

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:
BUILDING OWNER'S NAME <u>Island Developers</u>		Policy Number	
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>725 Third 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 207 Lot 21</u>			
BUILDING USE (e.g., Residential, Non-Residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <u>Residential</u>			
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: _____	

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>7-15-92</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>9-5-84</u>	B8. FLOOD ZONE(S) <u>A7</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>9</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input 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, ARIAE, ARIA1-A30, ARIA/1, ARIA/O

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 L Does the elevation reference mark used appear on the FIRM? Yes No

o a) Top of bottom floor (including basement or enclosure)	<u>9.2</u> ft.(m)
o b) Top of next higher floor	<u>18.4</u> ft.(m)
o c) Bottom of lowest horizontal structural member (V zones only)	_____ ft.(m)
o d) Attached garage (top of slab)	_____ ft.(m)
o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	_____ ft.(m)
o f) Lowest adjacent (finished) grade (LAG)	<u>9.1</u> ft.(m)
o g) Highest adjacent (finished) grade (HAG)	<u>9.2</u> ft.(m)
o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade <u>0</u>	
o i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm)	

License Number, Signature, and Date

THOMAS 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		LICENSE NUMBER	
<u>THOMAS N. TOLBERT</u>		<u>38608</u>	
TITLE	COMPANY NAME		
<u>PROFESSIONAL LAND SURVEYOR</u>	<u>DESIGN LAND SURVEYING</u>		
ADDRESS	CITY	STATE	ZIP CODE
<u>341 ROUTE 168</u>	<u>TURNERSVILLE</u>	<u>NJ</u>	<u>08012</u>
SIGNATURE	DATE	TELEPHONE	
	<u>1/13/10</u>	<u>856-374-1134</u>	

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.
725 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

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

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 _____ (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

SECTION G - COMMUNITY INFORMATION (OPTIONAL) Check here if attachments

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.

- 1. 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.)
- 2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- 3. 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
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7. This permit has been issued for: New Construction Substantial Improvement

8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____
9. 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

TAX MAP NORTH

15' PUBLIC ALLEY

30' LOT

41.93

130' LOT

NOTE:

30' X 130' LOT

ALL LOT CORNERS ARE 90°

400'

402'

LOT 9

LOT 7

2nd ST. (60'w)

80' TIE

(Beg)

OCEAN AVE. (70'w)

ELEV ARE NGVD

ROOF PEAK ELEV 35.46

± OCEAN AVE ELEV 8.59

Diff. 26.87' FEET

O.K.
D.P.E. 7/7/95

FINAL / ASBUILT

KARR



LAND SURVEYING

P.O. BOX 89

OCEANVIEW, N.J. 08230

609-390-7938

FAX 609-390-7937

Thomas P. Karr

THOMAS P. KARR

P.L.S. LICENSE NO. 31269

PLAN OF SURVEY

BLOCK(s) 207

LOT(s) 8

OCEAN CITY

COUNTY OF

CAPE MAY

NEW JERSEY

TYPE THREE

Date 7-5-95

Drawn By Tk

Scale 1" = 20'

Chk'd By JK

REVISIONS

Date

PROJECT NO.

95066