U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency National Flood Insurance Program

Important: Read the instructions on pages 1-8.

Mational Flood Modianos F					<u> </u>		
			ION A - PROP	PERTY INFORM	ATION	For Insurance Company Use:	
A1. Building Owner's Nan	ne: Donna J. Dief	enderfer				Policy Number	
A2. Building Street Addre 401 South Bayview Drive	ss (including Apt.,	Unit, Suite, and/or B	ildg. No.) or P.O	Route and Box N	l o .	Company NAIC Number	
City: Strathmere, Up	per Township	State:	NJ	ZIP Code: 0824	48		
A3. Property Description (Lot 4, Block 836	Lot and Block Nun	nbers, Tax Parcel N	umber, Legal De	scription, etc.)			
A4. Building Use (e.g., Re	sidential, Non-Res	idential, Addition, A	ccessory, etc.) _l	Residential			
A5. Latitude/Longitude: La	at. N 39-11-49.7	Long. W 074-39-2	8.6 Ho	rizontal Datum:	NAD 1927	NAD 1983	
A6. Attach at least 2 photo		ding if the Certificate	is being used to	obtain flood insur	rance.		
A7. Building Diagram Nun A8. For a building with a		closure(s), provide		A9. For a b	ouilding with an atta	ched garage, provide:	
a) Square footage			<u>585</u> sq ft	a) Squ	uare footage of atta	ched garage <u>1101</u> sq ft	
b) No. of permaner enclosure(s) wal		the crawl space or sove adjacent grade	4		. of permanent floor rithin 1.0 foot above	d openings in the attached garage adjacent grade 6	
c) Total net area of			See commen		al net area of flood		
sq in	SECTI	ON B - FLOOD II	NOUDANCE D	ATE MAD (SIDE	M) INCORMATIO	Al	
	JLO11	ION B - 1 LOOD II	NONANCE N	ATE WAF (FIN	VI) INFORMATIO		
B1. NFIP Community Nam	e & Community Nu	mber I	B2. County Nam	е		B3. State	
Upper Township 340159			Cape May			New Jersey	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date		RM Panel Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zon AO, use base flood depth)	9
340159 0014	С	Date		15, 1992	A10	10.0	
B10. Indicate the source of							
☐ FIS Profile		Community Deter		Other (Describe			
B11. Indicate elevation datu			GVD 1929 [NAVD 1988	Other (Describ		
B12. Is the building located Designation Date		er Resources Systen	CBRS) area o	OPA	cted Area (OPA)?	☐Yes ⊠No	
Designation Date							
	SECTION	C - BUILDING E	LEVATION IN	FORMATION (S	URVEY REQUIF	RED)	
C1. Building elevations are	****	Construction Drav		Building Under	Construction*		
*A new Elevation Certification 7 Add Add Add Add Add Add Add Add Add A					AD/A4 A00 AD/A	11 AB/AO - O	
below according to the	ouilding diagram sp	pecified in Item A7.	U, V (WILLI BEE),	AR, ARVA, ARVAE,	, ARVA I-AGU, ARVA	H, AR/AO. Complete Items C2.a-g	
Benchmark Utilized NJ	GCS Mon. #5737	Vertical Datum 192	29				
Conversion/Comments	Check the m	easurement used.				_	
 a) Top of bottom floor 	(including baseme	nt, crawl space, or e	enclosure floor)	<u>6</u> .3	_ 🛛 feet 📗	meters (Puerto Rico only)	
b) Top of the next higher floor 14 7 Expression feet meters (Puerto Rico only)							
						meters (Puerto Rico only)	
d) Attached garage (top of slab)							
e) Lowest elevation of machinery or equipment servicing the building							
						meters (Puerto Rico only)	
g) Highest adjacent (finished) grade (HAG)						meters (Puerto Rico only)	
	SECTIO	N D - SURVEYOR	R ENGINEER	OR ARCHITEC	T CERTIFICATION	ON .	
This certification is to be sig			···				
information. I certify that the I understand that any false	e information on the statement may be p	is Certificate represe punishable by fine o	ents my best effo r imprisonment o	orts to interpret the under 18 U.S. Code	data available. e, Section 1001.		
Check here if comments	s are provided on b	ack of form.					
Certifier's Name	***************************************		L	icense Number	**************************************		
Stephen A. Klotz Title: Professional Land Su	rveyor	Company Name	e: Gibson Assoc	38622 siates, P.A.			
Address: 522 Sea Isle Bo		City: Ocean Vie	·	tate: NJ	ZIP Code: 082	30	
Signature	1800	Date 05-01-07, 05-2			ne (609) 624-194		

and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8. and G9. 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 E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. G3. The following information (Items G4G9.) 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: ———————————————————————————————————	IMPORTANT: In these spaces,	For Insurance Company Use:								
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: Structure is a 3 story, 2 lamily frame residence. There are (10) "Smart vents" provided, all are within 1" o agiscent grade. Owner to obtain certification from manufacture of "Smart vents" regarding venting adequacy. Garage area is butt on slab Section 8 - ButLoting ELEVATION (INDERSEMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) For Zones AO and A (without BFE) complete farms E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and CF. For items and the story of the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and CF. For items and the story of the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and CF. For items and the story of the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and CF. For items and the story of the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and CF. For Butling of the complete Sections A, B, and CF. For Butling and an advanced to the story of the complete Sections A, B, and CF. For Butling and advanced the measurement to the operation of the complete Sections A, B, and E4. The property owner or complete Sections A, B, and E4. The property owner or complete Sections A, B, and E4. The property owner or complete Sections A, B, and E4. The property owner or complete Sections A, B, and E4. The property owner or complete Sections A, B, and E4. The property owner or complete Sections A, B,		t., Unit, Suite, and/or Bldg. No.) or P.O. R	oute and Box No.	Policy Number						
Copy both adea of this Elevation Cartificate for (1) community official, (2) insurance sgent/company, and (3) building owner. Comments: Structure is a 3 story, 2 family frame residence. There are (10) "Smart vents" provided, all are within 1 to adjacent grade. Owner to obtain certification from manufacturer of "Smart vents" regarding venting adequacy. Garage area is built on side. Signature Date 05-01-07, 05-22-07 (Revised) Check here if attachments: SECTION E - BUILDING ELEVATION(INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE) For Zones AO and A (without BFE). Complete times E1-E5. If the Certificate is intended to support a LOMA or LOMR-8 requised, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available in check the measurement used. In Puerto Rico only, enter meters. E1. Provide elevation information for the following and check the approximate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest grade (HAG) and the lowest adjacent grade (HAG) and the lowest grade	City: Strathmere, Upper Township	State: New Jersey	ZIP Code: 08248	Company NAIC Number						
Comments. Structure is a 3 story, 2 family frame residence. There are (10) "Smart vents" provided, all are within 1 to adjacent grade. Owner to obtain certification from manufacturer of "Smart vents" regarding venting adequacy. Garage area is built on slab Signature	SECTION	ND - SURVEYOR, ENGINEER, OR	ARCHITECT CERTIFICATION	CONTINUED)						
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Check here if attachments	certification from manufacturer of "Sn	nart vents" regarding venting adequacy. C	Sarage area is built on slab.							
Check here if attachments			***************************************							
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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 Puento 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, crawl space, or enclosure) is	SECTION E BUILDING ELE	VATION INFORMATION (SURVEY	NOT PEOUIPED) FOR ZONE A							
and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Ricco 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 (IAG). a) Top of bottom floor (including basement, crawl space, or enclosure) is	SECTION E - BUILDING ELL	VATION (IF OR MIATION (SURVET	NOT REQUIRED, FOR ZONE F	TO AND ZONE A (WITHOUT BEE)						
(H4G) and the lowest adjacent grade (L4G). a) Top of bottom floor (including basement, crawl space, or enclosure) is	and C. For Items E1-E4, use natural gr	rade, if available. Check the measurement	nt used. In Puerto Rico only, enter r	neters.						
b) Top of bottom floor (including basement, crawl space, or enclosure) is			oxes to show whether the elevation	s above or below the highest adjacent grade						
E2			process process							
(elevation C2 b in the diagrams) of the building is feet eter										
E4. Top of platform of machinery and/or equipment servicing the building is										
E5 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?										
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 Address City State ZIP Code Signature Date Telephone Comments Check here if attachments										
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 Address City State ZIP Code Signature Date Telephone Comments 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, and G9 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. The following information (Items G4 -G9) is provided for community floodplain management purposes. 4. Permit Number G5. Date Permit Issued G6. Date Certificate Of Compliance/Occupancy Issued G7. This permit has been issued for: New Construction Substantial improvement B6. Elevation of as-built lowest floor (including basement) of the building:										
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 Address	ordinance?	Unknown. The local official must cel	tity this information in Section G.							
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 Address	SECTION	F - PROPERTY OWNER (OR OWN	ER'S REPRESENTATIVE) CER	RTIFICATION						
Property Owner's or Owner's Authorized Representative's Name Address City State ZIP Code Signature Date Telephone Comments Check here if attachments Check here if attachments Check here if attachments				FEMA-issued or community-issued BFE)						
Address City State ZIP Code Signature Date Telephone Comments Check here if attachments			to the best of my knowledge.							
Signature Date Telephone Comments Check here if attachments										
Check here if attachments	Address	С	ity Stat	e ZIP Code						
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Signature Comments Date Geet meters (PR) Datum Title Telephone Date	G7. This permit has been issued for:	☐ New Construction ☐ Substa	ntial Improvement							
Local Official's Name Community Name Title Telephone Signature Date Comments	38. Elevation of as-built lowest floor (inc	luding basement) of the building:	feet	tum						
Community Name Signature Comments Telephone Date	G9. BFE or (in Zone AO) depth of flooding	ng at the building site:	feet	tum						
Signature Date Comments	Local Official's Name		Title							
Comments	Community Name		Telephone							
	Signature		1 diophione							
Check here if attachments										
	Comments									