

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

BUILDING OWNER'S NAME		For Insurance Company Use:	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.		Policy Number	
CITY	STATE	Company NAIC Number	
OCEAN CITY	NJ	08226	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)			
TAX MAP Lot 2 Block 70.40			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)			
RESIDENTIAL			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or ###.###)		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:	
		<input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	

## 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.J.	
B4. MAP AND PANEL NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)
aw1	C	7.15.92	9/5/84	A7	10

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.

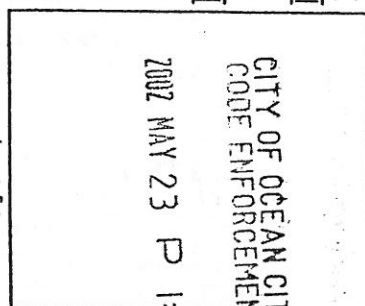
C2. Building Diagram Number 6 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

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-l 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 1 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>9.71</u> ft.(m)
<input type="checkbox"/> b) Top of next higher floor	<u>18.61</u> ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>NA</u> ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	<u>9.71</u> ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	<u>10.6</u> ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	<u>9.5</u> ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	<u>9.7</u> ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>11</u>
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	<u>2376</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	Thomas P. KARR	KARR LAND SURVEYING	LICENSE NUMBER	GS 31269
TITLE	Prof. LAND SURVEYOR	COMPANY NAME		
ADDRESS	PO BOX 89	CITY	SEAVILLE	STATE
SIGNATURE	Thomas P. Karr	DATE	5/03/02	TELEPHONE
				609 390 7936

IMPORTANT: In these spaces, copy the corresponding information from Section A.		For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.		Policy Number:
# 9 NASAU RD		
CITY: OCEAN CITY NJ	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 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 8-8 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

☐ 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 01-2279	G6. DATE PERMIT ISSUED 11/16/01	G8. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 5/29/02
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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: \_\_\_\_\_

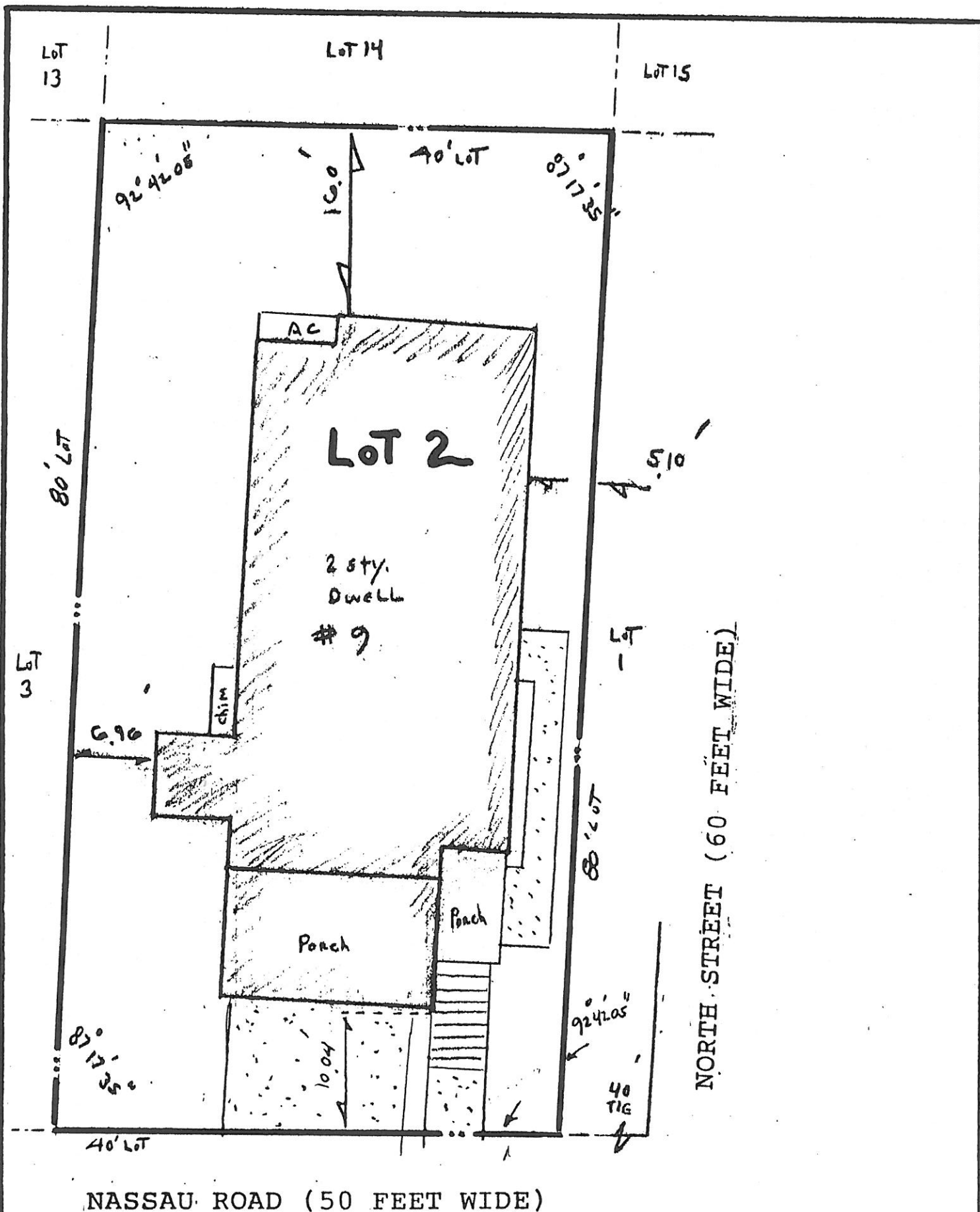
LOCAL OFFICIAL'S NAME \_\_\_\_\_ TITLE \_\_\_\_\_

COMMUNITY NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

COMMENTS

☐ Check here if attachments



TOTAL LOT AREA: 3175.5 SF

LIMIT OF FOUNDATION 32.27 %  
BLDG PORCHES AND CONC 48.05 %

FINAL ASBUILT

GIEV ARE NGVD 29

Roof PEAK GIEV 40.01  
E NASSAU ROAD 9.44

Diff. 30.57 Feet

<b>KARR</b> <b>LAND SURVEYING</b> mailing address → P.O. BOX 89 OCEANVIEW, N.J. 08230 PHONE 609 390 7936 FAX 390 7937 <b>THOMAS P. KARR</b> NJ PROFESSIONAL LAND SURVEYOR NJ SURVEYORS LICENSE # 31269 location: route 9 MARMORA NJ		<b>PLAN OF SURVEY</b> BLOCK(s) <u>70.40</u> LOT(s) <u>2</u> <u>OCEAN CITY</u> COUNTY OF <u>CAPE MAY</u> NEW JERSEY TYPE THREE SURVEY THIS IS NOT AN ALTA STANDARD SURVEY REVISIONS _____ Date _____ DATE OF PLAN <u>5/3/02</u> Drawn By _____ SCALE <u>1" = 10'</u> Ch'd By _____ PROJECT NO. <u>00310</u>	
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