

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME <u>203 LOT -3 A D: 11</u>		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>820 SECOND STREET</u>		Company NAIC Number
CITY <u>OCEAN CITY,</u>	STATE <u>NJ</u>	ZIP CODE <u>08226</u>
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>BLOCK 203 LOT :9</u>		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <u>RES.</u>		
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: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>345310 0001 C</u>		B2. COUNTY NAME <u>CAPE MAY</u>	B3. STATE <u>NJ</u>		
B4. MAP AND PANEL NUMBER <u>345310 0001</u>	B5. SUFFIX <u>C</u>	B6. FIRM INDEX DATE <u>9/5/92</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>9/5/84</u>	B8. FLOOD ZONE(S) <u>A 7</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>EL 10</u>

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 1929 Conversion/Comments _____Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? ☐ Yes ☐ No

- a) Top of bottom floor (including basement or enclosure) 9.0 ft.(m)
- b) Top of next higher floor 18.0 ft.(m)
- c) Bottom of lowest horizontal structural member (V zones only) N/A ft.(m)
- d) Attached garage (top of slab) 9.0 ft.(m)
- e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 10.5 ft.(m)
- f) Lowest adjacent (finished) grade (LAG) 8.4 ft.(m)
- g) Highest adjacent (finished) grade (HAG) 8.0 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 200 sq. in. (sq. cm)

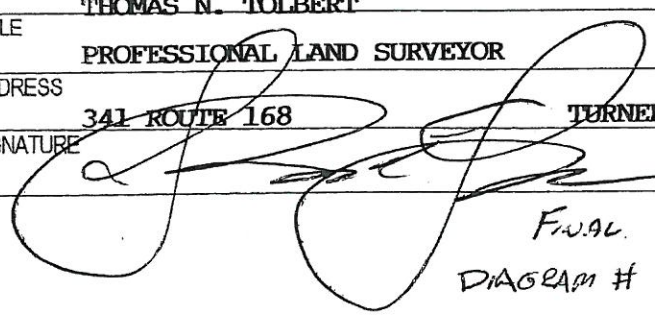
License Number, E
Signature, andTHOMAS N. TOLBERT
NJ LIC. 38608

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 <u>THOMAS N. TOLBERT</u>		LICENSE NUMBER <u>38608</u>	
TITLE <u>PROFESSIONAL LAND SURVEYOR</u>	COMPANY NAME <u>DESIGN LAND SURVEYING</u>		
ADDRESS <u>341 ROUTE 168</u>	CITY <u>TURNERSVILLE</u>	STATE <u>NJ</u>	ZIP CODE <u>08012</u>
SIGNATURE 	DATE <u>8-1-03</u>	TELEPHONE <u>856-374-1134</u>	

FINAL 10-17-03 (REVISED)
DIAGRAM # 10-22-03 REV: (LT. Q. B. K. #)
10-27-03 (REVISED)

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.			Policy Number	
820 SECOND STREET				
CITY	STATE	ZIP CODE	Company NAIC Number	
OCEAN CITY,	NJ	08226		

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 E3. 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 2 (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.

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

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.

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	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
03-1281 103-1282	6/24/03	11/3/03

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:

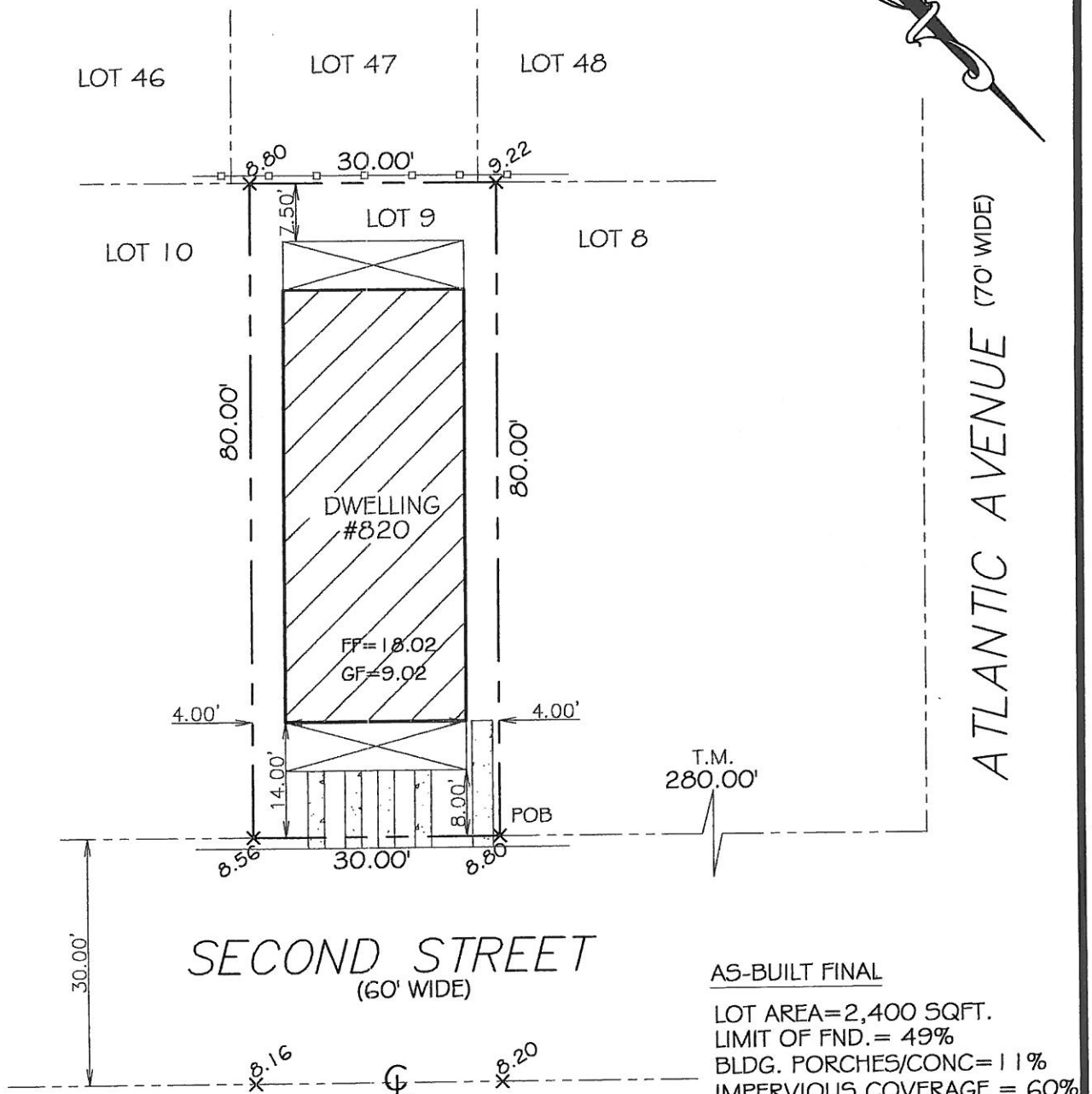
LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

☐ Check here if attachments



- THIS PLAN IS BASED ON TAX MAP INFORMATION ONLY.
- THIS PLAN IS NOT A GUARANTEE OF OWNERSHIP
- BEING LOT 9, BLOCK 203, PLATE 9 TAX MAP OF THE CITY OF OCEAN CITY
- SURVEYOR RESERVES THE RIGHT TO REVISE THIS PLAN 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.

AS-BUILT FINAL

LOT AREA=2,400 SQFT.
LIMIT OF FND.= 49%
BLDG. PORCHES/CONC= 11%
IMPERVIOUS COVERAGE = 60%
ROOF PEAK ELEV.=45.17
ROAD CENTERLINE ELEV.=8.2
(DIFF.=36.97)



Design Land Surveying

341 RTE 168 Turnersville, N.J. 08012

Toll Free Phone 1-800-418-9373

Phone (856) 374-1134 - Fax (856) 374-1061

MEMBER OF:



DATE	03-21-03	SURVEY NO.
SCALE	1"=20'	0303119
DRN:	JLG	

SURVEY OF PREMISES	SITUATE IN:
820 SECOND STREET	CITY OF OCEAN CITY CAPE MAY COUNTY NEW JERSEY

REV: 04-14-03 (BLDG. S/O)
REV: 05-12-03 (REVIEW)
REV: 07-02-03 (AS-BUILT)
REV: 07-25-03 (BLDG. TIES)
REV: 10-21-03 (FINAL SURVEY)

TO: SCOTT HALLIDAY

In consideration of the fee paid for making this plan, I hereby declare that the said plan accurately depicts the tax map furnished to me. My liability is assumed for (a) the location of easements that may be located below the surface of the lands, or (b) the location of the easements, 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 plan is paid within thirty (30) days of billing. Surveyor's liability for any reason shall not exceed the sum of ONE HUNDRED DOLLARS (100.00)

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