

## ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:	
BUILDING OWNER'S NAME		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 859-861 SECOND STREET		Company NAIC Number	
CITY OCEAN CITY	STATE NJ	ZIP CODE 08226	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX map Lot 28 Block 103			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section 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:	

## 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 AND PANEL NUMBER 0001	B5. SUFFIX C	B6. FIRM INDEX DATE 7/5/82	B7. FIRM PANEL EFFECTIVE/REVISED DATE 9/5/84	B8. FLOOD ZONE(S) A7	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 10 ELEV

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: NA

## 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 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 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>7.74</u> ft(m)
<input type="checkbox"/> b) Top of next higher floor	<u>10.74</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>7.74</u> ft(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>10.7</u> ft(m)
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>7.4</u> ft(m)
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>7.0</u> ft(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>17</u>
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>3536</u> 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 THOMAS P. KARR	LICENSE NUMBER GS 31269
TITLE LAND SURVEYOR (OWNER)	COMPANY NAME KARR LAND SURVEYING
ADDRESS 35C S. PHOENIX RD.	CITY MARLTON
SIGNATURE Thomas P. Karr	STATE NJ
DATE 5/10/00	ZIP CODE 08223
TELEPHONE 609-390-7936	

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

COMMENTS

☐ Check here if attachments

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

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

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

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

COMMENTS

☐ Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

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

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

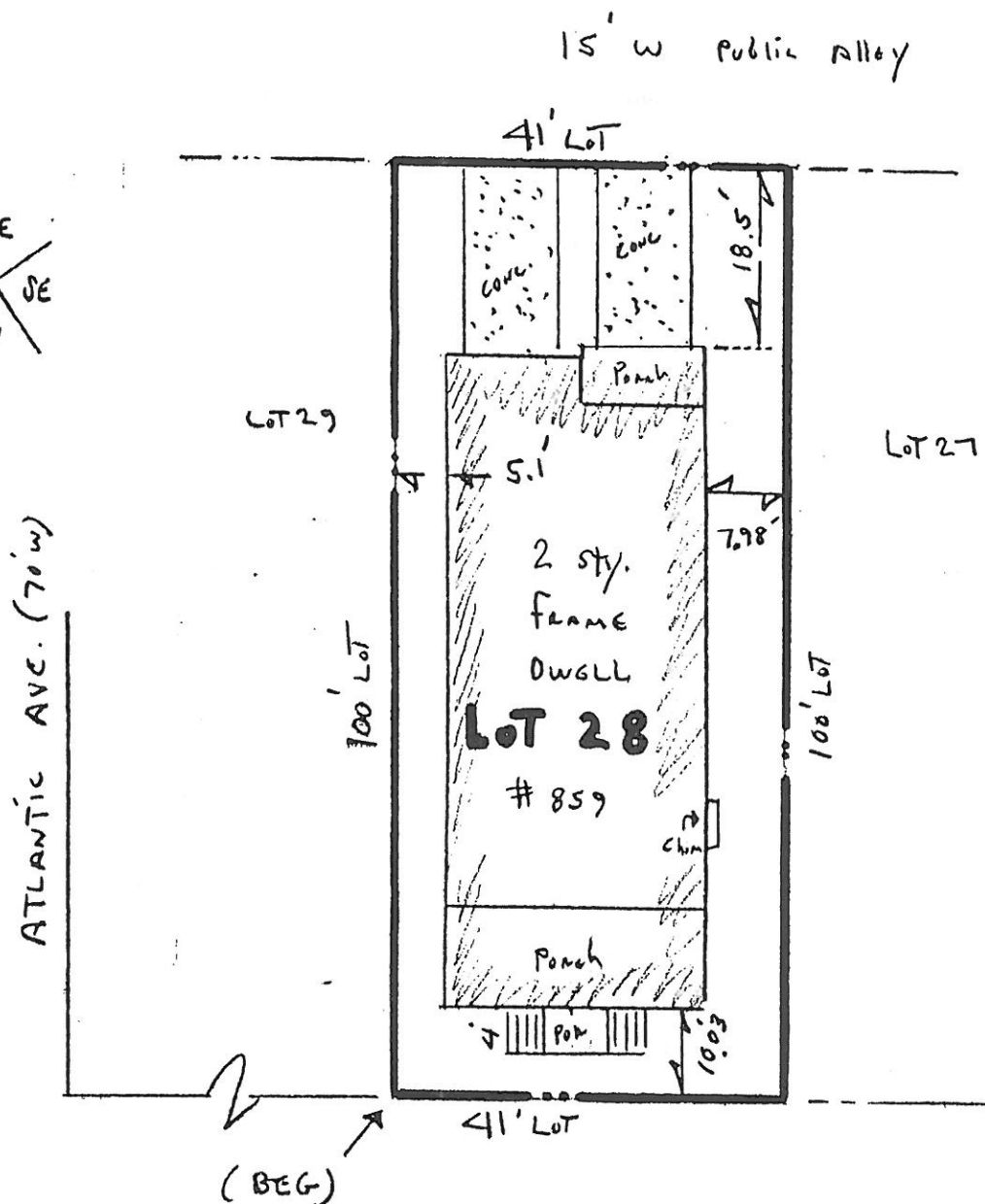
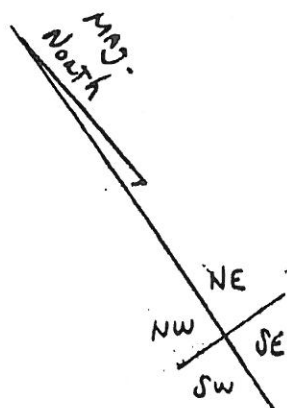
TELEPHONE

SIGNATURE

CATE

COMMENTS

☐ Check here if attachments



NOTE:

41' x 100' LOT

ALL LOT CORNERS  
ARE 90°

ELEV ARE NGVD '29

Roof Peak Elev 41.84

E of 2nd St. Elev 6.86

Diff 34.99 feet

Second St. (60'w)

TOTAL LOT AREA 4100 SF

Limit of foundation (39.2%)

Block Patches and CONC (59.4%)

FINAL ASBUILT

<b>KARR</b> -CD- <b>LAND SURVEYING</b>		<b>PLAN OF SURVEY</b>	
mailing address	P.O. BOX 89 OCEANVIEW, N.J. 08230	BLOCK 103	LOT 28
PHONE 609 390 7936 FAX 390 7937		OCEAN CITY	
THOMAS P. KARR NJ PROFESSIONAL LAND SURVEYOR NJ SURVEYORS LICENSE # 31269 location: route 9 MARMORA NJ		COUNTY OF CAPE MAY NEW JERSEY	
TYPE THREE SURVEY		DATE OF PLAN	Drawn By TK
THIS IS NOT AN ALTA STANDARDS SURVEY		5/10/00	Chk'd By JK
REVISIONS		SCALE	1" = 20'
Date		PROJECT NO. 99330	