15/1.01

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program OMB No. 1605-0008 VED Expiration Date: November 30, 2019

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

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SECTION A - PROPERTY INFORMATION				FOR INS	UEANSERESNBARFE!		
A1. Building Ow ARNOLD GALM						Policy Nu	ımber:
A2. Building Stre Box No. 118 SOUTH 20TI		ncluding Apt., Unit, Su	ite, and	l/or Bldg. No.) or F	P.O. Route and	Company	NAIC Number:
City		*		State		ZIP Code	
LONGPORT				New Jersey		08403	
A3. Property Des BLOCK 15 LOT		and Block Numbers, T	ax Parc	el Number, Legal	Description, etc.)		77
		ntial, Non-Residential,	Additio	n, Accessory, etc.) RESIDENTIAL		
A5. Latitude/Long	jitude: Lat	39 18' 32.4"	Long.	74 31' 45.1"	Horizontal Datum	n: NAD	1927 × NAD 1983
A6. Attach at leas	st 2 photograp	ohs of the building if the	e Certif	icate is being use	d to obtain flood insura	ance.	
A7. Building Diag	ram Number	8					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square for	otage of craw	Ispace or enclosure(s)		3.000 sq fi			
b) Number of	permanent fl	ood openings in the cr	awlspa	ce or enclosure(s)	within 1.0 foot above	adiacent d	rade 15
			000			aajaooni g	
d) Engineered		•		-4			
			0				
49. For a building	with an attacl	ned garage:					
a) Square foo	tage of attach	ned garage802		sq ft			
b) Number of	permanent flo	ood openings in the att	ached :	garage within 1.0	foot above adjacent g	rade	5
c) Total net ar	ea of flood op	penings in A9.b 1,	000	sq in			
d) Engineered	flood openin	gs? X Yes N	0				
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAR	P (FIRM) INFORMAT	TION	t.
1. NFIP Commun		ommunity Number		B2. County Nam			B3. State
LONGPORT :	345302			ATLANTIC			New Jersey
	DE C. (E.	B6. FIRM Index	B7. F	IRM Panel	B8. Flood Zone(s)	B9. Bas	se Flood Elevation(s)
	B5. Suffix	Do. I II titi III dox					
. Map/Panel Number	Bo. Sumx	Date		fective/ evised Date			ne AO, use Base
Number	B5. Sumx			evised Date	A-8		ne AO, use Base of Depth)
Number 5302/0001	В	Date 08/12/1970	08/15	evised Date /1983		10.00	ne AO, use Base od Depth)
Number 5302/0001 10. Indicate the so	B ource of the E	Date 08/12/1970 Base Flood Elevation (E	08/15. 3FE) da	evised Date /1983 ata or base flood d		10.00	ne AO, use Base od Depth)
Number 5302/0001 10. Indicate the so	B ource of the E	Date 08/12/1970	08/15. 3FE) da	evised Date /1983 ata or base flood d		10.00	ne AO, use Base od Depth)
Number 5302/0001 10. Indicate the so	B ource of the E	Date 08/12/1970 Base Flood Elevation (E	8FE) da	evised Date /1983 ata or base flood d Other/Source:	epth entered in Item E	10.00	ne AO, use Base od Depth)
Number 5302/0001 10. Indicate the so ☐ FIS Profile 11. Indicate eleva	B Durce of the E FIRM [tion datum us	Date 08/12/1970 Base Flood Elevation (E Community Determine	BFE) datined	evised Date /1983 ata or base flood d Other/Source:	epth entered in Item E	Floc 10.00	ne AO, use Base od Depth)
Number 3302/0001 0. Indicate the so FIS Profile 1. Indicate eleva	B Durce of the E FIRM [tion datum us located in a 6	Date 08/12/1970 Base Flood Elevation (E Community Determined for BFE in Item B9: Coastal Barrier Resour	BFE) datined	evised Date /1983 ata or base flood d Other/Source:	epth entered in Item E	Floc 10.00	ne AO, use Base of Depth)

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, St 118 SOUTH 20TH AVENUE	uite, and/or Bldg. No.) or P.O.	Route and Box No.	Policy Number:
City LONGPORT		ZIP Code 08403	Company NAIC Number
SECTION C - BUIL	DING ELEVATION INFORM	MATION (SURVEY R	EQUIRED)
C1. Building elevations are based on: *A new Elevation Certificate will be require C2. Elevations – Zones A1–A30, AE, AH, A (v Complete Items C2.a–h below according to Benchmark Utilized: Indicate elevation datum used for the elevation	Construction Drawings* ed when construction of the buyith BFE), VE, V1–V30, V (with both with BFE), VE, V1–V30, V (with BFE), V2–V30, V (with BFE), V1–V30, V (with BFE), V1–V30, V (with BFE), V2–V30, V (with BFE), V3–V30, V (with	Building Under Construilding is complete. In BFE), AR, AR/A, AR/ In Puert In MGVD 1929 Below. BFE.	uction* Finished Construction /AE, AR/A1–A30, AR/AH, AR/AO,
b) Top of the next higher floor		12, 30	X feet meters
c) Bottom of the lowest horizontal structure	al member (V Zones only)	N/A.	X feet meters
d) Attached garage (top of slab)	to the state of th	9 90	X feet meters
e) Lowest elevation of machinery or equip (Describe type of equipment and location	ment servicing the building on in Comments)	12. 30	x feet meters
f) Lowest adjacent (finished) grade next to	building (LAG)	<u>8</u> . <u>70</u>	X feet meters
g) Highest adjacent (finished) grade next t	o building (HAG)	10.30	X feet meters
b) Lowest adjacent grade at lowest elevati structural support		10. 30	
SECTION D - SUR	VEYOR, ENGINEER, OR A	RCHITECT CERTIFIC	CATION
This certification is to be signed and sealed by a l certify that the information on this Certificate restatement may be punishable by fine or imprison. Were latitude and longitude in Section A provide	land surveyor, engineer, or a presents my best efforts to in nment under 18 U.S. Code, Se	rchitect authorized by terpret the data availab ection 1001.	law to certify elevation information
Certifier's Name	License Number		*
DANIEL J. PONZIO, SR. Title LAND SURVEYOR	GS37603		
Company Name ARTHUR W. PONZIO CO. & ASSOC., INC.			Place Seal
Address 400 NORTH DOVER A ENUE	7		Here
City ATLANTIC CITY	State New Jersey	ZIP Code 08401	· · · · · · · · · · · · · · · · · · ·
Signature	Date 02/14/2017	Telephone (609) 344-8194	
		official, (2) insurance ag	ent/company, and (3) building owner.
Comments (including type of equipment and local	tion, per C2(e), if applicable)		
PROJECT #31006 *HEATER SM/	ART VENT MODEL #1540-52	0	

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

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	FOR INSURANCE COMPANY USE
118 SOUTH 20TH AVENUE	Policy Number:
City State ZIP Code LONGPORT New Jersey 08403	Company NAIC Number
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT FOR ZONE AO AND ZONE A (WITHOUT BFE)	REQUIRED)
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurementer meters.	LOMA or LOMR-F request, ment used. In Puerto Rico only,
E1. Provide elevation information for the following and check the appropriate boxes to show whether the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).a) Top of bottom floor (including basement,	the elevation is above or below
crawlspace, or enclosure) is feet meters b) Top of bottom floor (including basement,	above or below the HAG.
crawlspace, or enclosure) is feet meters	
E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or the next higher floor (elevation C2.b in the diagrams) of the building is feet meters	
E3. Attached garage (top of slab) is feet meters	
E4. Top of platform of machinery and/or equipment servicing the building is feet meters	above or below the HAG.
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in acc floodplain management ordinance? Yes No Unknown. The local official must come be a compared to the c	ordance with the community's ertify this information in Section G.
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CE	RTIFICATION
The property owner or owner's authorized representative who completes Sections A, B, and E for Zon community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are corre	e A (without a FEMA-issued or
Property Owner or Owner's Authorized Representative's Name	ect to the best of my knowledge.
Address City Stat	to the state of th
	e ZIP Code
Signature Date Tele	e ZIP Code
Signature Date Tele Comments	1
	1
	1
	1
	1
	1
	1
	1
	1
	1

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspon			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 118 SOUTH 20TH AVENUE	ind/or Bldg. No.) or P.C). Route and Box No.	Policy Number:
City LONGPORT	State New Jersey	ZIP Code 08403	Company NAIC Number
SECTION G -	- COMMUNITY INFOR	MATION (OPTIONAL)	
The local official who is authorized by law or ordinand Sections A, B, C (or E), and G of this Elevation Certifused in Items G8–G10. In Puerto Rico only, enter me	ficate. Complete the ap	mmunity's floodplain mar plicable item(s) and sign	nagement ordinance can complete below. Check the measurement
G1. The information in Section C was taken from the engineer, or architect who is authorized by data in the Comments area below.)	n other documentation law to certify elevation	that has been signed ar information. (Indicate the	nd sealed by a licensed surveyor, e source and date of the elevation
G2. A community official completed Section E for Zone AO.			
G3. The following information (Items G4–G10) is	s provided for commun	ity floodplain manageme	ent purposes.
G4. Permit Number G5.	Date Permit Issued		ate Certificate of ompliance/Occupancy Issued
G7. This permit has been issued for:	Construction Subst	antial Improvement	s 6
G8. Elevation of as-built lowest floor (including baser of the building:	nent)	feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding at the build	ding site:	feet	meters Datum
G10. Community's design flood elevation:	9	feet	meters Datum
Local Official's Name	Title		*
Community Name	Telep	hone	
Signature	Date		
Comments (including type of equipment and location, p	er C2(e), if applicable)		
	,		
			5.
			Check here if attachments.

- A.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

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City	State	ZIP Code	Company NAIC Number
LONGPORT	New Jersey	08403	

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.

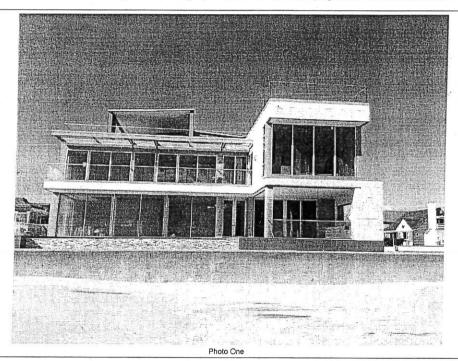


Photo One Caption

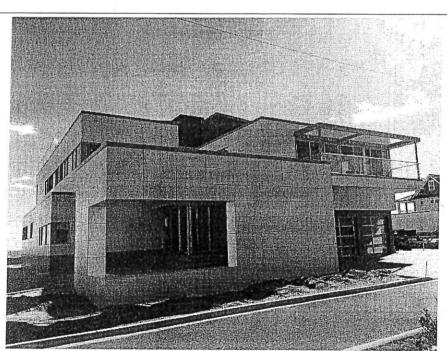


Photo Two

FEMA Form 086-0-33 (7/15)

BUILDING PHOTOGRAPHS

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Continuation Page

Property and Control of the Control				
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. 118 SOUTH 20TH AVENUE				
State	State ZIP Code	Company NAIC Number		
New Jersey	08403	Tampan, mas rames		
	pt., Unit, Suite, and/or Bldg. No.) or State	pt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State ZIP Code		

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.

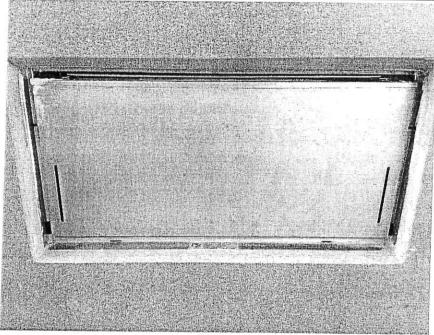


Photo One Caption



Photo Two Caption