## FEUERAL EMERGENCI MANAGEMENI AGENCI 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 For Insurance Company Use:							
BUILDING OWNER'S NAM READY, LINDA A	E					Policy Number	
BUILDING STREET ADDR 216 105TH STREET	ESS (Including A	Apt., Unit, Suite, and/or	Bldg. No.)	OR P.O. ROUTE AND B	OX NO.	Company NAIC Number	
CITY				STATE	ZIP CO	DE	
STONE HARBOR				NJ	08247		
	K: 104.03						
BUILDING USE (e.g., Resid	lential, Non-resid	ential, Addition, Acces	sory, etc.		1 10 1		
LATITUDE/LONGITUDE (C			ONTAL D		SOURCE: GPS (Tyr		
(##°-##-##.##° or ##.#	####*)	☐ NAD 192	27 LIN	AD 1983	USGS Q	uad Map Other:	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP COMMUNITY NAME 8	COMMINITY AS I		B2. COUN			B3. STATE	
BOROUGH OF STONE HARBO		MOCK	CAPE MAY		4	W	
B4. MAP AND PANEL	B5. SUFFIX		T	87. FIRM PANEL		B9. BASE FLOOD ELEVATION(S)	
NUMBER 0001	С	86. FIRM INDEX DATI 01/08/71	E	FFECTIVE/REVISED DATE 07/15/92	B8. FLOOD ZONE(S) A-7	(Zone AO, use depth of flooding) 10'	
	Rase Flood Elev	ation (BFE) data or bas	e flood dec	th entered in B9.			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  FIS Profile							
B11. Indicate the elevation date	um used for the B	FE in B9: NGVD 1	929		Other (Describe):	-	
B12. Is the building located in	a Coastal Barrier I	Resources System (CE	RS) area o	r Otherwise Protected Area	(OPA)?☐ Yes ☒ No	Designation Date	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date							
C1. Building elevations are bas	sed on: Const	ruction Drawings*	Building	Under Construction*	Finished Construction		
*A new Elevation Certifica	te will be required	when construction of the	ne building	is complete.			
C2. Building Diagram Number	8 (Select the build	fing diagram most simil	ar to the bu	ilding for which this certifical	e is being completed - se	e 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 NGVD29 Conversion/Comments							
Elevation reference mark	used <u>LOCAL</u> Dos	s the elevation referen	ce mark us	ed appear on the FIRM?	]Yes ⊠ No		
o a) Top of bottom floor (				8. 10 ft.(m)	Seal,	<b>\</b>	
o b) Top of next higher floor				11.00 ft.(m)	Š.	12(1	
o c) Bottom of lowest horizontal structural member (V zones only)				<u>NA</u> ft.(m)	Sased		
o d) Attached garage (top of slab)							
o e) Lowest elevation of		equipment			.е. П. в.		
servicing the building	ng (Describe in a 0	Comments area)		<u>N/A</u> ft.(m)	mb	1 rd	
o f) Lowest adjacent (finis	shed) grade (LAG)			8 <u>07 ft (m)</u>	License Number, Signature,		
o g) Highest adjacent (fir	nished) grade (HA	G)		8. 12 ft (m)	ense	<b>₹</b> 12659	
o h) No. of permanent op	enings (flood veni	ts) within 1 ft. above adj	acent grade	<u>21</u>	Lia	<b>8/3/2001</b>	
o i) Total area of all pern	nament openings (	flood vents) in C3.h 126	<u>30</u> sq. in. (s	q. cm)			
		SECTION D - SURVI	YOR, EN	SINEER, OR ARCHITECT	CERTIFICATION		
This certification is to be s	igned and seale	d by a land surveyor,	engineer,	or architect authorized by	law to certify elevation i	nformation.	
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 DI					LICENSE NUMBER 126		
TITLE PE/LS				COMPANY NAME	STONE HARBOR SURV	EYORS & ENGINEERS	
ADDRESS				CITY	STATE		
PO BOX 511				STONE HARBOR DATE	NJ TELEF	08247 PHONE	
SIGNATURE	in Dien	2/4		08/03/01		68-7451	
- ,70	My David	ar y			0000	***************************************	

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. No.) OR P.O. ROUTE AND BOX NO	D.	Policy Number
CITY STATE	ZIP CODE	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, OR ACCHITE	CT CERTIFICATION (CONTINUED)	
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/comp	any, and (3) building owner.	
COMMENTS		
		Check here if attachments
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REC		
For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certifical Section C must be completed.	ite is intended for use as supporting illio	INDUSTRIAL SECTION OF FORMAL!
<ol> <li>Building Diagram Number_(Select the building diagram most similar to the building for which the represents the building, provide a sketch or photograph.)</li> <li>The top of the bottom floor (including basement or enclosure) of the building is ft.(m)in.(natural grade, if available).</li> <li>For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (see page 7).</li> </ol>	cm) 🔲 above or 🔲 below (check one	e) the highest adjacent grade. (Use
grade. Complete items C3.h and C3.i on front of form. E4. For Zone AO only. If no flood depth number is available, is the top of the bottom floor elevate	ed in accordance with the community's f	
☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G SECTION F - PROPERTY OWNER (OR OWNER'S R)    Yes ☐ No ☐ Unknown. The local official must certify this information in Section G		
The property owner or owner's authorized representative who completes Sections A, B, C (Items		vithout a FEMA-issued or community-
issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are come	ct to the best of my knowledge.	
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME		
ADDRESS CITY	STAT	E ZIP CODE
SIGNATURE DAT	E TELE	PHONE
COMMENTS		
		☐ Check here if attachments
SECTION G - COMMUNITY INFORM		
The local official who is authorized by law or ordinance to administer the community's floodplain movertificate. Complete the applicable item(s) and sign below.  G1. The information in Section C was taken from other documentation that has been signed state or local law to certify elevation information. (Indicate the source and date of the eG2. A community official completed Section E for a building located in Zone A (without a FEG3. The following information (Items G4-G9) is provided for community floodplain managements.	and embossed by a licensed surveyor, a levation data in the Comments area bek MA-issued or community-issued BFE) on nent purposes.	engineer, or architect who is authorize ow.) or Zone AO.
GA. PERMIT NUMBER  00-4795  GS. DATE PERMIT ISSUED  11/20/00	G6. DATE CERTIFICATE OF CO	MPLIANCE/OCCUPANCY ISSUED  ) /
G7. This permit has been issued for New Construction   Substantial Improvement	8_ <i>iC</i> ft.(m)	Datum: NGVN 9
G8. Elevation of as-built lowest floor (including basement) of the building is:	<u>0</u> / <u>0</u> ft.(m)	Datum: <u>ルタリ</u> ンタ Datum: <u>ルタ</u> リンプ
G9. BFE or (in Zone AO) depth of flooding at the building site is:  LOCAL OFFICIAL'S NAME	<del></del> , ,	
COMMINITY NAME	TELEPHONE Z/O	on UFFICIAL
SIGNATURE SIGNATURE	DATE 10/19/01	20. /
COMMENTS		
		Check here if attachmen