

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

10-188

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name JOHN AND DIANE MYERS		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 19 BEACH ROAD		Company NAIC Number
City OCEAN CITY State NJ ZIP Code 08226		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 3.01 BLOCK 70.41		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		Horizontal Datum: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
A5. Latitude/Longitude: Lat. <u>N 39° 17' 04.29"</u> Long. <u>W 74° 33' 25.09"</u>		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>9</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>1,625</u> sq ft		a) Square footage of attached garage <u>NA</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>14</u>		b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b <u>2,800</u> sq in		c) Total net area of flood openings in A9.b _____ sq in
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number OCEAN CITY 345310		B2. County Name CAPE MAY		B3. State NJ	
B4. Map/Panel Number 345310-0001	B5. Suffix C	B6. FIRM Index Date 7-15-92	B7. FIRM Panel Effective/Revised Date 9-5-84	B8. Flood Zone(s) A-7	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10 FT
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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-h below according to the building diagram specified in Item A7. Use the same datum as the BFE. Benchmark Utilized <u>PRVT</u> Vertical Datum <u>1929</u> Conversion/Comments <u>NONE</u>	
Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>8.6</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor <u>11.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) <u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) <u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>11.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG) <u>9.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG) <u>9.9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>NA</u>	<input checked="" type="checkbox"/> feet <input 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. <input checked="" type="checkbox"/> Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
_____ Certifier's Name JAMES E. SCHWAB III	_____ License Number 24GS03353600
_____ Title LAND SURVEYOR	_____ Company Name SCHWAB LAND SURVEYING AND PLANNING, LLC
_____ Address 8 EAST 10 <sup>TH</sup> STREET	_____ City OCEAN CITY State NJ ZIP Code 08226
_____ Signature 	_____ Date 7/25/12 Telephone 609-398-0565

**NOTE: In these spaces, copy the corresponding information from Section A.**

Shipping Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
19 BEACH ROAD

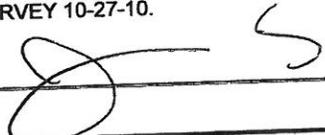
City OCEAN CITY State NJ ZIP Code 08226

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 A8B - ALL VENTS ARE SMART VENT BRAND MODEL #1540-510 RATED AT 200 SQ. IN. NET FREE AREA EACH PER THE MANUFACTURER (SEE ATTACHED). C2A IS CRAWL SPACE, C2B IS FIRST FLOOR. C2E IS FURNACE DATE OF FIELD SURVEY 10-27-10.

Signature  Date 7/25/11  Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

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, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.  
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.

E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 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 \_\_\_\_\_  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. Check the measurement used in Items G8 and G9.

G1.  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.)

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 20111405	G5. Date Permit Issued 11/3/11	G6. Date Certificate Of Compliance/Occupancy Issued 8/8/12
-------------------------------	-----------------------------------	---

G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters (PR) Datum \_\_\_\_\_

G10. Community's design flood elevation \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

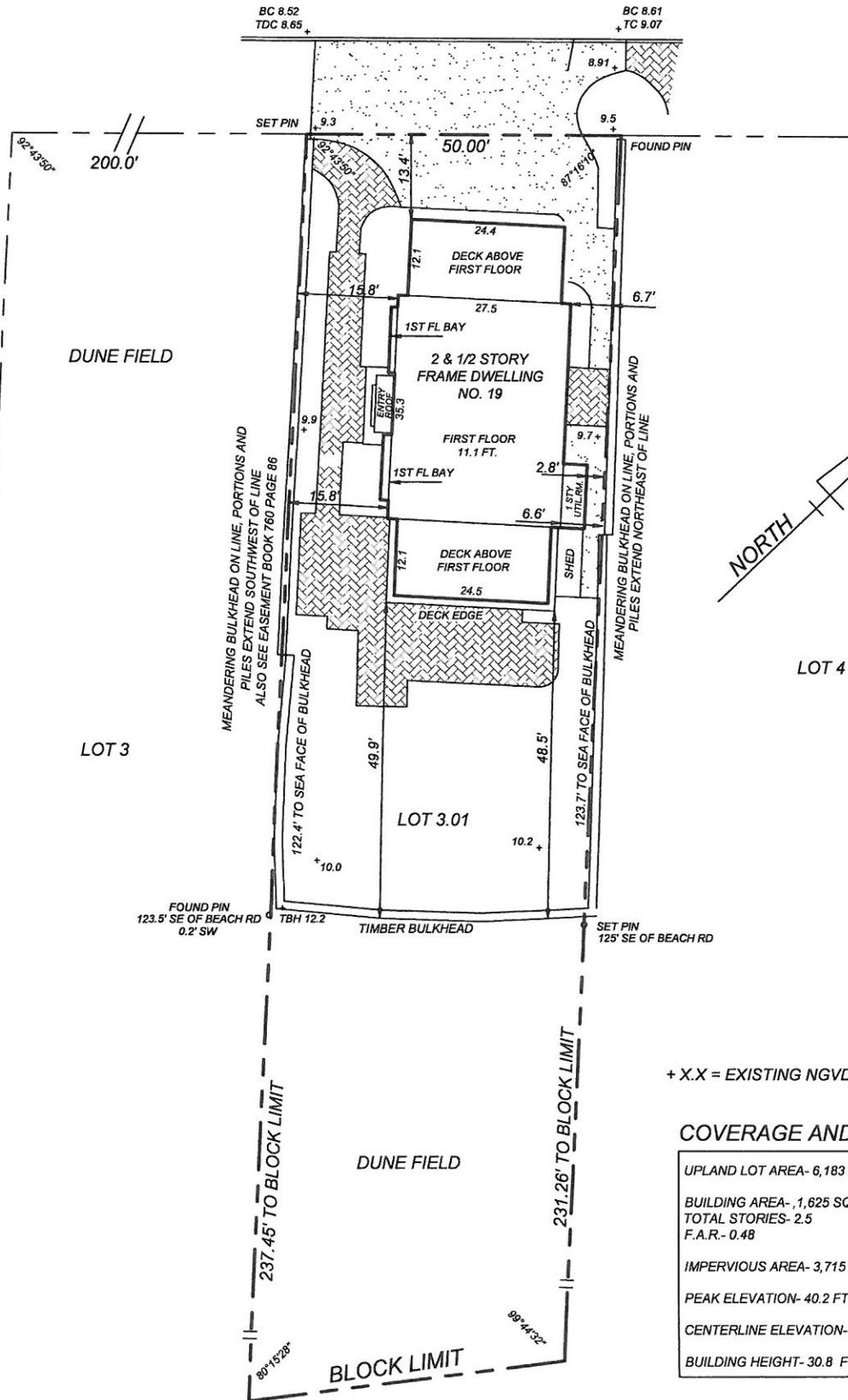
Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

# BEACH ROAD (60' WIDE)

NORTH STREET (60' WIDE)



### COVERAGE AND HEIGHT

UPLAND LOT AREA- 6,183 SQ.FT.
BUILDING AREA- 1,625 SQ.FT., 26.3 %
TOTAL STORIES- 2.5
F.A.R.- 0.48
IMPERVIOUS AREA- 3,715 SQ. FT., 60%
PEAK ELEVATION- 40.2 FT.
CENTERLINE ELEVATION- 9.38 FT.
BUILDING HEIGHT- 30.8 FT.

### FINAL CONSTRUCTION SURVEY ---NOT FOR CONVEYANCE---

**LOT 3.01 BLOCK 70.41  
CITY OF OCEAN CITY  
CAPE MAY COUNTY, NJ**

DATE : JULY 19, 2012 SCALE : 1" = 20' DWN.BY : JES

**SCHWAB LAND SURVEYING  
AND PLANNING, LLC**

8 EAST 10TH STREET  
OCEAN CITY, NJ 08226

TELE 609-398-0565 FAX 398-1861

CERTIFICATE OF AUTHORIZATION NO. 24GA28101600

FILE : 10-188 FIELD BOOK : -----

ISSUED TO:  
GREAT ATLANTIC BUILDERS

THIS SURVEY IS FOR USE IN APPLYING FOR MUNICIPAL APPROVAL OF NEW CONSTRUCTION. THE SURVEYOR WILL ACCEPT NO RESPONSIBILITY FOR ITS USE FOR ANY OTHER PURPOSE.

*James E. Schwab III*  
**JAMES E. SCHWAB III**  
PROFESSIONAL LAND SURVEYOR  
NEW JERSEY LIC. 24GS03353600  
PROFESSIONAL PLANNER  
NEW JERSEY LIC. 31LI00408600