

## ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

## SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME

McGEE, HELEN R. / SCOTT, CRAIG C. &amp; SUSAN M.

Policy Number

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

261 101<sup>ST</sup> STREET

Company NAIC Number

CITY  
STONE HARBORSTATE  
NJZIP CODE  
08247

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

BLOCK 101.03 LOT 90,92,94.01

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section 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 &amp; COMMUNITY NUMBER

BOROUGH OF STONE HARBOR - 345323

B2. COUNTY NAME

CAPE MAY

B3. STATE

NJ

B4. MAP AND PANEL  
NUMBER  
0001B5. SUFFIX  
CB6. FIRM INDEX  
DATE  
7/15/92B7. FIRM PANEL  
EFFECTIVE/REVISED DATE  
7/15/92B8. FLOOD  
ZONE(S)  
A7B9. 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 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 NGVD 29 Conversion/Comments \_\_\_\_\_Elevation reference mark used LOCAL Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

- o a) Top of bottom floor (including basement or enclosure) 8. 14 ft.(m)
- o b) Top of next higher floor 12. 15 ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) N/A. \_\_\_\_ ft.(m)
- o d) Attached garage (top of slab) N/A. \_\_\_\_ ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building 10. 77ft.(m)
- o f) Lowest adjacent grade (LAG) 8. 02ft.(m)
- o g) Highest adjacent grade (HAG) 8. 25ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 25
- o i) Total area of all permanent openings (flood vents) in C3h 1500 sq. in. (sq. cm)

License Number, Embossed Seal,  
Signature, and Date

#12659

5/11/2000

## 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 SAM DENEKA

LICENSE NUMBER 12659

TITLE PE, LS

COMPANY NAME STONE HARBOR SURVEYORS &amp; ENGINEERS

ADDRESS

PO BOX 511

SIGNATURE

CITY

STONE HARBOR

DATE

5/11/2000

STATE

NJ

TELEPHONE

609-368-7451

ZIP CODE

08247

ENTERED 7/31/01 JCE



|   |       |          |                            |
|---|-------|----------|----------------------------|
| 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              |
| CITY  | STATE | ZIP CODE | 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

1 CRAWL SPACE DOOR WOULD GIVE AN ADDITIONAL 830 SQ. IN. IF OPENED.

☒ 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<br>99-3926 | G5. DATE PERMIT ISSUED<br>7/14/99 | G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED<br>5/17/00 |
|------------------------------|-----------------------------------|--|

G7. This permit has been issued for: ☒ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

8.14 ft.(m)

Datum: NGVD 29.

G9. BFE or (in Zone AO) depth of flooding at the building site is:

10.0 ft.(m)

Datum: NGVD 29.

LOCAL OFFICIAL'S NAME ARAN LOVEGROVE

TITLE CONSTRUCTION OFFICIAL

COMMUNITY NAME BOROUGH OF STONE HARBOR

TELEPHONE 609-368-6814

SIGNATURE [Signature]

DATE 5/17/00

COMMENTS

☐ Check here if attachments