

FEDERAL EMERGENCY MANAGEMENT AGENCY  
 NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

O.M.B. No. 3057-0077  
 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

**SECTION A - PROPERTY OWNER INFORMATION**

BUILDING OWNER'S NAME: JASON & HEATHER CTYIK

BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.: 244 DORY DRIVE

CITY: OCEAN CITY STATE: NEW JERSEY ZIP CODE: 08226

PROPERTY DESCRIPTION (Lot and Block Number, Tax Parcel Number, Legal Description, etc.): LOT 1, BLOCK 5411

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.):

LATITUDE/LONGITUDE (OPTIONAL) (29-29-29.29 or 29.2929):

HORIZONTAL DATUM:  NAD 1927  NAD 1983 SOURCE:  GPS (Type):  USGS Quad Map  Other:

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

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>345310 0004 D</u>		B2. COUNTY NAME <u>CAPE MAY COUNTY</u>		B3. STATE <u>NEW JERSEY</u>	
B4. MAP AND PANEL NUMBER <u>345310 0004</u>	B5. SUFFIX <u>D</u>	B6. FIRM INDEX DATE <u>7/15/92</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>7/15/92</u>	B8. FLOOD ZONE(S) <u>A-1</u>	B9. BASE FLOOD ELEVATION(S) (Zone A0, use depth of flooding) <u>9</u>

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
 FIS Profile  FIRM  Community Determined  Other (Describe):

B11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988  Other (Describe):

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or otherwise Protected Area (OPA)?  Yes  No  
 Designation Date:

**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. Building Diagram Number 8 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 8 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.  
 Datum 1929 Conversion/Comments:

Elevation reference mark used	Does the elevation reference mark used appear on the FIRM?	Yes	No
<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>9.3</u> ft (m)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> b) Top of next higher floor	<u>17.3</u> ft (m)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	<u>9.3</u> ft (m)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> d) Attached garage (top of slab)	<u>N/A</u> ft (m)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building	<u>9.3</u> ft (m)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> f) Lowest adjacent grade (LAG)	<u>6.6</u> ft (m)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> g) Highest adjacent grade (HAG)	<u>7.8</u> ft (m)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	<u>11</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3h	<u>1140</u> (sq. ft) (sq. m)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**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 in Sections A, B, and C 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.

CERTIFIER'S NAME: THOMAS N. TOLBERT LICENSE NUMBER: 38608

TITLE: PROFESSIONAL LAND SURVEYOR COMPANY NAME: DESIGNS LAND SURVEYING

ADDRESS: 241 ROUTE 165 CITY: TURNERSVILLE STATE: NJ ZIP CODE: 08012

SIGNATURE: [Signature] DATE: 10/8/00 TELEPHONE: 856-374-1134