

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME

En-Joy Properties

Policy Number

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

904 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.)

Lot 3, Block 200

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

residential

LATITUDE/LONGITUDE (OPTIONAL)

(##° - ##' - ###.###" or ###.####")

HORIZONTAL DATUM:

☐ NAD 1927 ☐ NAD 1983SOURCE: ☐ GPS (Type):☐ USGS Quad Map☐ 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

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)

A7

B9. BASE FLOOD ELEVATION(S)

(Zone AO, use depth of flooding)

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 7 (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 NGVD 29 Conversion/CommentsElevation reference mark used T-2 Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No☐ a) Top of bottom floor (including basement or enclosure)7. 0 ft.(m)☐ b) Top of next higher floor16. 0 ft.(m)☐ c) Bottom of lowest horizontal structural member (V zones only)N/A. ft.(m)☐ d) Attached garage (top of slab)7. 0 ft.(m)☐ e) Lowest elevation of machinery and/or equipment

servicing the building (Describe in a Comments area)

N/A. ft.(m)☐ f) Lowest adjacent (finished) grade (LAG)6. 7 ft.(m)☐ g) Highest adjacent (finished) grade (HAG)6. 9 ft.(m)☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 10☐ i) Total area of all permanent openings (flood vents) in C3.h 3,360 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 David C. Kruger

LICENSE NUMBER NJ Lic. No. 30406

TITLE

Professional Land Surveyor

COMPANY NAME

David C. Kruger Associates

ADDRESS

3323 Simpson Avenue

CITY

Ocean City

STATE

NJ

ZIP CODE

08226

SIGNATURE

DATE

5/24/02

TELEPHONE

(609) 391-9393

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. 904 Second 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

☐ 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. 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 02-0663 + 02-0604	G5. DATE PERMIT ISSUED 4/2/02	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 11/27/09
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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)

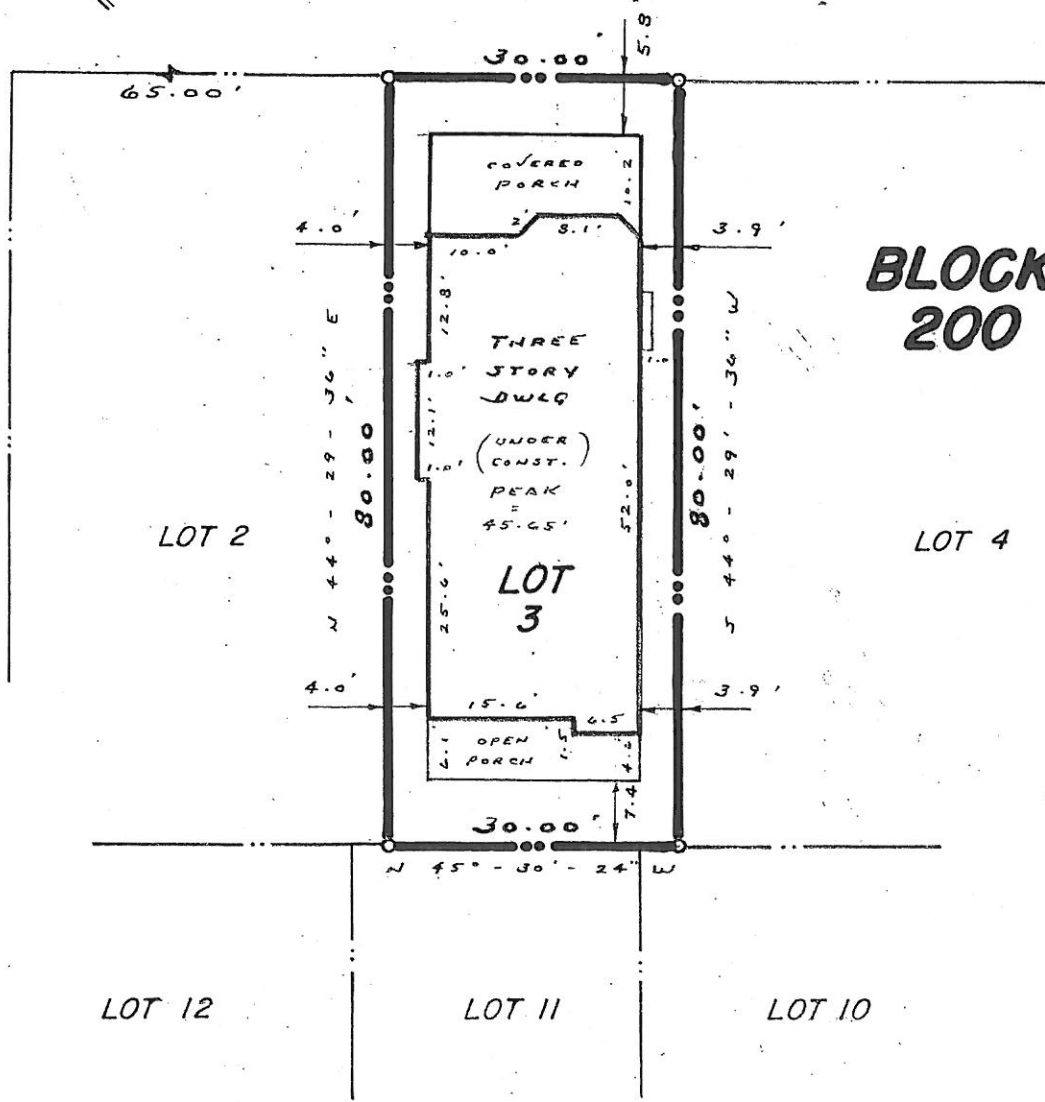
Datum:

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

☐ Check here if attachments

SECOND (60') STREET

CORINTHIAN (60') AVENUE



BLOCK 200

Issued to:
EN-JOY PROPERTIES

FIRST FLOOR ELEVATION = 16.0'
BUILDING COVERAGE = 56.8%

Any insuror of title relying hereon and any other party in interest:
In consideration of the fee paid for making this survey, I hereby certify to its accuracy (except such easements, if any, that may exist below the surface of the land or on the surface of the lands and not visible) as an inducement for any insuror of title to insure the title to the lands and premises as shown therein. This certification is made only to above named parties for purchase and/or mortgage of herein delineated property by above named purchaser. No responsibility or liability is assumed by Surveyor for use of survey for any other purpose including but not limited to use of survey for survey affidavit, resale of property, or to any other person not listed in certification, either directly or indirectly.


DAVID C. KRUGER
N.J.P.L.S. License No. 30406

PLAN OF SURVEY
LOT 3 BLOCK 200
CITY OF OCEAN CITY
CAPE MAY COUNTY, N.J.

DAVID C. KRUGER ASSOCIATES
Land Surveying • Planning
3323 Simpson Avenue, Suite 6 • Ocean City, NJ

			date 5-24-02	drawn P.T.
			scale 1" = 20'	checked D.K.
revision	date	by	book	pg.
				Proj. 8048