

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>			For Insurance Company Use:
BUILDING OWNER'S NAME SWARTZ, THOMAS & LYNNE		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 121 90 <sup>TH</sup> STREET		Company NAIC Number	
CITY STONE HARBOR	STATE NJ	ZIP CODE 08247	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS: 40, 42      BLOCK: 90.02			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL			
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 BOROUGH OF STONE HARBOR      345323		B2. COUNTY NAME CAPE MAY		B3. STATE NEW JERSEY	
B4. MAP AND PANEL NUMBER 0001	B5. SUFFIX C	B6. FIRM INDEX DATE 01/08/71 <i>7/15/92</i>	B7. FIRM PANEL EFFECTIVE/REVISED DATE 07/15/92	B8. FLOOD ZONE(S) A-7	B9. 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

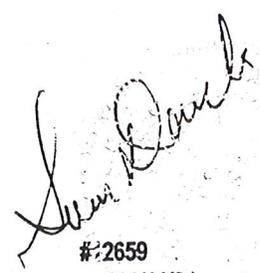
Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum NGVD29 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)      9. 40 ft.(m)
- o b) Top of next higher floor      12. 22 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 (Describe in a Comments area)      12. 00 ft.(m)
- o f) Lowest adjacent (finished) grade (LAG)      9. 14 ft.(m)
- o g) Highest adjacent (finished) grade (HAG)      9. 71 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 19
- o i) Total area of all permanent openings (flood vents) in C3.h 1140 sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



#2659  
06/11/02

## 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 DENEKE      LICENSE NUMBER 12659

TITLE <u>PE/LS</u>	COMPANY NAME <u>STONE HARBOR SURVEYORS &amp; ENGINEERS</u>		
ADDRESS <u>PO BOX 511</u>	CITY <u>STONE HARBOR</u>	STATE <u>NJ</u>	ZIP CODE <u>08247</u>
SIGNATURE <i>Sam Deneke</i>	DATE <u>06/11/02</u>	TELEPHONE <u>609-368-7451</u>	

ENTERED 9/27/02 *SK*  
RE ENTERED 6/3/04 *SK*

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.

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  
C-3-E: HVAC DECK

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. 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 02-5508	G5. DATE PERMIT ISSUED 1/23/02	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED 6/22/02
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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:

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

9.49 ft.(m) Datum: NGVD 29  
10.0 ft.(m) Datum: NGVD 29

LOCAL OFFICIAL'S NAME ALAN LOVEGROVE TITLE CONSTRUCTION OFFICIAL  
 COMMUNITY NAME STONE HARBOR TELEPHONE 368-6814  
 SIGNATURE [Signature] DATE 6/12/02  
 COMMENTS

Check here if attachments