

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

			Expiration Bato. November 60, 2010		
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. 120 53 rd Street (Building #1 – see attached plan)			FOR INSURANCE COMPANY USE		
			Policy Number:		
City Ocean City	State Maryland	ZIP Code 21842	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.



Right Side View of #120 53rd Street (Building #1 - see attached plan) on 9-30-2016.



Left Side View of #120 53rd Street (Building #1 – see attached plan) on 9-30-2016.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

			=xp::date:: 2010		
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. 120 53 rd Street (Building #1 – see attached plan)			FOR INSURANCE COMPANY USE		
			Policy Number:		
City Ocean City	State Maryland	ZIP Code 21842	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 of #120 53rd Street (Building #1 – see attached plan) on 9-30-2016.



Rear View of # 120 53rd Street (Building #1 – see attached plan)on 9-30-2016.

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, State 120 53 rd Street (Building #1 – see attached plants)	No. Policy Number:					
City Ocean City	Company NAIC Number					
SECTION	ON G - COMMUNITY INFORMATION (OPTIO	NAL)				
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 or Zone AO.	on E for a building located in Zone A (without a	a FEMA-issued or community-issued BFE)				
G3. The following information (Items G4–	G10) is provided for community floodplain man	nagement purposes.				
G4. Permit Number	G6. Date Certificate of Compliance/Occupancy Issued					
G7. This permit has been issued for:	☐ New Construction ☐ Substantial Improvem	ent				
G8. Elevation of as-built lowest floor (including of the building:	feet meters Datum					
G9: BFE or (in Zone AO) depth of flooding at t	he 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 loc	cation, per C2(e), if applicable)					
		1950 1 90 400				
		at the same				
		☐ Check here if attachments.				

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/o 120 53 rd Street (Building #1 – see attached plan)	Policy Number:					
City Sta Ocean City Mar		Code 842	Company NAIC N	umber		
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) isb) Top of bottom floor (including basement, crawlspace, or enclosure) is		☐ feet ☐ mete		below the HAG. below the LAG.		
E2. For Building Diagrams 6–9 with permanent flood oper the next higher floor (elevation C2.b in the diagrams) of the building is	nings provided in Sectio	n A Items 8 and/or 9	9 (see pages 1–2 of	f Instructions),		
E3. Attached garage (top of slab) is	·	☐ feet ☐ mete		below the HAG. below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ mete		below the HAG.		
E5. Zone AO only: If no flood depth number is available, i floodplain management ordinance?	s the top of the bottom f		ordance with the co	─ ommunity's		
SECTION F - PROPERTY OWNE	R (OR OWNER'S REPI	RESENTATIVE) CE	RTIFICATION			
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Sections statements in Sections	s A, B, and E for Zo A, B, and E are corr	ne A (without a FEN ect to the best of m	MA-issued or knowledge.		
Property Owner or Owner's Authorized Representative's N				, ,		
Address	City	Sta	ate	ZIP Code		
Signature	Date	Tel	ephone			
Comments						
				19.5 %		
				90 E10 II		
			Check here	e if attachments.		

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding inf	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Blo 120 53 rd Street (Building #1 – see attached plan)	Policy Number:					
City State Ocean City Maryland		Code 42	Company NAIC No	umber		
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on: Construction Drawings* Building Under Construction* X Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. 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: DOWNS Vertical Datum: NAVD 1988 Indicate elevation datum used for the elevations in items a) through h) below.						
☐NGVD 1929 ☒ NAVD 1988 ☐ Other/So Datum used for building elevations must be the same as		FF.				
a) Top of bottom floor (including basement, crawlspace) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (Vol. d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing (Describe type of equipment and location in Comme f) Lowest adjacent (finished) grade next to building (LA g) Highest adjacent (finished) grade next to building (H) h) Lowest adjacent grade at lowest elevation of deck or structural support SECTION D – SURVEYOR, EN This certification is to be signed and sealed by a land survey I certify that the information on this Certificate represents my statement may be punishable by fine or imprisonment under Were latitude and longitude in Section A provided by a license	e, or enclosure floor). If Zones only) Ing the building ints) Ing Given and the stairs, including Ing Given and the stairs, including and	2.8 7.1 N/A N/A 5.1 3.9 4.5 4.0 HITECT CERTIFICATION	X feet	meters at any false meters.		
	cense Number aryland #10782 De	laware #502	A STAIN STAIN WAS THE	HVEYOR WITH THE TOTAL TO		
City	City State ZIP Code			- No. 1010.		
	ate 9/30/2016 for (1) community offi	Telephone 410-641-5353	gent/company and	(3) building owner		
Comments (including type of equipment and location, per C2 1. This certificate is strictly for the use of the building owne 2. See attached plan for enclosures and venting information	(e), if applicable) as named hereon.	, (E) HIOGIAHIOGA	gene company, and	(c) building owner.		

DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

11130-09-30-2016-001 (Building #1) OMB No. 1660-0008

Expiration Date: November 30, 2018

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				FOR INS	SURANCE COMPANY USE		
A1. Building Owner's Name Bayspot Condominium				Policy No	umber:		
A2. Building Street Address (including Apt.,Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 120 53 rd Street (Building #1 – see attached plan)				Compan	Company NAIC Number:		
					Code 1842		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Parcel 6759 - Tax Map 113							
A4. Building Use (e.g., Reside	ntial, Non-Residential, Ad	ldition,	Accessory, etc.)	Residential			
A5. Latitude/Longitude: Lat.	38° 22' 42.6" Lo	ong.	75° 04' 16.6"	Horizontal Datum:	NAD	1927 XNAD 1983	
A6. Attach at least 2 photograp	hs of the building if the C	Certifica	te is being used to	obtain flood insurance			
A7. Building Diagram Number	8						
A8. For a building with a crawls	space or enclosure(s):						
 a) Square footage of craw 	Ispace or enclosure(s)	see att	tachment sq ft				
b) Number of permanent f	ood openings in the crav	/Ispace	or enclosure(s) wit	hin 1.0 foot above adja	acent grad	de	
, c) Total net area of flood o	penings in A8.b	sq	in			10	
d) Engineered flood openi	ngs?	No					
A9. For a building with an attac	hed garage:						
 a) Square footage of attac 	hed garageN/A	S	q ft				
b) Number of permanent f	ood openings in the attac	ched ga	arage within 1.0 foo	t above adjacent grade	e		
c) Total net area of flood o	penings in A9.b		sq in			**	
d) Engineered flood openi	ngs?	No					
S	ECTION B - FLOOD IN	SURAN	ICE RATE MAP (FIRM) INFORMATIO	N		
B1. NFIP Community Name & 0			B2. County Name			B3. State	
Town of Ocea	n City 245207		This was considered the control of t	Worcester		Maryland	
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date		RM Panel Effective/ evised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zor AO, use Base Flood Depth)		
24047 C 0064 H	7-16-2015	7-	16-2015	AE	6		
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
FIS Profile X FIRM Community Determined Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?							
Designation Date: CBRS OPA							