

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME <u>IAN + Sandra HAMILTON</u>	For Insurance Company Use: Policy Number _____
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>154 PINNACLE RD</u>	Company NAIC Number _____
CITY <u>OCEAN CITY</u>	STATE <u>NJ</u>
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>TAX MAP LOT 15 Block 70.30</u>	ZIP CODE <u>08226</u>
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) <u>Resid.</u>	
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or ###.####")	HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____ <input checked="" type="checkbox"/> NGVD 29

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>345310</u>	B2. COUNTY NAME <u>CAPE MAY</u>	B3. STATE <u>NJ</u>
B4. MAP AND PANEL NUMBER <u>0001</u>	B5. SUFFIX <u>C</u>	B6. FIRM INDEX DATE <u>9/5/84</u>
B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) <u>A7</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>Elev 9</u>

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 C3a-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? ☒ Yes ☐ No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>13.7</u> ft.(m)
<input type="checkbox"/> b) Top of next higher floor	<u>22.7</u> ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>N/A</u> ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>N/A</u> ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>13.7</u> ft.(m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>10.9</u> ft.(m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>11.1</u> ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>14</u>
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>1792</u> sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

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 <u>THOMAS P. KARR</u>	LICENSE NUMBER <u>GS 31269</u>
TITLE <u>LAND SURVEYOR (OWNER)</u>	COMPANY NAME <u>KARR LAND SURVEYING</u>
ADDRESS <u>35C S. Shore RD.</u>	CITY <u>MARMONA</u>
SIGNATURE <u>Thomas P. Karr</u>	STATE <u>NJ</u>
DATE <u>3/7/00</u>	ZIP CODE <u>08223</u>
	TELEPHONE <u>609-390-7936</u>

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

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

☐ 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 E3. 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.
- E3. 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, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here.

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 99-1295	G5. DATE PERMIT ISSUED 7/30/99	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 3/10/2000
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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:

G9. BFE or (in Zone AO) depth of flooding at the building site is:

_____ ft.(m) Datum: _____
_____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

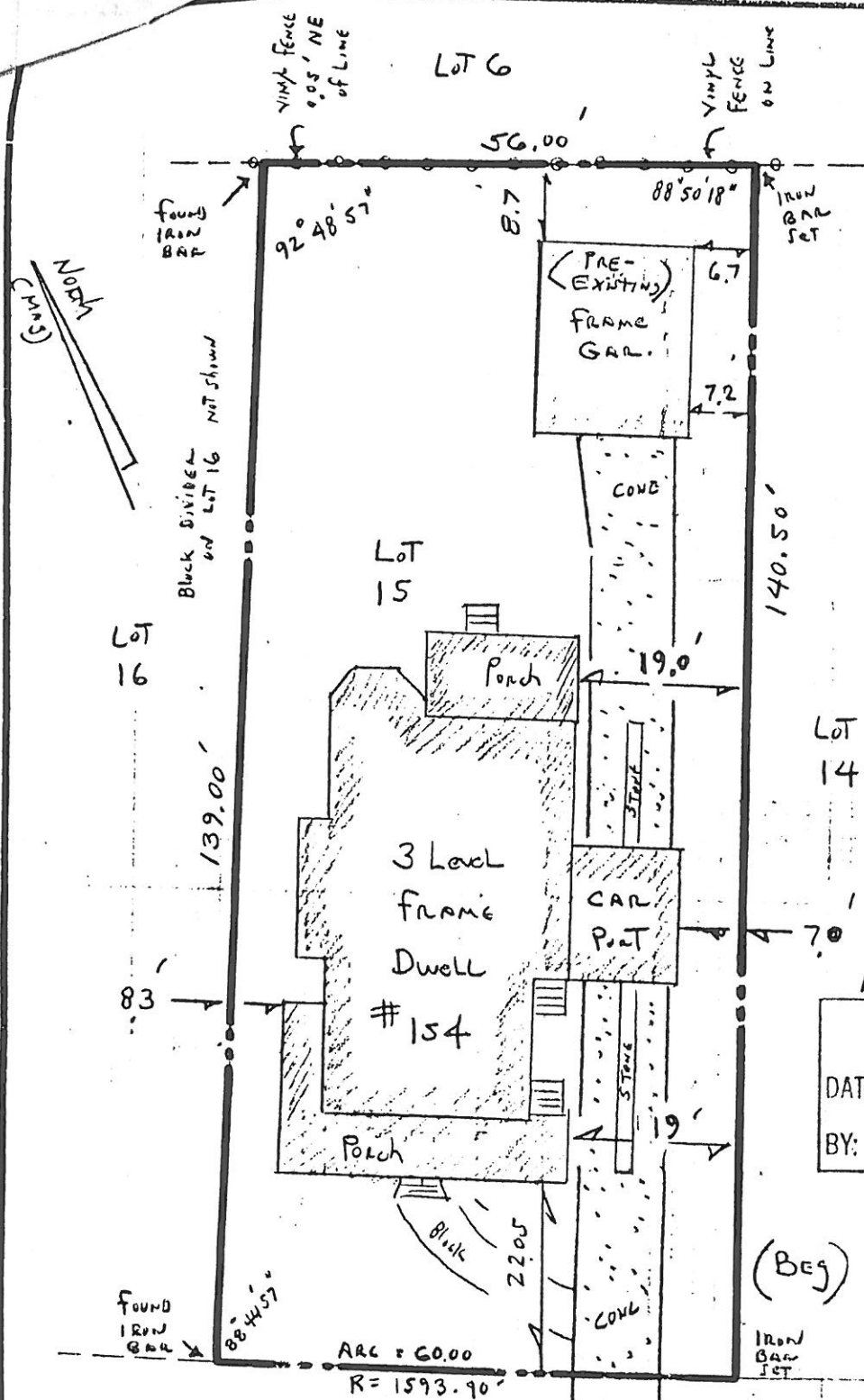
TELEPHONE

SIGNATURE

DATE

COMMENTS

☐ Check here if attachments



ISSUED TO:

IAN HAMILTON

PANDRA HAMILTON

Shore TITLE Agency Inc

Phoenix Financial Group

(its successors and/or assigns)

ELEV ARE NGVD 29

Roof Peak 41.39 ELEV

of Pinnacle Road 1091 ELEV

Diff 30.48 feet

APPROVED

DATE: 3-9-00

BY: *[Signature]*

CITY OF OCEAN CITY

ZONING

MAR 7 3 37 PM '00

ROAD (60'w)

GULL

Limit of foundation

(20.99 %)

Bldg Porches and CONC

(39.66 %)

FINAL ASBUILT

CONTAINING: 8,113.5 SQUARE FEET (MORE OR LESS)

IDENTIFIED AS BEING: LOT 15 BLOCK 70.30 ON THE CURRENT OCEAN CITY TAX MAP

AND ALSO: THE WESTERLY PART OF LOT 2626, ALL OF LOT 2627 AND THE EASTERLY 20 FEET OF LOT 2628, BLOCK 26-G AS SHOWN ON FILED MAP # 368

KARR

LAND SURVEYING

mailing address → P.O. BOX 89

OCEANVIEW, N.J. 08230

PHONE 609 390 7936 FAX 390 7937

THOMAS P. KARR

NJ PROFESSIONAL LAND SURVEYOR

NJ SURVEYORS LICENSE # 31269

location: route 9 MARMORA NJ

PLAN OF SURVEY

BLOCK(s) 70.30 LOT(s) 15

OCEAN CITY

COUNTY OF CAPE MAY

NEW JERSEY

TYPE THREE

Date 3-7-00 Drawn By GWS

Scale 1" = 20' Chk'd By TK

REVISIONS

Date

PROJECT NO. 94352