

FEDERAL EMERGENCY MANAGEMENT AGENCY  
 NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077  
 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>			For Insurance Company Use:
BUILDING OWNER'S NAME <b>FAZZIO DEVELOPMENT CORP.</b>		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <b>825-27 THIRD STREET</b>		Company NAIC Number	
CITY <b>OCEAN CITY</b>	STATE <b>NJ</b>	ZIP CODE <b>08226</b>	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>BLOCK 205 LOT 38</b>			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <b>RESIDENTIAL</b>			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or ##.#####)		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	

<b>SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION</b>					
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <b>OCEAN CITY 345310</b>		B2. COUNTY NAME <b>CAPE MAY</b>		B3. STATE <b>NJ</b>	
B4. MAP AND PANEL NUMBER <b>345310 0001</b>	B5. SUFFIX <b>C</b>	B6. FIRM INDEX DATE <b>7-15-1992</b>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <b>9-5-1984</b>	B8. FLOOD ZONE(S) <b>A-7</b>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <b>9.0</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): _____					
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.)

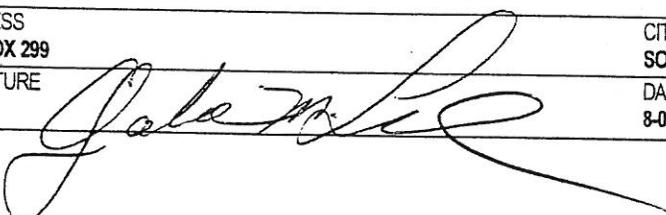
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARIA, AR/AE, AR/A1-A30, AR/AH, AR/AO  
 Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, 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 CMCMUA 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>8.6</u> ft.(m)
<input type="checkbox"/> b) Top of next higher floor	<u>17.3</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>8.6</u> ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	<u>12.4</u> ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	<u>8.6</u> ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	<u>9.1</u> ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade <u>12</u>	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h <u>2700</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 <b>GORDON M. LUDWIG, SOLE MEMBER</b>	LICENSE NUMBER <b>24GS03353100</b>		
TITLE <b>LAND SURVEYOR</b>	COMPANY NAME <b>POINT TO POINT SURVEYING CO. LLC.</b>		
ADDRESS <b>P.O. BOX 299</b>	CITY <b>SOMERS POINT</b>	STATE <b>NJ</b>	ZIP CODE <b>082444</b>
SIGNATURE 	DATE <b>8-03-05 REV 8-05-05</b>	TELEPHONE <b>609-927-9295</b>	

License Number, Embossed Seal, Signature, and Date

24GS033531  
  
8-5-05

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

BUILDING STREET ADDRESS (including Apt. Unit, Suite, and/or Bldg. No. (OR P.O. ROUTE AND BOX NO.)  
**825-27 THIRD STREET**

CITY  
**OCEAN CITY**

STATE  
**NJ**

ZIP CODE  
**08226**

For Insurance Company Use:

Policy Number

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

**VENTS ARE LOUVERED. IT IS NOT KNOWN WHAT THE NET SQUARE INCHES IS. C3-E IS THE HEATER IN UTILITY ROOM. A/C ELEVATION IS 12.0.**

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 <b>2005 0213 20394</b>	G5. DATE PERMIT ISSUED <b>2/25/05</b>	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED <b>8/11/05</b>
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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

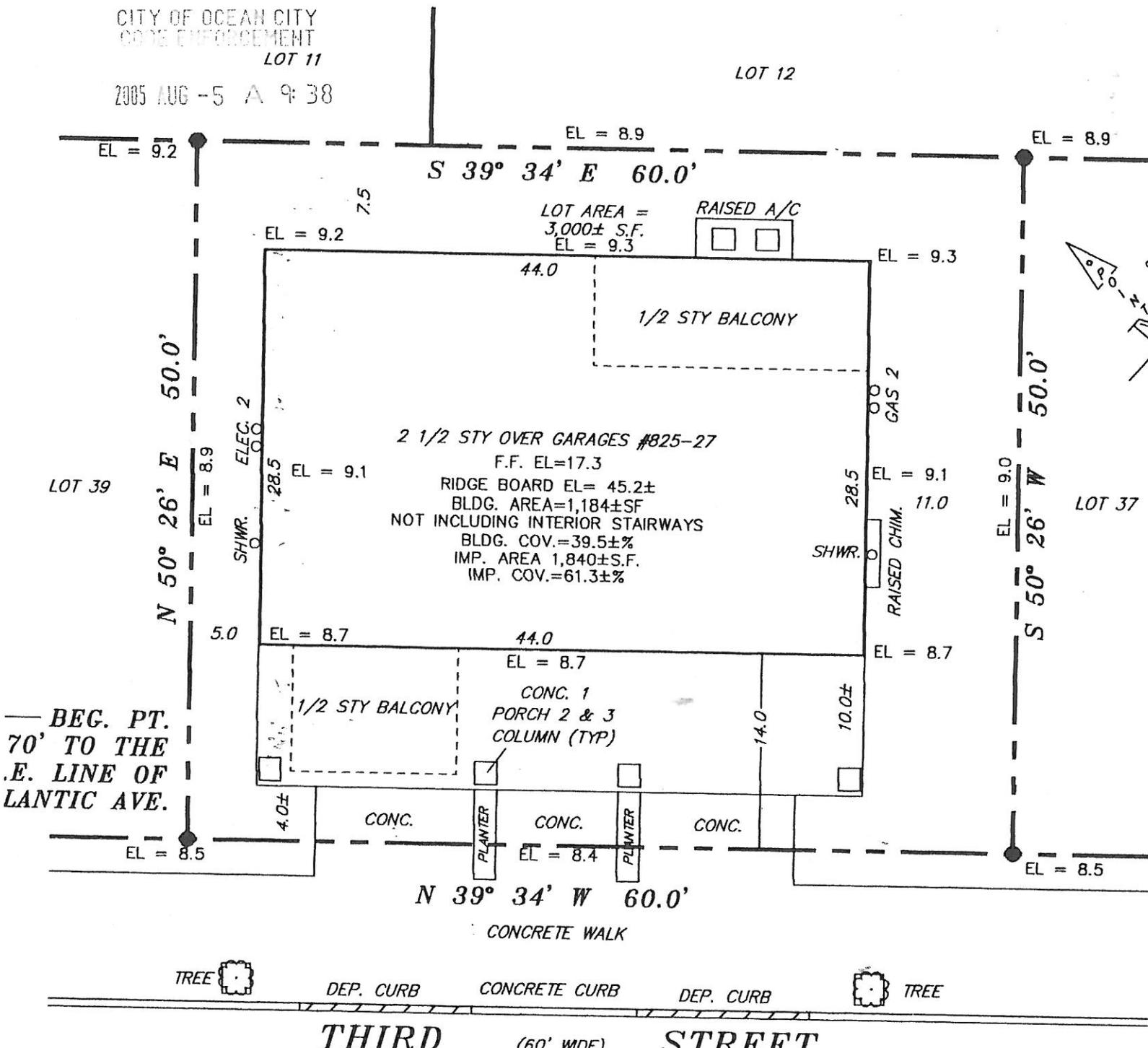
SIGNATURE

DATE

COMMENTS

Check here if attachments

2005 AUG -5 A 9:38



BEG. PT.  
70' TO THE  
E. LINE OF  
LANTIC AVE.

### THIRD (60' WIDE) STREET

PER OCEAN CITY, 5-04-05 G.M.L.

C.L. EL = 8.2

ADDED LOT ELEVATIONS 8-04-05 G.M.L.  
REVISED TO FINAL CONST. 8-03-05 G.M.L.

5-2-05 TO SHOW REAR SETBACK & AREA  
CITY FLOOR @ 5' ABOVE FLOOR. G.M.L.

ELEV. NJVD 1929

3RD FLOOR (HALF STORY) AREA= 711.5 S.F.±  
2ND FLOOR AREA= 1,254 S.F.±  
711.5/1,254 = 56.7% OF 2ND FLOOR  
(1/2 STORY AREA @ 5' ABOVE FLOOR  
IS THE SAME AS THE FLOOR AREA)  
AREAS ABOVE INCLUDE STAIRWAYS

PROPERTY IS LOCATED IN FLOOD ZONE 'A-7'

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

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

REFER TO EASEMENTS, RESTRICTIONS, COVENANTS  
AT A FULL REPORT OF TITLE AND SEARCH  
PUBLIC RECORD MAY DISCLOSE.

ISSUED TO:

#### GENERAL NOTES:

1- FAZZIO DEVELOPMENT CORP.

THIS MAP WAS PREPARED WITHOUT THE BENEFIT OF A TITLE SEARCH AND IS SUBJECT  
TO THE VALIDITY OF CHAIN OF TITLE, ETC., THAT A FULL TITLE SEARCH MAY DISCLOSE.

#### IN CONSIDERATION OF A FEE PAID

UNLESS OTHERWISE NOTED HEREON)  
THIS MAP SHOWS 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  
IDENTIFIED OR LANDS CONTAINING OR AFFECTED BY ANY ANIMAL, MARINE OR BOTANICAL SPECIES  
PROTECTED BY OR UNDER THE JURISDICTION OF ANY FEDERAL, STATE, OR LOCAL AGENCY HAVE  
NOT BEEN IDENTIFIED OR DELINEATED AS PART OF THIS PROJECT.

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

THIS MAP WAS MADE TO LOCATE THE UNDERGROUND UTILITIES WHICH MAY EXIST ON THIS PROPERTY.  
EXCAVATION, CONTRACTOR SHALL BE RESPONSIBLE TO DETERMINE THEIR EXACT LOCATION.

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

NO OBSTACLE:  
EXPERTS IN THE DETECTION AND IDENTIFICATION OF POTENTIALLY HAZARDOUS  
SUBSTANCES WHOSE WORK DOES THIS PLAN PURPORT TO REVEAL THE PRESENCE OF SUCH SUBSTANCES.

SETBACKS:  
SETBACKS ARE TO THE FACE OF SIDING UNLESS OTHERWISE NOTED, AND ARE  
TO BE USED FOR PROPERTY LINE DETERMINATION, FENCE INSTALLATION, ETC.

## FINAL CONST. PLAN

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