

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008
Expires March 31, 2012

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 853 2nd STREET		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 31.01, BLOCK 103

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 39-16'-59" N Long. 74-33'-44" W Horizontal Datum: ☒ NAD 1927 ☐ NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 8

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) 600 sq ft

b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 6

c) Total net area of flood openings in A8.b 1296 sq in

d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

a) Square footage of attached garage 600 sq ft

b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 3

c) Total net area of flood openings in A9.b 600 sq in

d) Engineered flood openings? ☒ Yes ☐ No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number 3453100001 C		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) 9

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.

☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other (Describe) _____

B11. Indicate elevation datum used for BFE in Item 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 _____ ☐ CBRS ☐ OPA

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. 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 LOCAL Vertical Datum 1929

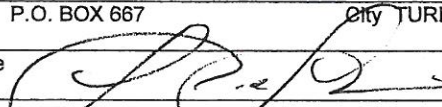
Conversion/Comments N/A

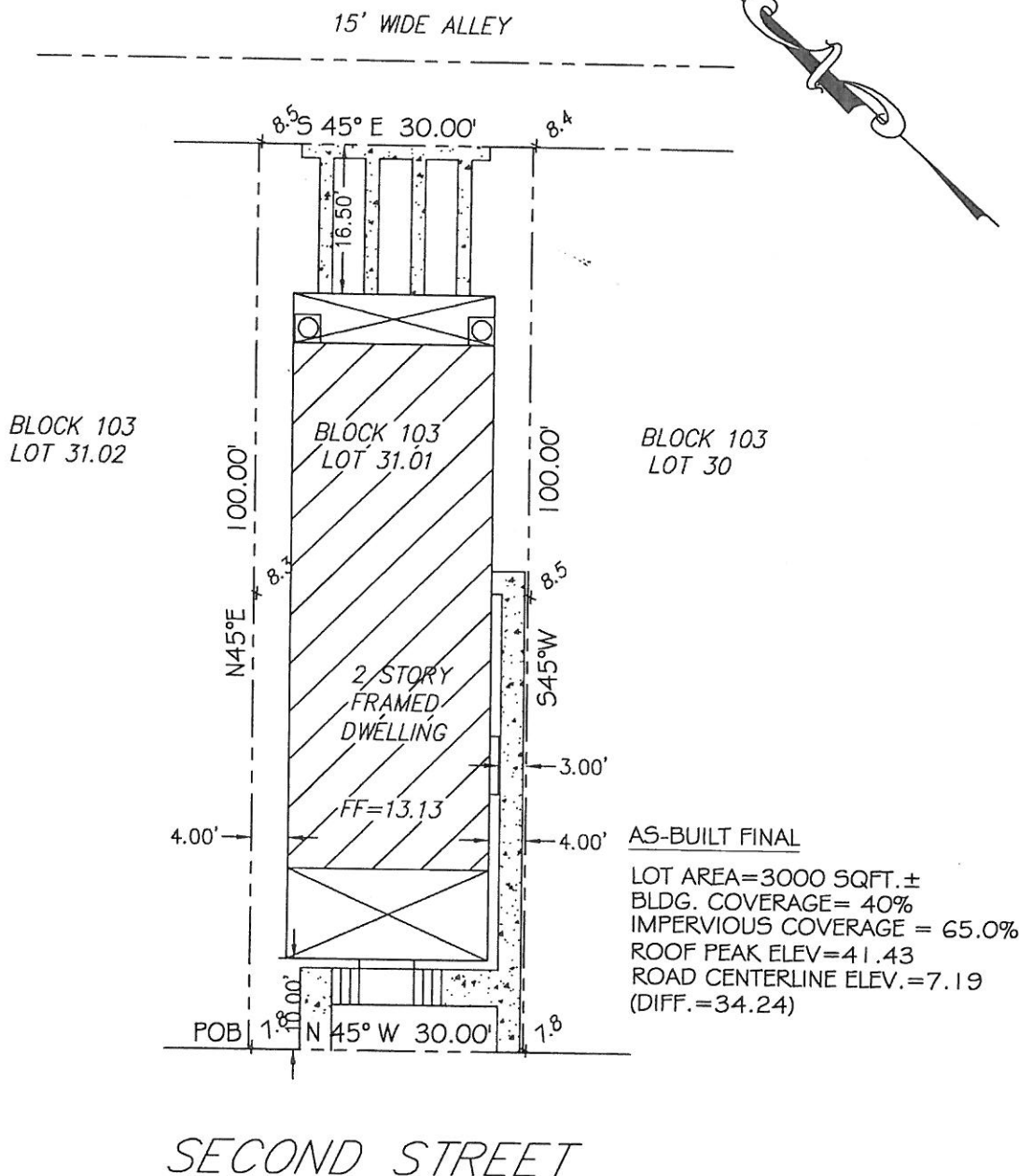
		Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>8.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
b) Top of the next higher floor <u>13.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
c) Bottom of the lowest horizontal structural member (V Zones only) <u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
d) Attached garage (top of slab) <u>9.1</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>9.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
f) Lowest adjacent (finished) grade next to building (LAG) <u>8.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)		
g) Highest adjacent (finished) grade next to building (HAG) <u>8.8</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>9.0</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. ☒

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

Certifier's Name THOMAS N. TOLBERT		License Number 38608	
Title PRESIDENT		Company Name DESIGN LAND SURVEYING, P.A.	
Address P.O. BOX 667		City TURNERSVILLE	State NJ ZIP Code 08012
Signature 	Date 03/08/11	Telephone 856-374-1134	



- THIS SURVEY PLAN IS BASED ON TAX MAP INFORMATION ONLY
- THIS SURVEY PLAN IS NOT A GUARANTEE OF OWNERSHIP
- BEING LOT 31.01, BLOCK 103, TAX MAP OF THE CITY OF OCEAN CITY
- SURVEYOR RESERVES THE RIGHT TO REVISE THIS PLAN OF SURVEY UPON RECEIPT AND REVIEW OF AN ACCURATE TITLE REPORT AND AN ACCURATE ABSTRACT ON ALL LOTS AFFECTED BY, OR ADJOINING TO, THE PROPERTY IN QUESTION.
- NO ATTEMPT WAS MADE TO LOCATE THE UTILITIES WHICH MAY EXIST ON THIS PROPERTY.
- PRIOR TO ANY EXCAVATION, CONTRACTOR SHALL BE RESPONSIBLE TO DETERMINE THEIR EXACT LOCATION.
- SUBJECT TO BUILDING REGULATIONS, RESTRICTIONS, EASEMENTS, RIGHTS-OF-WAY, COVENANTS, RESERVATIONS AND AGREEMENTS OF RECORD, IF ANY.

Design Land Surveying P.A.

MEMBER OF:

BLSJ

P.O. Box 667 Turnersville, N.J. 08012

Toll Free Phone 1-800-418-9373

Phone (856) 374-1134 - Fax (856) 589-0246

DATE 11/23/10

SCALE 1"=20'

DRN: TNT

SURVEY NO.

1007015

SKETCH PLAT

853 SECOND STREET

SITUATE IN:

CITY OF OCEAN CITY
CAPE MAY COUNTY
NEW JERSEY

REV: 3/08/11 (FINAL)

TO: HALLIDAY & LEONARD

In consideration of the fee paid for making this survey, I hereby declare that the said survey accurately depicts the legal description furnished to me. No responsibility is assumed for (a) the location of easements that may be located below the surface of the lands, or (b) on the surface of the lands, and not visible, or (c) other interests not visible, or matters of title. This declaration is issued solely to the herein named purchaser for any transaction occurring within ninety (90) days of its date. The surveyor shall have no responsibility or liability for any reason unless the fee for the preparation of said survey is paid within thirty (30) days of its billing. Surveyor's liability for any reason shall not exceed the sum of ONE THOUSAND DOLLARS (1,000.00).

THOMAS N. TOLBERT
PROFESSIONAL LAND SURVEYOR
N.J. LIC. GS 38608