U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAS EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

SECTION A – PROPERTY INFORMATION FOR II				INSURANCE COMPANY USE
A1. Building Owner's Name Jeffrey E. & Susan L. Thimm				y Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 435 Route 9 South / 255 lbls Lane				pany NAIC Number:
City Marmora State NJ ZIP Code 08223				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 599 Lot 16 Unit 255				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. 39°15'13.4" Long. 74°39'16.7" Horizontal Datum: NAD 1927 NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 5 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s): b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade n/a c) Total net area of flood openings? Yes No d) Engineered flood openings? Yes No				
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				
B1. NFIP Community Name & Community Number Township of Upper 340159	B2. County Name Cape May		B3. S NJ	tate
B4. Map/Panel Number B5. Suffix B6. FIRM In 340159 0008 C 7-15	1992 Effective/I	RM Panel Revised Date	B8. Flood B9 Zone(s)	Base Flood Elevation(s) (Zone AO, use base flood depth)
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source: Preliminary Work Map 311. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source: ☐ 312. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No Designation Date: ☐ CBRS ☐ OPA				
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)				
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. 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: Local Control Vertical Datum: N.A.V.D 1988 Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source: Datum used for building elevations must be the same as that used for the BFE. Check the measurement used.				
a) Top of bottom floor (including basement, crawlspace	or enclosure floor)	12.7	⊠ fee	<u> </u>
b) Top of the next higher floor	•	<u>n.a</u>	fee	
c) Bottom of the lowest horizontal structural member (V Zones only) 11.4			⊠ fee	
d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)			☐ fee ☑ fee	
f) Lowest adjacent (finished) grade next to building (LA	,	<u>3</u> . <u>9</u>	🛭 fee	_
g) Highest adjacent (finished) grade next to building (HAh) Lowest adjacent grade at lowest elevation of deck or	•	4.4 al support 4.2	⊠ fee ⊠ fee	
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. Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a Check here if attachments.				PLACS SEAL
Certifier's Name Stephen C. Martinelli License Number 30089			HERE	
Title P.L.S. Company Name Stephen C.Martinelli Land Surveying				
Address 1217 S.Shore Road Suite 106 City Ocean View State NJ ZIP Code 08230				
Signature Date 02-26-	14 Te	elephone 609-390-961	8	

ELEVATION CERTIFICATE, page 2 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: 435 Route 9 South / 255 lbls Lane ZIP Code 08223 Company NAIC Number: City Marmora State NJ 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 Lowest machiney is the A/C units located outside the Building, Elevation=10.4'. Utilized Preliminary Work Map from FEMA CHK By:RM (FJS) Signature Date 02-26-14 SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) 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 feet meters above or below the HAG. ☐ feet ☐ meters ☐ above or ☐ below the LAG. b) Top of bottom floor (including basement, crawlspace, or enclosure) is For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor ☐ feet ☐ meters ☐ above or ☐ below the HAG. (elevation C2.b in the diagrams) of the building is feet meters above or below the HAG. Attached garage (top of slab) is _ ☐ feet ☐ meters ☐ above or ☐ below the HAG. Top of platform of machinery and/or equipment servicing the building is ____ 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? Tyes 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. The statements in Sections A, B, and E are correct to the best of my knowledge. Property Owner's or Owner's Authorized Representative's Name City State ZIP Code Address Telephone Signature Date 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. Check the measurement used in Items G8-G10. In Puerto Rico only, enter meters 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.) A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. G2. The following information (Items G4-G10) is provided for community floodplain management purposes. G3. 🔲 G6. Date Certificate Of Compliance/Occupancy Issued G4. Permit Number G5. Date Permit Issued □ New Construction ☐ Substantial Improvement G7. This permit has been issued for: meters G8. Elevation of as-built lowest floor (including basement) of the building: ☐ feet Datum __ G9. BFE or (in Zone AO) depth of flooding at the building site: ☐ feet ☐ meters Datum G10. Community's design flood elevation: ☐ feet meters Datum _ Local Official's Name Title Telephone Community Name

Date

Check here if attachments

Signature Comments

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

FOR INSURANCE COMPANY USE

Policy Number:

Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 435 Route 9 South / 255 Ibls Lane

City Marmora

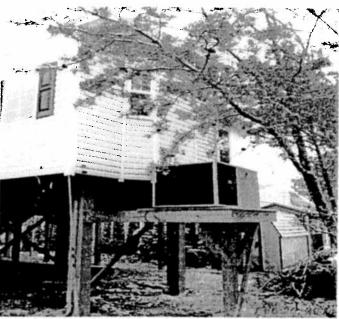
State NJ

ZIP Code 08223

Company NAIC Number:

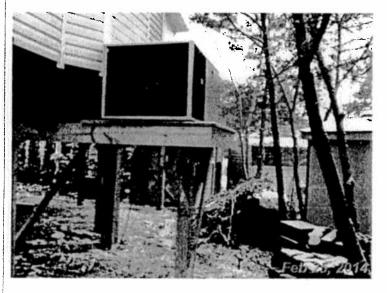
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, 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.





Front View

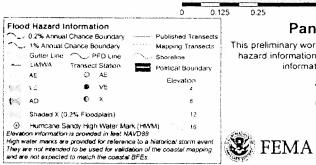
Rear View



A/C Unit

Cape May County, NJ **Preliminary Work Map**



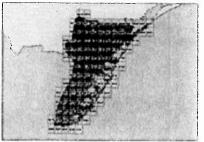


information not included









FEMA Flood Hazard Resources Map

Updated flood hazard data available for recovery and rebuilding efforts in Sandy affecting



FEMA