

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME FAZZIO DEVELOPMENT CORP.	For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 824 FIRST STREET	Company NAIC Number

CITY OCEAN CITY	STATE NJ	ZIP CODE 08226
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PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
BLOCK 102 LOT 12

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)
RESIDENTIAL

LATITUDE/LONGITUDE (OPTIONAL) (##° -##' -###" or ###.####")	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____
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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
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B4. MAP AND PANEL NUMBER 345310 0001	B5. SUFFIX C	B6. FIRM INDEX DATE 7-15-1992	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9-5-1984	B8. FLOOD ZONE(S) A-7	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 9.0
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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 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 **1929** Conversion/Comments **NO CONVERSION**

Elevation reference mark used **CMCMA** Does the elevation reference mark used appear on the FIRM? Yes No

- a) Top of bottom floor (including basement or enclosure) **8.8 ft.(m)**
- b) Top of next higher floor **14.0 ft.(m)**
- c) Bottom of lowest horizontal structural member (V zones only) **NA ft.(m)**
- d) Attached garage (top of slab) **9.5 ft.(m)**
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) **11.3 ft.(m)**
- f) Lowest adjacent (finished) grade (LAG) **8.8 ft.(m)**
- g) Highest adjacent (finished) grade (HAG) **9.3 ft.(m)**
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade **13**
- i) Total area of all permanent openings (flood vents) in C3.h **2925 sq. in. (sq. cm)**

License Number, Embossed Seal, Signature, and Date

LIC#33531

[Signature]

4-22-04

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 **GORDON M. LUDWIG, SOLE MEMBER** LICENSE NUMBER **24GS03353100**

TITLE **LAND SURVEYOR** COMPANY NAME **POINT TO POINT SURVEYING CO. LLC.**

ADDRESS **P.O. BOX 299** CITY **SOMERS POINT** STATE **NJ** ZIP CODE **082444**

SIGNATURE *[Signature]* DATE **4-22-04** TELEPHONE **609-927-9295**

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. 824 FIRST STREET			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

C3-A IS THE CRAWL SPACE (MORE OR LESS). C3-B IS THE FIRST FLOOR. THERE ARE 7 15" X 15" VENTS ON HOUSE (1575 SQ. INCHES) AND 6 15" X 15" VENTS ON GARAGE (1350 SQ. INCHES). C3-E IS THE HEATER. AIR CONDITIONER ELEVATION IS 11.6. NOTE VENTS ARE LOUVERED.

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 6-8 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. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. 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 03-2001/2062	G5. DATE PERMIT ISSUED 10/16/03	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 4/26/04
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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:

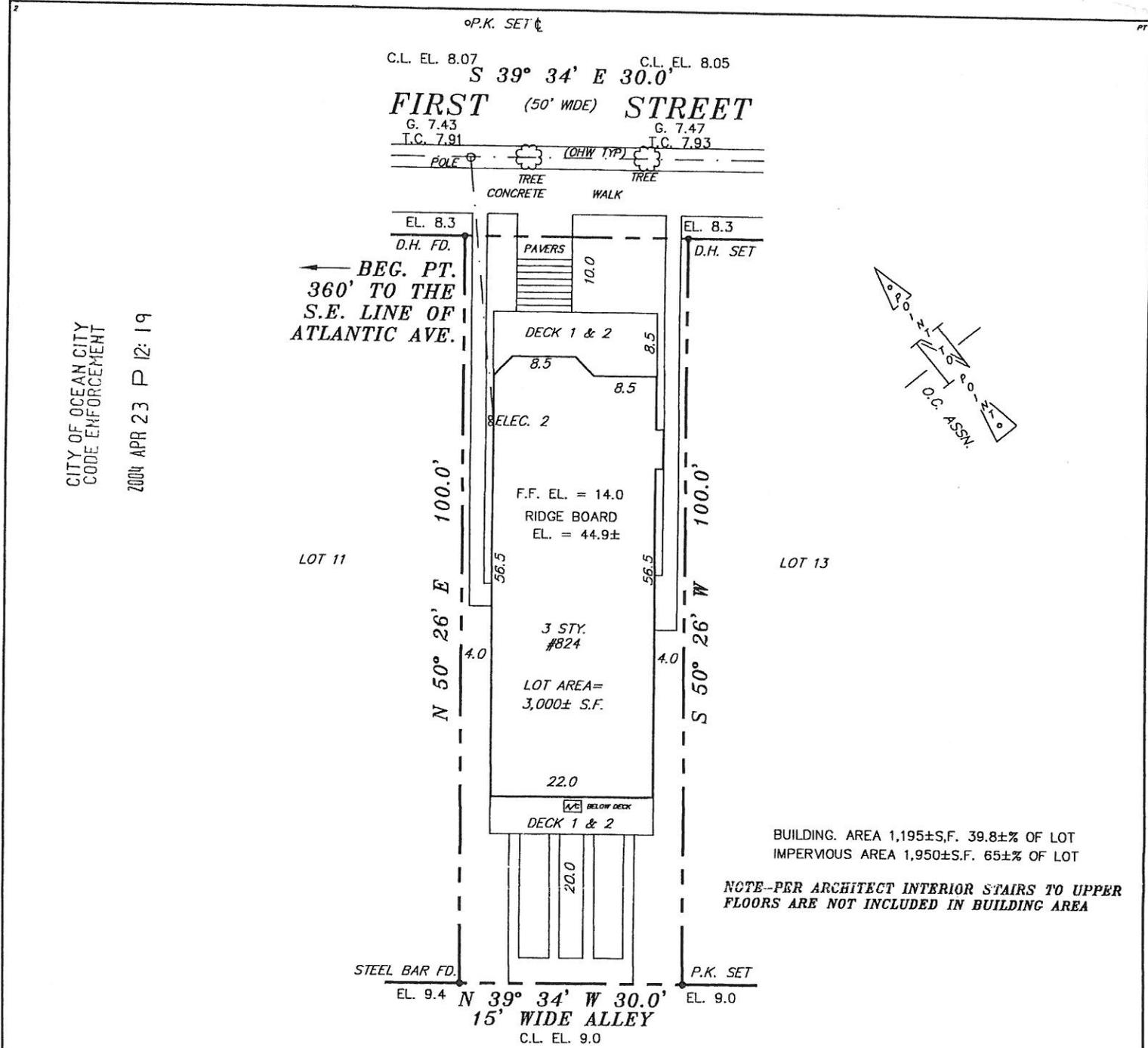
_____. ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS



CITY OF OCEAN CITY
CODE ENFORCEMENT

2004 APR 23 P 12:19

BEG. PT.
360' TO THE
S.E. LINE OF
ATLANTIC AVE.

LOT 11

LOT 13

BUILDING AREA 1,195±S.F. 39.8±% OF LOT
IMPERVIOUS AREA 1,950±S.F. 65±% OF LOT

NOTE--PER ARCHITECT INTERIOR STAIRS TO UPPER FLOORS ARE NOT INCLUDED IN BUILDING AREA

PROPERTY IS LOCATED IN FLOOD ZONE 'A-7'

POSSIBLY SUBJECT TO GENERAL NEIGHBORHOOD SCHEME OF RESTRICTIONS OF OCEAN CITY ASSOCIATION AND/OR OCEAN CITY IMPROVEMENT COMPANY.

SUBJECT TO EASEMENTS, RESTRICTIONS, COVENANTS ETC. THAT A FULL REPORT OF TITLE MAY DISCLOSE.

ELEVATIONS NJVD 1929

BLOCK AND LOT NUMBERS REFER TO THE CURRENT TAX MAP OF THE CITY OF OCEAN CITY.

GENERAL NOTES:

TITLE SEARCH:
THIS SURVEY HAS BEEN PREPARED WITHOUT THE BENEFIT OF A TITLE SEARCH AND IS SUBJECT TO EASEMENTS, VALIDITY OF CHAIN OF TITLE, ETC., THAT A FULL TITLE SEARCH MAY DISCLOSE.

WETLANDS: (UNLESS OTHERWISE NOTED HEREON)
NO FRESHWATER WETLANDS, RIGHTS OR INTERESTS OF THE UNITED STATES OF AMERICA OR THE STATE OF NEW JERSEY OVER LANDS NOW OR FORMERLY FLOWED BY TIDE WATERS BUT NO LONGER VISIBLE ARE PHYSICALLY EVIDENT OR LANDS CONTAINING OR AFFECTED BY ANY ANIMAL, MARINE OR BOTANICAL SPECIES REGULATED, PROTECTED BY OR UNDER THE JURISDICTION OF ANY FEDERAL, STATE, OR LOCAL AGENCY HAVE BEEN LOCATED OR DELINEATED AS PART OF THIS PROJECT.

UTILITIES:
NO ATTEMPT WAS MADE TO LOCATE THE UNDERGROUND UTILITIES WHICH MAY EXIST ON THIS PROPERTY. PRIOR TO ANY EXCAVATION, CONTRACTOR SHALL BE RESPONSIBLE TO DETERMINE THEIR EXACT LOCATION.

HAZARDOUS SUBSTANCE:
WE ARE NOT EXPERTS IN THE DETECTION AND IDENTIFICATION OF POTENTIALLY HAZARDOUS SUBSTANCES, NOR DOES THIS PLAN PURPORT TO REVEAL THE PRESENCE OF SUCH SUBSTANCES.

BUILDING OFFSETS:
ALL BUILDING OFFSETS ARE TO THE FACE OF SIDING UNLESS OTHERWISE NOTED.

ISSUED TO:

1- FAZZIO DEVELOPMENT CORP.,

IN CONSIDERATION OF A FEE PAID

I DECLARE THAT TO THE BEST OF MY PROFESSIONAL KNOWLEDGE, INFORMATION, AND BELIEF, THIS MAP OR PLAN IS A RESULT OF A FIELD SURVEY MADE BY ME OR UNDER MY DIRECT SUPERVISION, IN ACCORDANCE WITH THE RULES AND REGULATIONS OF THE "STATE BOARD OF PROFESSIONAL ENGINEERS AND LAND SURVEYORS, NJAC 13:40-5.1 LAND SURVEYORS", PREPARATION OF LAND SURVEYS." THE INFORMATION SHOWN HEREON CORRECTLY REPRESENTS THE CONDITIONS FOUND AS OF THE DATE OF THE FIELD SURVEY, EXCEPT SUCH IMPROVEMENTS OR EASEMENTS "OF RECORD" IF ANY BELOW THE SURFACE AND NOT VISIBLE. THIS DECLARATION IS GIVEN SOLELY TO THE ABOVE NAMED PARTIES FOR THIS TRANSACTION ONLY AND IS NOT TRANSFERABLE EXCEPT AS FOLLOWS:
A. TO THE TITLE INSURER SO IT MAY INSURE TITLE TO THE PREMISES SHOWN HEREON.
B. TO THE MORTGAGE HOLDER THE DECLARATION SHALL SURVIVE TO ITS SUCCESSOR(S) AND/OR ASSIGN(S).

CAUTION: IF THIS DOCUMENT DOES NOT CONTAIN THE RAISED IMPRESSION SEAL OF THE PROFESSIONAL WHOSE NAME APPEARS HEREON, IT IS NOT AN AUTHORIZED ORIGINAL DOCUMENT AND MAY HAVE BEEN ALTERED.

**FINAL
CONST. SURVEY**

BLOCK 102 LOT 12
CITY OF OCEAN CITY
CAPE MAY COUNTY NJ

POINT TO POINT SURVEYING CO., L.L.C.

P.O. BOX 299 SOMERS POINT, NJ 08244
609-927-9295 FAX 609-653-8404
CERT. OF AUTH. # 24GA28059900

GORDON M. LUDWIG
LICENSED LAND SURVEYOR
NJ LICENSE # 24GS03353100

Gordon M. Ludwig
DATE: APRIL 22, 2004

SOLE MEMBER

DATE:	APRIL 2004	DRAWN BY:	G.M.L.
SCALE:	1" = 15'	CALC'D BY:	G.M.L.
PROJ. NO.:	03-0296-B	CHK'D BY:	G.M.L.