

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
 Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

1. Building Owner's Name MCDANIEL, CURTIS O.

2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
15 W WHITTIER AVENUE

City TOWNSHIP OF UPPER State NJ ZIP Code 08248

**FOR INSURANCE COMPANY USE**

Policy Number:

Company NAIC Number:

3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
LOCK 848 LOT 2

4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) ACCESSORY/GARAGE

5. Latitude/Longitude: Lat 39.1980 Long. -74.6542 Horizontal Datum:  NAD 1927  NAD 1983

6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

7. Building Diagram Number 8

8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) 600 sq ft

b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0

c) Total net area of flood openings in A8.b 0 sq in

d) Engineered flood openings?  Yes  No

A9. For a building with an attached 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 \_\_\_\_\_

c) Total net area of flood openings in A9.b \_\_\_\_\_ sq in

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. State  
NEW JERSEY

B4. Map/Panel Number <u>340159-0014</u>	B5. Suffix <u>C</u>	B6. FIRM Index Date <u>12/10/1976</u>	B7. FIRM Panel Effective/Revised Date <u>7/15/1992</u>	B8. Flood Zone(s) <u>A7</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>10'</u>
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1. 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: \_\_\_\_\_

2. Indicate elevation datum used for BFE in Item B9:  NGVD 1929  NAVD 1988  Other/Source: \_\_\_\_\_

3. 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 Vertical Datum: NGVD 29

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)	<u>8.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>8.3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>N/A</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>8.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>8.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

## 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 licensed land surveyor?  Yes  No

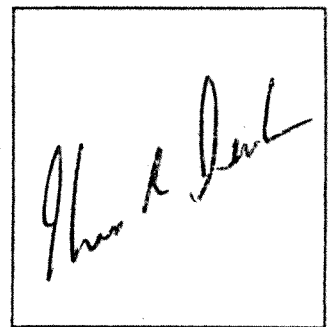
Check here if attachments.

Certifier's Name THOMAS R. DENEKA License Number 35828

File No. NJPLS Company Name STONE HARBOR SURVEYORS

Address PO BOX 511 City STONE HARBOR State NJ ZIP Code 08247

Signature [Signature] Date 5/16/2013 Telephone 609-368-7451



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

Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
WHITTIER AVENUE  
TOWNSHIP OF UPPER  
State NJ ZIP Code 08248

FOR INSURANCE COMPANY USE  
Policy Number:  
Company NAIC Number:

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

with sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

*Thomas R. [Signature]*

Date

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

is 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, or Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

vide 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).

Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.

Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.

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 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 \_\_\_\_\_  feet  meters  above or  below the HAG.

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

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) must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Owner's or Owner's Authorized Representative's Name

City

State

ZIP Code

Date

Telephone

Check here if attachments.

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

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 on Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8-G10. In Puerto Rico only, enter meters.

If 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.)

If 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-G10) is provided for community floodplain management purposes.

Number \_\_\_\_\_ G5. Date Permit Issued \_\_\_\_\_ G6. Date Certificate Of Compliance/Occupancy Issued \_\_\_\_\_

Permit has been issued for:  New Construction  Substantial Improvement

Top of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Minimum (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Official's Name \_\_\_\_\_ Telephone \_\_\_\_\_

Official's Name \_\_\_\_\_ Date \_\_\_\_\_

Check here if attachments.

# Building Photographs

See Instructions for Item A6.

**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.  
105 W. WHITTIER AVENUE

City TOWNSHIP OF UPPER

State NJ

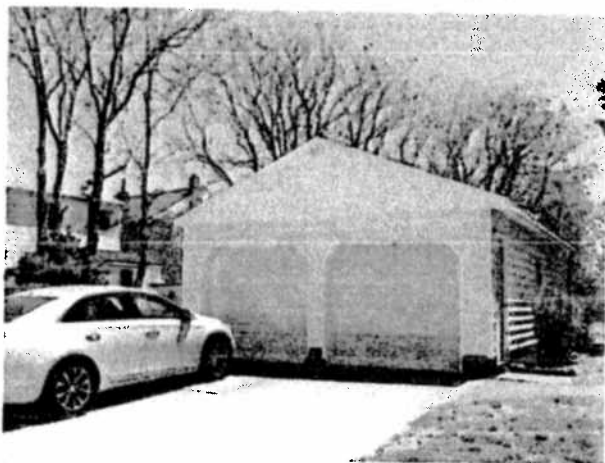
ZIP Code 08248

FOR INSURANCE COMPANY USE

Policy Number:

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 5/15/2013**



**REAR VIEW 5/15/2013**