

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME		For Insurance Company Use:	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 212 Central Avenue		Policy Number	
CITY Ocean City	STATE New Jersey	Company NAIC Number	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 18, Block 210		ZIP CODE 08226	
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)			
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 City of Ocean City 345310		B2. COUNTY NAME Cape May County		B3. STATE New Jersey	
B4. MAP AND PANEL NUMBER 345310 0001	B5. SUFFIX C	B6. FIRM INDEX DATE July 15, 1992	B7. FIRM PANEL EFFECTIVE/REVISED DATE Sept. 15, 1984	B8. FLOOD ZONE(S) A7	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 9

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 8 (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 C3a-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 _____ Conversion/Comments _____

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

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	_____	7 . 5 ft. (ft.)	License Number, Embossed Seal, Signature, and Date
<input type="checkbox"/> b) Top of next higher floor	_____	10 . 5 ft. (ft.)	
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____	N/A . . ft. (ft.)	
<input type="checkbox"/> d) Attached garage (top of slab)	_____	7 . 5 ft. (ft.)	
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	_____	9 . 6 ft. (ft.)	
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	_____	7 . 2 ft. (ft.)	
<input type="checkbox"/> g) Highest adjacent grade (HAG)	_____	7 . 4 ft. (ft.)	
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	_____	14	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	_____	2,016 sq. in. (sq. in.)	

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 Mark G. DeVaul LICENSE NUMBER 34844

TITLE Land Surveyor COMPANY NAME DeVaul Surveying

ADDRESS 20 DeVauls Lane Ocean View CITY New Jersey STATE New Jersey ZIP CODE 08230

SIGNATURE DATE June 26, 2000 TELEPHONE (609) 624-0572

In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:	
STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Policy Number	
_____	STATE	ZIP CODE	Company NAIC Number	
_____an City	New Jersey	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 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.
- 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.
- 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, 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 00-0147	G5. DATE PERMIT ISSUED 1/31/00	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 6/30/00
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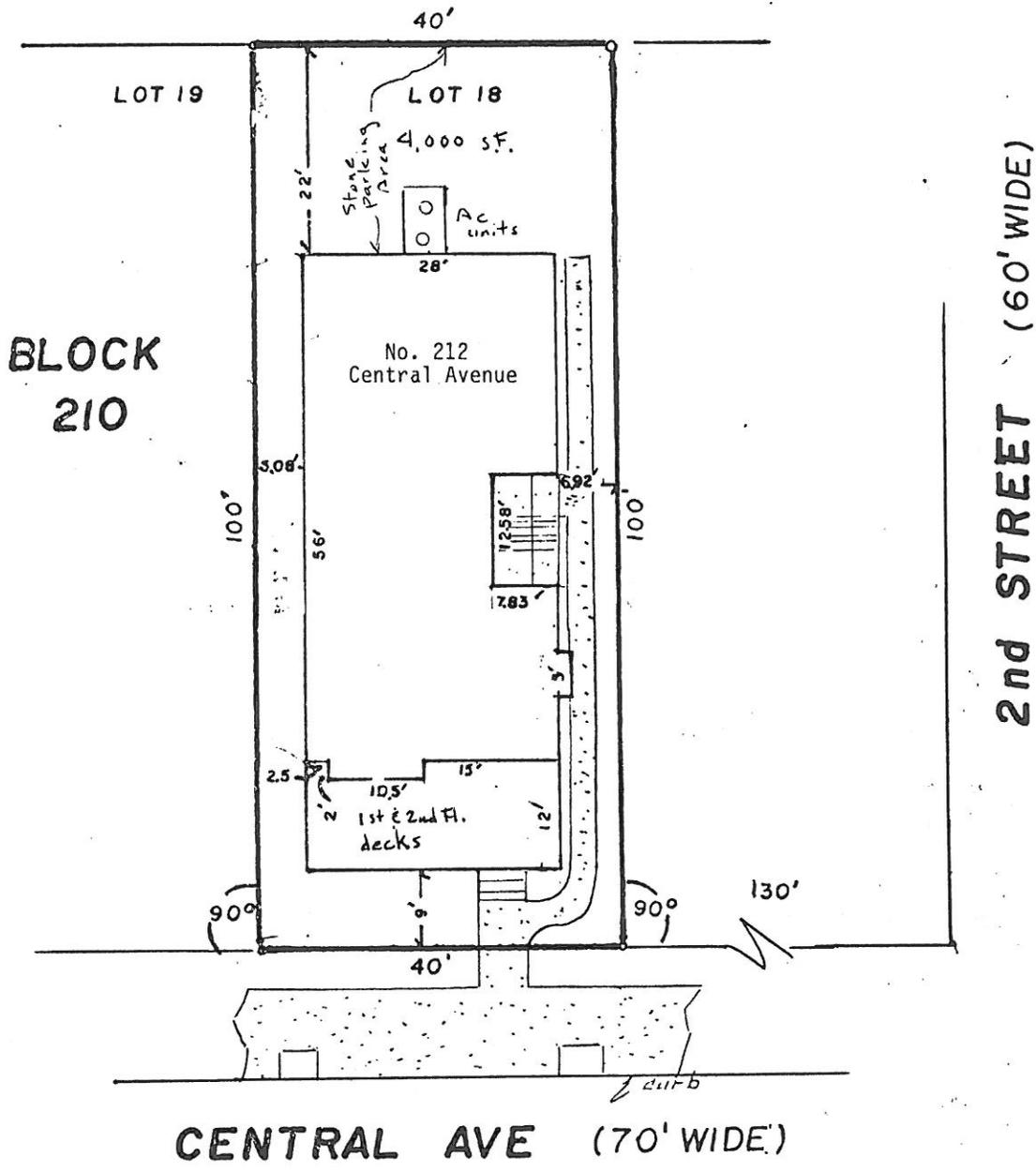
- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____
- G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE

COMMENTS

Check here if attachments

PUBLIC ALLEY



NOTE:

According to the Flood Insurance Rate Map, Community #345310, Panel #0001C, dated 9/5/1984, Lot 18 is in Flood Zone A7, Base Flood Elevation 9.

BUILDING DESCRIPTION:

Three Story Frame Building - under construction
 First Floor Elevation = 10.5 feet
 Lot Coverage = 1,503 S.F. = 37.5%
 Top of Building = 39.6 feet above center line
 Impervious Coverage = 2,167.5 S.F. = 54%

FINAL SURVEY

PLAN OF SURVEY

Lot 18, Block 210

CITY OF OCEAN CITY, CAPE MAY COUNTY, NEW JERSEY

Scale 1 inch = 20 feet May 1, 2000

DEVAUL SURVEYING LAND SURVEYORS
 OCEAN VIEW, NEW JERSEY

Mark G. DeVaul

Mark G. DeVaul, L.S.Nº 34844 Rev.6/26/2000

THIS SURVEY IS INTENDED FOR USE BY THE MUNICIPAL ZONING PLANNING/CONSTRUCTION OFFICE AND NOT TO BE USED FOR CONVEYANCE.

No.17,484