

ELEVATION CERTIFICATE

OMB No. 1660-0008
 Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name _____

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. CITY OF OCEAN CITY
318 EAST SURF ROAD
 City OCEAN CITY State N.J. ZIP Code 08226

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
LOT 34 Block 70.26

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) _____

A5. Latitude/Longitude: Lat. 39-17-21 N Long. 74-33-29 W

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. Horizontal Datum: NAD 1927 NAD 1983

A7. Building Diagram Number 1

A8. For a building with a crawl space or enclosure(s), provide:
 a) Square footage of crawl space or enclosure(s) _____ sq ft
 b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____
 c) Total net area of flood openings in A8.b _____ sq ft

A9. For a building with an attached garage, provide:
 a) Square footage of attached garage _____ sq ft
 b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
 c) Total net area of flood openings in A9.b _____ sq ft

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number 345310 0001 C

B2. County Name CAPE MAY

B3. State N.J.

B4. Map/Panel Number <u>345310 0001</u>	B5. Suffix <u>C</u>	B6. FIRM Index Date <u>7-15-92</u>	B7. FIRM Panel Effective/Revised Date <u>9-5-84</u>	B8. Flood Zone(s) <u>A-7</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>9</u>
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B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) _____

B11. Indicate elevation datum used for BFE in Item 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)?
 Designation Date _____ CBRS OPA Yes 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-g below according to the building diagram specified in Item A7.
 Benchmark Utilized LOCAL Vertical Datum LOCAL

Conversion/Comments _____

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>9.5</u> feet	<input checked="" type="checkbox"/>	meters (Puerto Rico only)
b) Top of the next higher floor	<u>10.3</u> feet	<input checked="" type="checkbox"/>	meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>-</u> feet	<input type="checkbox"/>	meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>9.0</u> feet	<input checked="" type="checkbox"/>	meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>10.9</u> feet	<input checked="" type="checkbox"/>	meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>9.4</u> feet	<input checked="" type="checkbox"/>	meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>9.5</u> feet	<input checked="" type="checkbox"/>	meters (Puerto Rico only)

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.

Certifier's Name Thomas N. Tolbert License Number 38608

Title Professional Land Surveyor Company Name Design Land Surveying

Address 341 Route 168 City Turnersville State N.J. ZIP Code 08012

Signature _____ Date 1/20/07 Telephone 856-374-1134

PLACE SEAL HERE

Building Street Address (including Apt. Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
 318 EAST SURF ROAD

City Ocean City **State** N.J. **ZIP Code** 08226

For Insurance Company Use
Policy Number
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

Signature _____ Date _____

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) Check here if attachments

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, crawl space, or enclosure) is _____ feet _____ meters above or below the HAG.
 b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet _____ meters above or below the LAG.

E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 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 _____

SECTION G - COMMUNITY INFORMATION (OPTIONAL) Check here if attachments

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 and G9.

1. 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.)

2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

3. The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number 20061274	G5. Date Permit Issued 8/3/06	G6. Date Certificate of Compliance/Occupancy Issued 4/26/07
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7. This permit has been issued for: New Construction Substantial Improvement

8. Elevation of as-built lowest floor (including basement) of the building: _____ feet _____ meters (PR) Datum _____

9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet _____ meters (PR) Datum _____

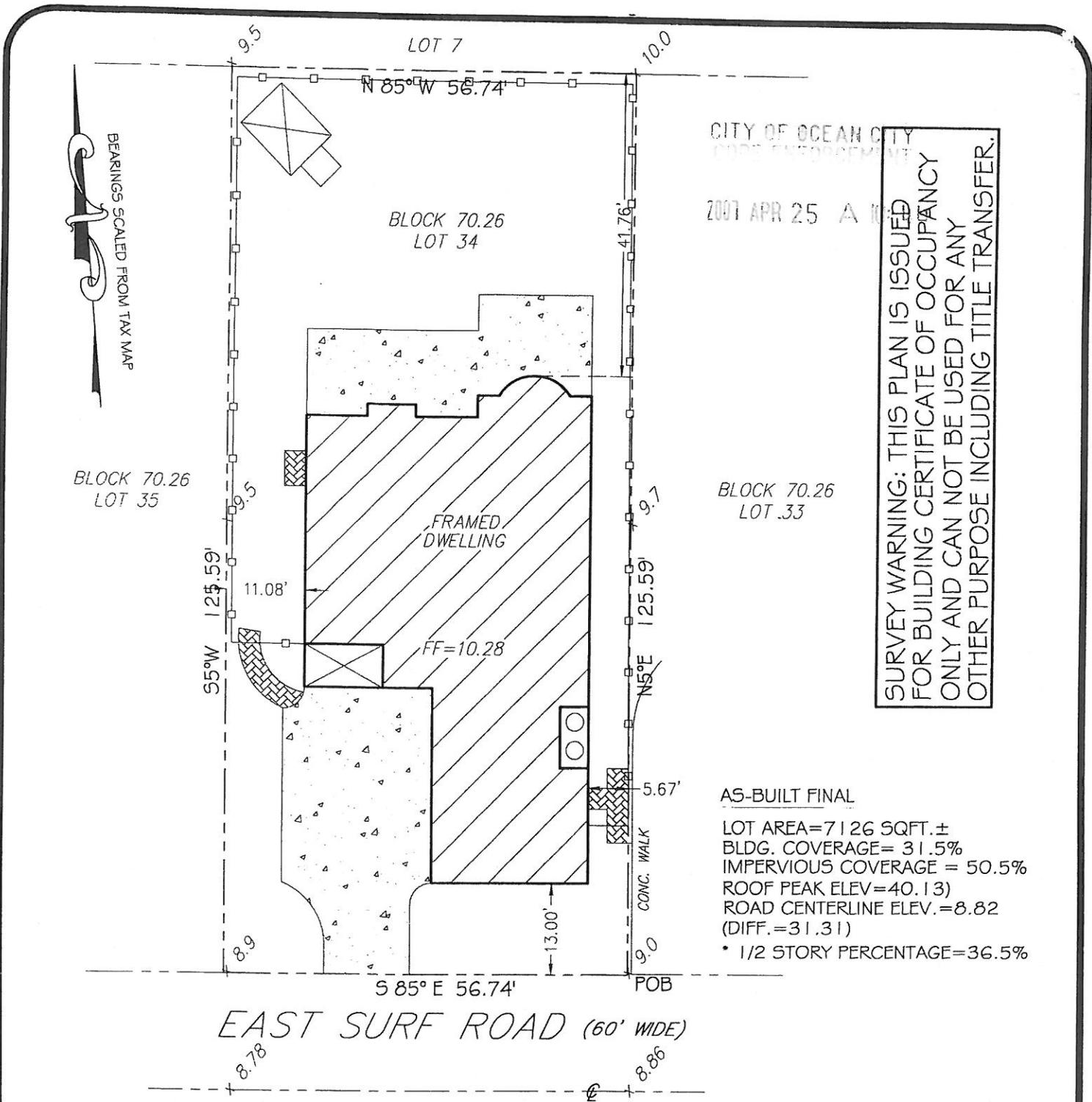
Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments _____

Check here if attachments



CITY OF OCEAN CITY
CODE ENFORCEMENT

2007 APR 25 A.M.

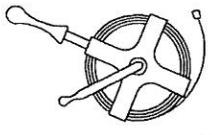
SURVEY WARNING: THIS PLAN IS ISSUED FOR BUILDING CERTIFICATE OF OCCUPANCY ONLY AND CAN NOT BE USED FOR ANY OTHER PURPOSE INCLUDING TITLE TRANSFER.

AS-BUILT FINAL

LOT AREA=7126 SQFT.±
 BLDG. COVERAGE= 31.5%
 IMPERVIOUS COVERAGE = 50.5%
 ROOF PEAK ELEV=40.13)
 ROAD CENTERLINE ELEV.=8.82
 (DIFF.=31.31)
 * 1/2 STORY PERCENTAGE=36.5%

- THIS SURVEY PLAN IS BASED ON TAX MAP INFORMATION ONLY
- THIS SURVEY PLAN IS NOT A GUARANTEE OF OWNERSHIP
- BEING LOT 34, BLOCK 70.26, TAX MAP OF THE CITY OF OCEAN CITY
- SURVEYOR RESERVES THE RIGHT TO REVISE THIS PLAN OF SURVEY UPON RECEIPT AND REVIEW OF AN ACCURATE TITLE REPORT AND AN ACCURATE ABSTRACT ON ALL LOTS AFFECTED BY, OR ADJOINING TO, THE PROPERTY IN QUESTION.
- NO ATTEMPT WAS MADE TO LOCATE THE UTILITIES WHICH MAY EXIST ON THIS PROPERTY. PRIOR TO ANY EXCAVATION, CONTRACTOR SHALL BE RESPONSIBLE TO DETERMINE THEIR EXACT LOCATION.
- SUBJECT TO BUILDING REGULATIONS, RESTRICTIONS, EASEMENTS, RIGHTS-OF-WAY, COVENANTS, RESERVATIONS AND AGREEMENTS OF RECORD, IF ANY.

Design Land Surveying P.A.



341 RTE 168 Turnersville, N.J. 08012
 Toll Free Phone 1-800-418-9373
 Phone (856) 374-1134 - Fax (856) 374-1061

MEMBER OF:



DATE	02/06/06	SURVEY NO. 0601018
SCALE	1"=20'	
DRN:	TNT	

SKETCH PLAT 318 E. SURF ROAD	SITUATE IN: CITY OF OCEAN CITY CAPE MAY COUNTY NEW JERSEY
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REV: 11/20/06 (ASBUILT UC)
REV: 11/27/06 (1/2 STY.%)
REV: 04/20/07 (FINAL)

TO: FAZZIO DEVELOPMENT

In consideration of the fee paid for making this survey, I hereby declare that the said survey accurately depicts the legal description furnished to me. No responsibility is assumed for (a) the location of easements that may be located below the surface of the lands, or (b) on the surface of the lands and not visible, or (c) other interests not visible, or matters of title. This declaration is issued solely to the herein named purchaser for any transaction occurring within ninety (90) days of its date. The surveyor shall have no responsibility or liability for any reason unless the fee for the preparation of said survey is paid within thirty (30) days of its billing. Surveyor's liability for any reason shall not exceed the sum of ONE THOUSAND DOLLARS (1,000.00).

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