

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAMO.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 NAME RUDAWSKY, ANDREW		Policy Number
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 8913 SUNSET DRIVE		Company NAIC Number
CITY STONE HARBOR	STATE NJ	ZIP CODE 08247
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOTS: 220, 222 BLOCK: 90.91		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##" or ###.####)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <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	B7. FIRM PANEL EFFECTIVE/REVISED DATE 07/15/82
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.)

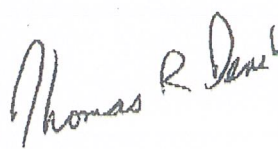
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO

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) 8. 92 ft.(m)
- o b) Top of next higher floor 11. 37 ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) N/A. ft.(m)
- o d) Attached garage (top of slab) 7. 00 ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 12. 30 ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 5. 61 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 5. 82 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 27
- o i) Total area of all permanent openings (flood vents) in C3.h 1620 sq. in. (sq. cm)

License Number, Embossed Seal,  
Signature, and Date

 #35828 12/21/2001
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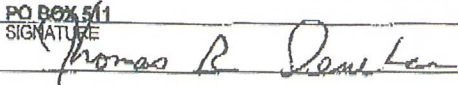
## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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 THOMAS R. DENEKALICENSE NUMBER 35828

TITLE <u>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>
SIGNATURE 	DATE <u>12/21/01</u>	ZIP CODE <u>08247</u>
	TELEPHONE <u>609-368-7451</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.

For Insurance Company Use:

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

☐ 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

G5. DATE PERMIT ISSUED

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

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

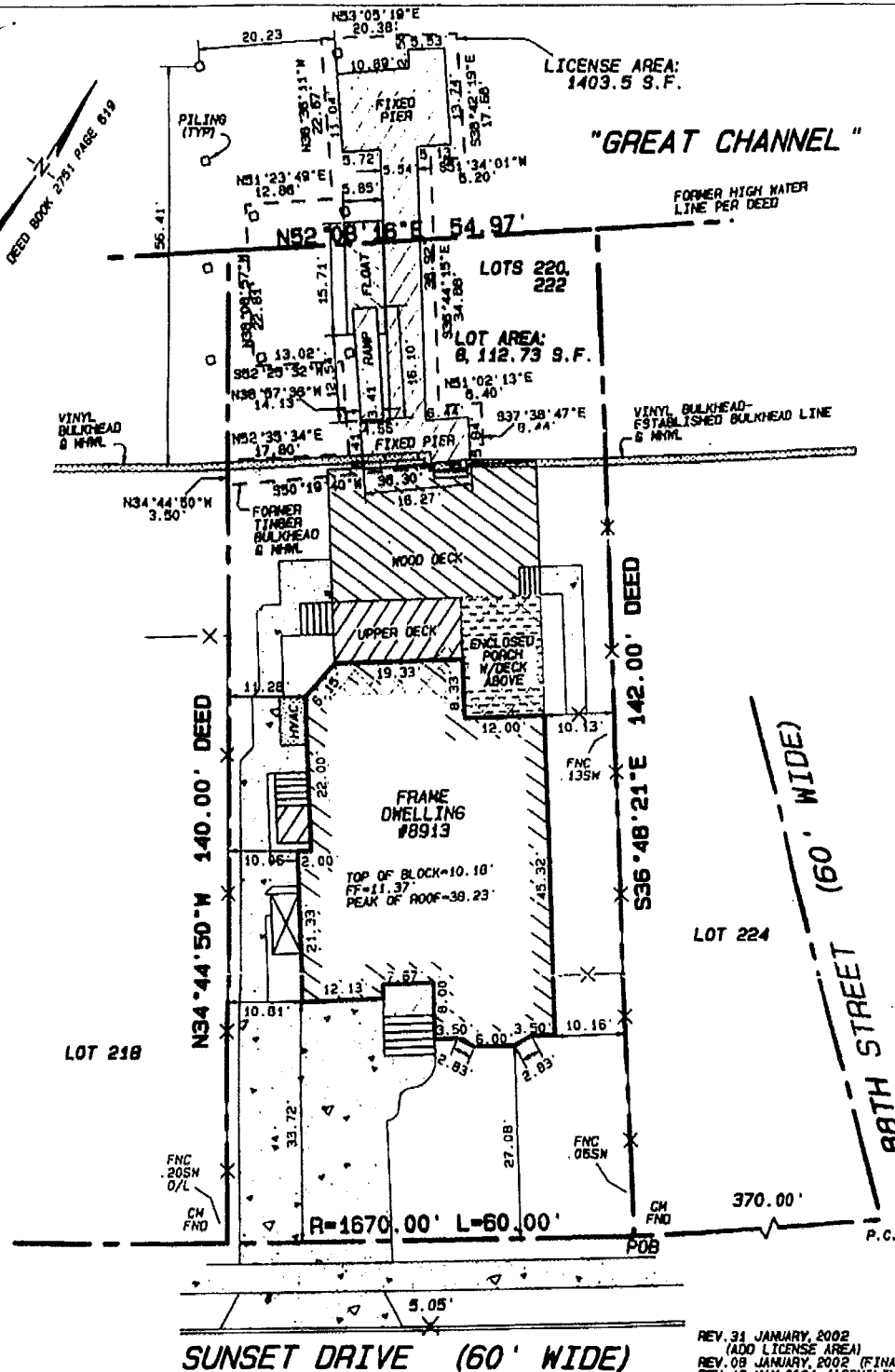
SIGNATURE

DATE

COMMENTS

☐ Check here if attachments

DEED BOOK 2751 PAGE 619



CERTIFY TO:

RUDAWSKY, ANDREW Z.

and in consideration for the fee paid for making this survey, I hereby certify to its accuracy (except such easements if any, that may be located below the surface of the lands, or on the surface of the lands and not visible) as an inducement for any insurer of title, to insure the title to the lands and premises shown hereon.

**Sam Deneka PE, LS #12659**  
PROFESSIONAL ENGINEER & LAND SURVEYOR  
*Thomas R. Deneka*  
**Thomas R. Deneka PLS #35828**  
PROFESSIONAL LAND SURVEYOR

PLOT PLAN OF A SURVEY  
LOTS 220, 222  
BLOCK 90.91 (TAX MAP)  
BOROUGH OF STONE HARBOR  
CAPE MAY COUNTY, N.J.

**STONE HARBOR  
SURVEYORS & ENGINEERS**

P.O. Box 511  
9809 Third Avenue  
Stone Harbor, NJ 08247  
(609) 368-7451 Fax (609) 368-3147  
EMAIL: surveyor@dolanet.com

Scale: 1"=20' Date: 10/17/00 Disk: 47 Job No. 7586