

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

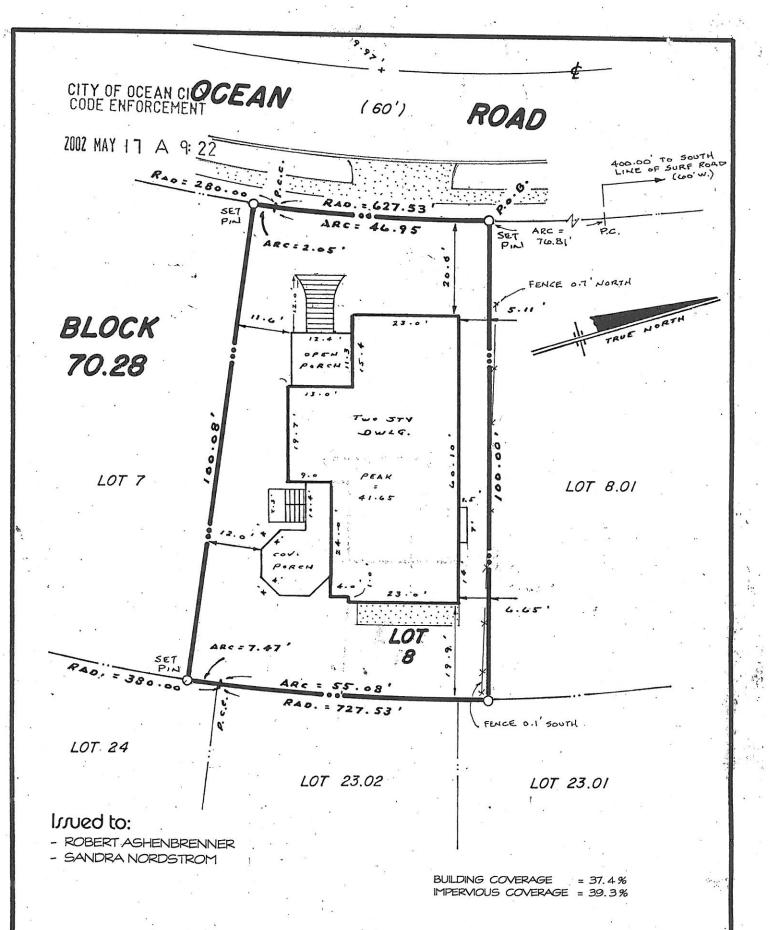
O.M.B. No. 3067-0077 Expires July 31, 2002

ELEVATION CERTIFICATE

CITY OF OCFAN CITOSportant: Read the instructions on pages 1-7. CODE ENFORCEMEN BECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: BUILDING OWNER'S NAME Policy Number Robert Ashenbrenner and Sandra Nordstrom
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number CITY STATE ZIP CODE Ocean City N.I 08226 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 8, Block 70.28 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) residential LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): (##°-##-##.##° or ##.####°) □ NAD 1927
□ NAD 1983 USGS Quad Map ☐ Other: SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME** B3. STATE Ocean City 345310 Cape May N.I B4. MAP AND PANEL B5. SUFFIX **B7. FIRM PANEL** B9. BASE FLOOD ELEVATION(S) NUMBER **B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) 10' 345310 0001 C 7/15/92 A7 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: X 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 7 (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 Elevation reference mark used $\underline{\text{Ti-2}}$ Does the elevation reference mark used appear on the FIRM? $\ \square$ Yes $\ \boxtimes$ No a) Top of bottom floor (including basement or enclosure) 11. Oft.(m) Seal, □ b) Top of next higher floor 20.0ft.(m) Embossed c) Bottom of lowest horizontal structural member (V zones only) <u>N/A</u>.:__ft.(m) ☐ d) Attached garage (top of slab) 10. 7.ft.(m) and e) Lowest elevation of machinery and/or equipment License Number, I Signature, servicing the building (Describe in a Comments area) 11.0ft.(m) If the following form of the following form 10.5ft.(m) g) Highest adjacent (finished) grade (HAG) 10. 8 ft.(m) h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 0 i) Total area of all permanent openings (flood vents) in C3.h 0 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 David C. Kruger LICENSE NUMBER NJ Lic. No. 30406 TITLE Professional Land Surveyor COMPANY NAME David C. Kruger Associates **ADDRESS** CITY STATE **7IP CODE** 3323 Simpson Avenue Ocean City N.I 08226 SIGNATURE DATE TELEPHONE 4/24/02 (609) 391-9393

IMPORTANT: In these space	es, copy the corresponding information from	Section A.	•	For Insurance Company Use:	
BUILDING STREET ADDRESS (Included)	ding Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND	BOX NO.		Policy Number	
229 Ocean Road	· STAT	TE .	7ID CODE	Company MAIC Number	
Ocean City	NJ NJ		ZIP CODE 08226	Company NAIC Number	
	SECTION D - SURVEYOR, ENGINEER, OR A	AND DESCRIPTION OF THE OWNER, WHEN PERSONS ASSESSED.	The second secon	D)	
	Certificate for (1) community official, (2) insurance agent/	company, and (3) b	uilding owner.		
COMMENTS					
		· · · · · · · · · · · · · · · · · · ·			
		=			
				☐ Check here if attachmer	
SECTION E - BUILI	DING ELEVATION INFORMATION (SURVEY N	OT REQUIRED)	FOR ZONE AO AND ZO	NE A (WITHOUT BFE)	
r Zone AO and Zone A (without B	FE), complete Items E1 through E4. If the Elevation Ce	ertificate is intended f	or use as supporting informa	ation for a LOMA or LOMR-F.	
ection C must be completed.					
. Building Diagram Number_(Sel	lect the building diagram most similar to the building for	which this certificate	is being completed - see pa	ages 6 and 7. If no diagram accurate	
represents the building, provide 2. The top of the bottom floor (include	a sketch or photograph.) ding basement or enclosure) of the building is ft.(π	a) in (am) [] abo	man 🗆 balandahad	NU 111 1 7 1 1 1 1	
natural grade, if available).	ing basement of encourie) of the building is it (ii	i)in.(G1i) [abo	ve or Delow (check one	e) the highest adjacent grade. (Use	
3. For Building Diagrams 6-8 with o	ppenings (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.n an	id C3.1 on front of form.				
For Zone AO only: If no flood de	opth number is available, is the top of the bottom floor ele	evated in accordanc	e with the community's flood	plain management ordinance?	
	n. The local official must certify this information in Section				
ha proparty owner or owner or of	SECTION F - PROPERTY OWNER (OR OWNER	ER'S REPRESEN	TATIVE) CERTIFICATION	ON	
ssued BFE) or Zone AO must sign	norized representative who completes Sections A, B, C n here. The statements in Sections A, B, C, and E are c	(Items C3.h and C3	i only), and E for Zone A (wi	thout a FEMA-issued or community-	
PROPERTY OWNER'S OR OWN	ER'S AUTHORIZED REPRESENTATIVE'S NAME	oned to the best of	illy kriowieuge.		
	E. CONSTITUTE OF THE CONTROL OF THE			ting a sample.	
ADDRESS		CITY	STAT	E ZIP CODE	
SIGNATURE		DATE	TELE	PHONE	
COMMENTS			· · · · · · · · · · · · · · · · · · ·		
		· · · · · · · · · · · · · · · · · · ·	/ -		
	B - 1			☐ Check here if attachment	
	SECTION G - COMMUNITY IN	IFORMATION (O	PTIONAL)		
e local official who is authorized by	y law or ordinance to administer the community's floodpl	lain management or	dinance can complete Section	ons A, B, C (or E), and G of this Eleva	
si uncate. Comprete une applicable	iterii(s) and sign delow.				
state or local law to certify el	was taken from other documentation that has been sig levation information. (Indicate the source and date of th	ned and embossed	by a licensed surveyor, engi	neer, or architect who is authorized b	
 A community official complet 	ted Section E for a building located in Zone A (without a	FEMA-issued or co	mmunity-issued BFF) or Zor	ne AO	
3. \square The following information (Ite	ems G4-G9) is provided for community floodplain mana	gement purposes.		icho.	
34. PERMIT NUMBER	G5. DATE PERMIT ISSUED /		DATE CERTIFICATE OF COM	PLIANCE/OCCUPANCY ISSUED	
51-1625	9/10/0/	100	Sheer	0 6/24/02	
. This permit has been issued for.	☐ New Construction ☐ Substantial Improvement				
o. Elevation of as-built lowest floor (D. BFE or (in Zone AO) depth of floo	including basement) of the building is:		ft.(m)	Datum:	
OCAL OFFICIAL'S NAME	ooming at the building site is:	1-11-1-1	ft.(m)	Datum:	
		TITLE			
OMMUNITY NAME		TELEPHO	ONE		
SIGNATURE					
COMMENTS					
			,		
			**	Check here if attachment	

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Any insuror of title relying hereon and any other party in interest:

In consideration of the fee paid for making this survey. I hereby certify to its accuracy (except such easements, if any, that may exist below the surface of the land or on the surface of the lands and not visible) as an inducement for any insuror of title to insure the title to the lands and premises as shown therein. This certification is made only to above named parties for purchase and/or mortgage of herein delineated property by above named purchaser. No responsibility or disability is assumed by Surveyor for use of survey for any other purpose including but not limited to use of survey for survey affidavit, resale of property, or to any other person not listed in certification, either dimectly or indirectly.

DAVIDIC KRUGEŘ

PLAN OF SURVEY

LOT 8 **BLOCK 70.28**

> CITY OF OCEAN CITY CAPE MAY COUNTY, N.J.

DAVID C. KRUGER ASSOCIATES

Land Surveying • Planning

3323 Simpson Avenue, Suite 6 • Ocean City, NJ:

		date 11.8.2001	drown P.T.	
FINGS CONST	4.24.02	scale 1" = 20'	cheeked o.k.	
revirion!	.date ::	book - pg	Proj. 8042	

NJ.P.L.S. License No. 30406