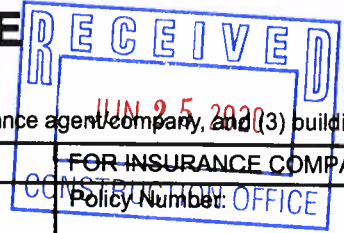


*Beech Bar*

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

# ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.



Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Scott Oliver		FOR INSURANCE COMPANY USE Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 22 Ocean Drive		Company NAIC Number:	
City Upper Township		State New Jersey	ZIP Code 08248
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lor 4 & 5, Block 850			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) _____			
A5. Latitude/Longitude: Lat. 39°12'02.6"N Long. 74°39'18.4"W Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>5</u>			
A8. For a building with a crawlspace or enclosure(s):			
a) Square footage of crawlspace or enclosure(s) _____ 0.00 sq ft			
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>			
c) Total net area of flood openings in A8.b _____ 0.00 sq in			
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
A9. For a building with an attached garage:			
a) Square footage of attached garage _____ 0.00 sq ft			
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>			
c) Total net area of flood openings in A9.b _____ 0.00 sq in			
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Upper Township 340159		B2. County Name Cape May		B3. State New Jersey	
B4. Map/Panel Number 340159 0159	B5. Suffix F	B6. FIRM Index Date 10-05-2017	B7. FIRM Panel Effective/ Revised Date 10-05-2017	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 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

# ELEVATION CERTIFICATE

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<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 22 Ocean Drive			Policy Number:
City Upper Township	State New Jersey	ZIP Code 08248	Company NAIC Number

## 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.

- 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 G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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- G7. This permit has been issued for:  New Construction  Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters 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
Community Name	Telephone
Signature	Date

Comments (including type of equipment and location, per C2(e), if applicable)

Check here if attachments.



# BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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## ELEVATION CERTIFICATE

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 22 Ocean Drive			Policy Number:
City Upper Township	State New Jersey	ZIP Code 08248	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.



Photo One

Photo One Caption FRONT VIEW (Date taken: 06-19-2020)

[Clear Photo One](#)



Photo Two

Photo Two Caption REAR VIEW (Date taken: 06-19-2020)

[Clear Photo Two](#)



# BUILDING PHOTOGRAPHS

Continuation Page

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## ELEVATION CERTIFICATE

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 22 Ocean Drive			Policy Number:
City Upper Township	State New Jersey	ZIP Code 08248	Company NAIC Number

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

Photo Three Caption RIGHT SIDE VIEW (Date taken: 06-19-2020)

Clear Photo Three



Photo Four

Photo Four Caption LEFT SIDE VIEW (Date taken: 06-19-2020)

Clear Photo Four