



**City of Margate City
Department of Building Inspection**

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Margate City, New Jersey 08402
(609) 822-1974
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James Galantino
Construction Official
Building Subcode Official
N.J. License #06161

**NON-CONVERSION AGREEMENT
FOR STRUCTURES IN THE 100-YEAR FLOODPLAIN**

(Attached and Detached Garages, Sheds, Storage Rooms – Crawl Spaces greater than 6 Feet in Height)

This DECLARATION made this ____ day of _____, 20 ____, by _____ (“Owner”) having
an address at _____.

WHEREAS, the Owner is the record owner of all real estate property located at: _____
in the City of Margate City in the County of Atlantic, designated in tax records as Block ____ Lot ____, and

WHEREAS, the Owner has applied for a permit or variance to place a structure on that property that either(1) does not
conform, or (2) may not be compliant by later conversion, to the strict elevation requirements of FLOOD DAMAGE
PREVENTION, Chapter 145, of the City of Margate City, New Jersey Code of Ordinances and under Permit
#_____ (“Permit”), and

WHEREAS, as the condition of a Certificate of Occupancy, the Owner agrees to record this DECLARATION and certifies
and declares that the following covenants, conditions and restrictions are placed on the affected property as a condition of
granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner, his heirs, personal
representatives, successors and assigns; now, therefore, the undersigned hereby agrees to the following:

1. The structure or part thereof to which these conditions apply is: _____.
2. At this site, the Base Flood Elevation is ____ feet above mean sea lever, National Geodetic Vertical Datum.
3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to
the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished and/or constructed
of flood resistant materials. Minimal flood proofed electrical equipment is allowed and no mechanical or plumbing
devices shall be installed below the Base Flood Elevation.
4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with Flood vents
as shown on the Permit.
5. Any alterations or changes from these conditions constitute a violation of the Permit and and may render the structure
uninsurable or increase the cost of flood insurance.
6. That the owner and subsequent owners agree to allow a representative of the City of Margate in the premises to verify
compliance with this agreement at least once each year. The City representative will provide at least 48 hours notice of
such visit.
7. That this Agreement shall be recorded with the deed to the above property so that subsequent owners are made aware of
these restrictions.

As witness the hand and seal of the owner of the subject property this ____ day of _____, 20 ____.

Owner's Name (Printed)

Signature of Owner

(SEAL)

Signature Notary Public, State of New Jersey

(DOCUMENT MUST BE RECORDED AND PROOF OF RECORDING PROVIDED)



Atlantic County Document Summary Sheet

ATLANTIC COUNTY CLERK
5901 MAIN ST
MAYS LANDING, NJ 08330

Return Name and Address

Official Use Only

Submitting Company

Document Date (mm/dd/yyyy)

Document Type

NON-CONVERSION AGREEMENT - DCR

No. of Pages of the Original Signed Document
(Including the cover sheet)

Consideration Amount (If applicable)

First Party

(Grantor or Mortgagor or
Assignor)
(Enter up to five names)

Name(s)

(Last Name, First Name Middle Initial, Suffix)
(or Company Name as written)

Address (Optional)

Second Party

(Grantee or Mortgagee or
Assignee)
(Enter up to five names)

Name(s)

(Last Name, First Name Middle Initial, Suffix)
(or Company Name as written)

Address (Optional)

Parcel Information

(Enter up to three entries)

Municipality

Block

Lot

Qualifier

Property Address

Reference Information

(Enter up to three entries)

Book Type

Book

Beginning Page

Instrument No.

Recorded/File Date

DO NOT REMOVE THIS PAGE

DOCUMENT SUMMARY SHEET (COVER SHEET) IS PART OF ATLANTIC COUNTY FILING RECORD. RETAIN THIS PAGE FOR FUTURE REFERENCE.

ACKNOWLEDGMENT

STATE OF: _____

COUNTY OF: _____

I CERTIFY that on this _____ day of _____, 20____

_____ personally came before me and acknowledged under oath, to my satisfaction, that this person (or if more than one, each person):

- (a) is/are the person(s) name and who executed the within instrument
- (b) acknowledged that he/she/they signed, sealed and delivered the same as their voluntary act and deed

Notary's Signature

My commission expires: _____

ACKNOWLEDGMENT
CORPORATE

STATE OF: _____

COUNTY OF: _____

I CERTIFY that on this _____ day of _____, 20_____

_____ personally came before me and has satisfactorily identified themselves to be the signer(s) of:

- (a) the attached instrument
- (b) was authorized to and did execute this instrument as the _____
of the entity named in this instrument
- (c) as the act of the entity named in this instrument

Notary's Signature

My commission expires: _____