U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

RECEIVED

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE Important: Follow the instructions on pages of BOROUGH OFFICE

Copy all pages of this Elevation Certificate and all attachments for NSTRUCTION OFFICE ce agent/company and (3) building owner

Copy all pages of this			COURSE OF THE PERSON		y Official, (2) Ilisuid		y, and (5) building owner.
SECTION A – PROPERTY INFORMATION						FOR INSURANCE COMPANY USE	
A1. Building Owner's Name DIPPOLD, JULIE ANN Policy Number:					per:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number Box No.						AIC Number:	
	420 104TH STREET						
City							
STONE HARB	october carbon	101 IN I	D1	New Jer		08247	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK: 103 - 07 LOT: 141.02, 142.01							
A4. Building Use (e.g., Residen	itial, Non-Residential,	Addition,	, Accessory, e	etc.) RESIDEN	ΓΙΑL	
A5. Latitude/Longit	ude: Lat. <u>39</u>	9.0513	Long7	4.7681	Horizontal	Datum: NAD 1	927 🛛 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	sed to obtain flood	l insurance.	
A7. Building Diagra	am Number	8					
A8. For a building v	with a crawls	pace or enclosure(s):					
a) Square foot	age of crawl	space or enclosure(s)		1	070.00 sq ft		
b) Number of p	ermanent flo	ood openings in the cra	awlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	de 6
c) Total net are	ea of flood or	penings in A8.b	1	200.00 sq in			- 119
d) Engineered	flood openin	ngs? 🛛 Yes 🗌 N	10				
A9. For a building w	<i>i</i> ith an attach	ied garage:					
a) Square footage of attached garage N/A sq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A							
c) Total net area of flood openings in A9.b N/A sq in							
d) Engineered flood openings?							
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION							
B1. NFIP Community Name & Community Number B2. County Name B3. State							B3. State
BOROUGH OF STONE HARBOR-345323 CAPE MAY New Jersey							
B4. Map/Panel Number						levation(s) e Base Flood Depth)	
34009C0242 F 10-05-2017 10-05-2017 AE 9'							
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No							
Designation [Date:		CBRS	□ OPA			

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					FOR INSURANCE COMPANY USE		
420 104TH STREET				Policy Number:			
City State ZIP Code C STONE HARBOR New Jersey 08247				Company NAIC Number			
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. 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 C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: GPS Vertical Datum: NAVD88							
Indicate elevation datum used for the elevations in ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other		low.			:		
Datum used for building elevations must be the sar		BFE.	Che	ok the me	asurement used.		
a) Top of bottom floor (including basement, crawls	nace or enclosure floo	or)	6.0	Kine ine	meters		
b) Top of the next higher floor	paco, o, o.,o.o.a.o		12.2		 meters		
c) Bottom of the lowest horizontal structural memb	er (V Zones only)		N/A		meters		
d) Attached garage (top of slab)	or (v Zonoo omy)		N/A	∫ feet	meters		
e) Lowest elevation of machinery or equipment set (Describe type of equipment and location in Core	rvicing the building		11.4	feet	meters		
f) Lowest adjacent (finished) grade next to building	•		5.4	feet	meters		
g) Highest adjacent (finished) grade next to building (HAG)					meters		
g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 6.1							
	. ENGINEER. OR A	RCHITECT CERTIFI	CATIO	N			
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 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.							
Were latitude and longitude in Section A provided by a l				Check her	e if attachments.		
Certifier's Name	License Number						
THOMAS R. DENEKA	35828		_				
Title PLS	·····			į,	ace		
Company Name THE HYLAND GROUP				G	eal		
Address 701 WEST AVENUE SUITE 301					ere		
City OCEAN CITY	State New Jersey	ZIP Code 08226					
Signature Momas Pineka	Date 12-16-2020	Telephone (609) 398-4477	Ext.				
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.							
Comments (including type of equipment and location, per C2(e), if applicable) C-2-A IS SLAB IN CRAWL SPACE. C-2-E IS EXTERIOR HVAC A-8-C CONSITS OF 6 SMART VENTS MODEL #1540-510 COVERING 200 SQ FT OF VENT SPACE EACH							

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IMPORTANT: In these spaces, copy the correspon	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, a 420 104TH STREET	Policy Number:				
City STONE HARBOR	State New Jersey	ZIP Code 08247	Company NAIC Number		
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED)					
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters. E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is					
			certify this information in Section G.		
SECTION F – PROPERTY ON The property owner or owner's authorized representations community-issued BFE) or Zone AO must sign here.	ative who completes Se	ections A. B. and E for Z	one A (without a FEMA-issued or		
Property Owner or Owner's Authorized Representative			Treat to the best of my knowledge.		
Address	City	S	tate ZIP Code		
Signature	Date	e To	elephone		
Comments					
			Check here if attachments.		

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IMPORTANT: In these spaces, copy the corre	sponding information fro	om Section A.	FOR INSURANCE COMPANY USE			
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420 104TH STREET						
City	State	ZIP Code	Company NAIC Number			
STONE HARBOR	New Jersey	08247				
SECTIO	N G - COMMUNITY INFO	RMATION (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. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.						
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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 or Zone AO.	on E for a building located	in Zone A (without a FEM	A-issued or community-issued BFE)			
G3. The following information (Items G4–	G10) is provided for comm	unity floodplain managem	ent purposes.			
G4. Permit Number	G5. Date Permit Issued		Date Certificate of			
20-006	61/06/2020		Compliance/Occupancy Issued 」 6 スト			
G7. This permit has been issued for:	New Construction 🗌 Su	bstantial Improvement				
G8. Elevation of as-built lowest floor (including of the building:	basement) 12.	ァ 文 feet	☐ meters Datum <u>N 4 √ D 8%</u>			
G9. BFE or (in Zone AO) depth of flooding at t			☐ meters Datum <u>₩ AV D 《 8</u>			
G10. Community's design flood elevation:	Higher of BFE+ a	Loc	meters Datum (NAVI) 88			
Raymond Poudrier Community Name		tle Official / Flood I	Plain Manager			
Stone Hurbor		official / Flood Palephone 68-6814				
Signature A O O O O O O O O O O O O	Da }	ate 5- み				
Comments (including type of equipment and location, per C2(e), if applicable)						
			Check here if attachments.			

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

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If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

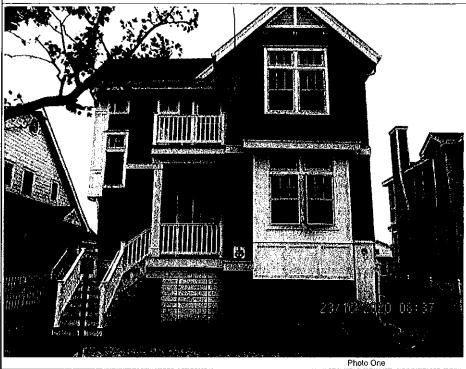


Photo One Caption FRONT VIEW

Clear Photo One

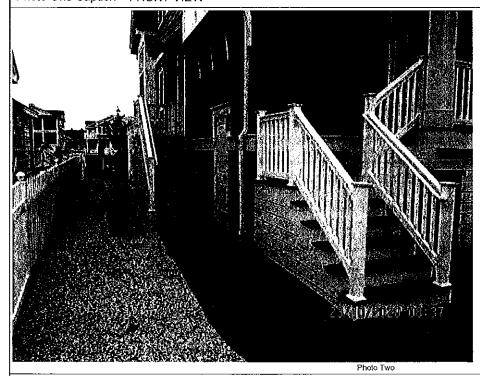


Photo Two Caption LEFT SIDE VIEW

Clear Photo Two

BUILDING PHOTOGRAPHS

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Continuation Page

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If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three Caption REAR VIEW

Clear Photo Three



Photo Four Caption RIGHT SIDE VIEW

FEMA Form 086-0-33 (12/19)

Clear Photo Four