTAL DATUM: 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) NINE FEET	

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 NGVD '29 Conversion/Comments NONE

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

☐ a) Top of bottom floor (including basement or enclosure)	7.80 ft(m)	License Number, Embossed Seal, Signature, and Date
☐ b) Top of next higher floor	11.1 ft(m)	
☐ c) Bottom of lowest horizontal structural member (V zones only)	NA ft(m)	
☐ d) Attached garage (top of slab)	7.80 ft(m)	
☐ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	11.1 ft(m)	
☐ f) Lowest adjacent (finished) grade (LAG)	7.4 ft(m)	
☐ g) Highest adjacent (finished) grade (HAG)	7.8 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	3024 sq. in. (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 COMPANY NAME

ADDRESS PO BOX 89 CITY SEAY, NJ STATE NJ ZIP CODE 08230

SIGNATURE Thomas P. KARR DATE 4/20/01 TELEPHONE 609 390 7936

IMPORTANT: 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:
336 Surf Road	Policy Number
CITY	Company NAIC Number
Ocean City	
STATE	
NJ	
ZIP CODE	
08226	

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:

APR 23 1 51 PM '01

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 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. 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 _____

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 00-1248	G5. DATE PERMIT ISSUED 8/23/00	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 5/11/01
------------------------------	-----------------------------------	--

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 _____

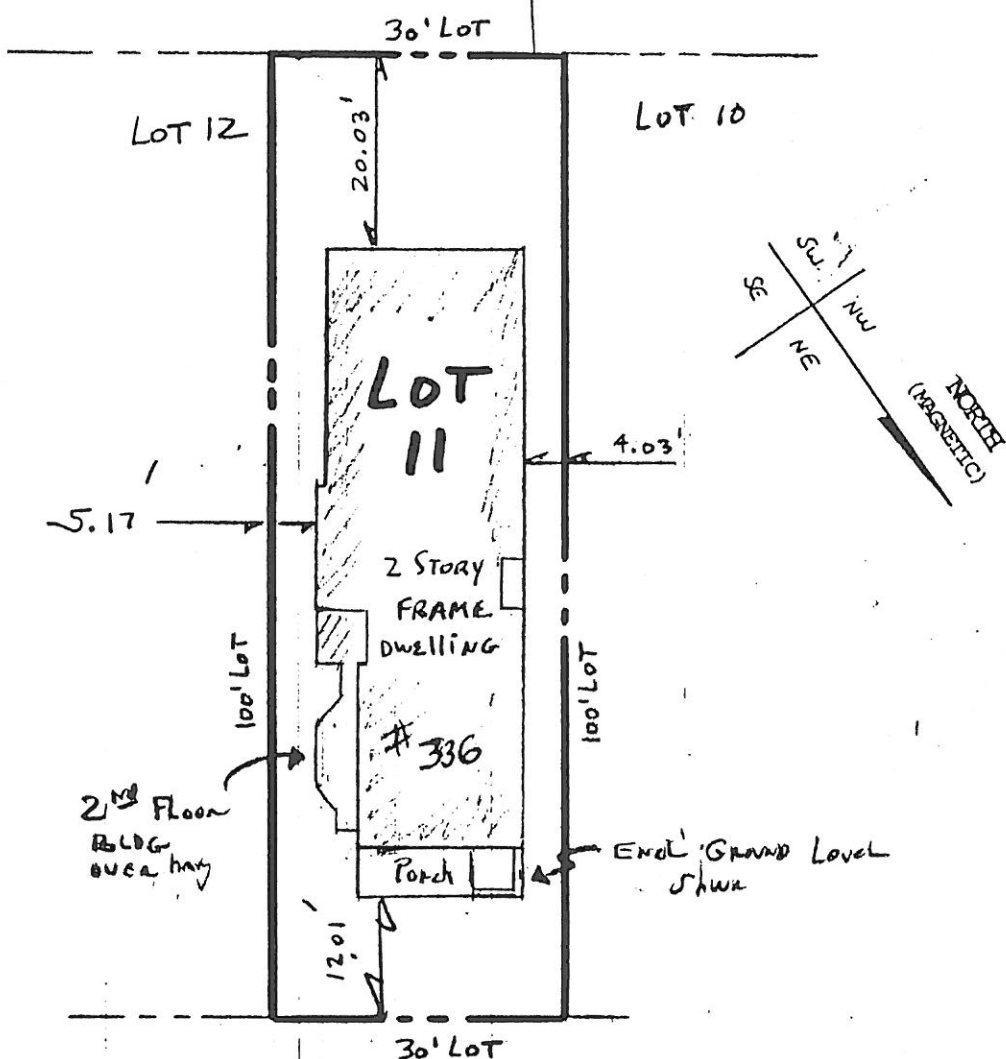
COMMENTS _____

CITY OF OCEAN CITY
CODE ENFORCEMENT

APR 23 1 51 PM '01

LOT 38

LOT 39



NOTE:

30' X 100' LOT

ALL LOT CORNERS

ARE 90°

ELEV ARE NGVD 29

ROOF PEAK ELEV 36.62

CL SURF ROAD 7.61

DIFF 29.01 FEET

SURF RD. (60' W)

TOTAL LOT AREA: 3,000 SF

LIMIT OF FOUNDATION 39.34 %
BLDG PORCHES AND CONC 46 %

FINAL ASBUILT

KARR -EP- LAND SURVEYING		PLAN OF SURVEY	
mailing address	RQ BOX 89 OCEANVIEW, N.J. 08230	BLOCK 11	LOT 11
PHONE 609 390 7936	FAX 390 7937	OCEAN CITY	
THOMAS P. KARR NJ PROFESSIONAL LAND SURVEYOR NJ SURVEYORS LICENSE # 31269 location: route 9 MARLORA NJ		COUNTY OF CAPE MAY NEW JERSEY	
TYPE THREE SURVEY THIS IS NOT AN ALTA STANARDUS SURVEY		DATE OF PLAN 4/20/01	Drawn by CFF Chk'd by TK
REVISIONS	DATE	SCALE 1" = 20'	
		PROJECT NO. 00100	