## U.S. DEPARTMENT OF HOMELAND SECURITY Federal in a dency, Management Agency National Mond Vising Program

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION	For Insurance Company Use:			
A1. Building Owner's Name JIM CHRISTALDI	Policy Number			
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. ∠01 NORTH 36TH AVENUE	Company NAIC Number			
City LONGPORT State NJ ZIP Code 08403	7			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 118 - LOT 1	Vew Home			
enclosure(s) walls within 1.0 foot above adjacent grade 3 walls within 1.0 foot ab c)  Total net area of flood openings in A8.b 2331 sq in c)  Total net area of flood	ched garage, provide: ched garage 375 sq ft d openings in the attached garage cove adjacent grade 2 openings in A9.b 400 sq in			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	N			
B1. NFIP Community Name & Community Number B2. County Name ATLANTIC COUNTY	B3. State NEW JERSEY			
B4. Map/Panel Number         B5. Suffix         B6. RM Index Date         B7. FIRM Panel         B8. Flood Zone(s)           0001         B         8/12/70         8/15/83         A-8	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)			
Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.    FIS Profile   FIRM   Community Determined   Other (Describe)				
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIR	RED)			
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.  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-g below according to the building diagram specified in Item A7.  Benchmark Utilized RM-3 Vertical Datum NGV 1929  Conversion/Comments				
Check the measurer				
Top of bottom floor (including basement, crawl space, or enclosure floor)  b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) f) Lowest adjacent (finished) grade (LAG) g) Highest adjacent (finished) grade (HAG)  T.25  Identify Teet meters (Puerlice)  T.54  Identify Teet meters (Puerlice)  T.55  Identify Teet meters (Puerlice)  T.55  Identify Teet meters (Puerlice)  T.55  Teet meters (Puerlice)  Teet	to Rico only)			
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION	ON The second se			
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevati information. I certify that the information 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.  Check here if comments are provided on back of form.	PLACE SEAL			
Certifier's Name DANIEL J. PONZIO, SR. License Number GS37603	HE STE			
Company Name ARTHUR W. PONZIO CO. & ASSOCIATES, INC.  aress 400 NORTH DOVER AVENUE City ATLANTIC CITY State NJ ZIP Code 08401				
Signature Date 9/5/08 Telephone 609-344-8194				

	opy the corresponding information		For Insurance Company Use:
Building Street Address (including Apt., 201 N. 36TH AVENUE	Unit, Suite, and/or Bldg. No.) or P.O. Rout	e and Box No.	Policy Number
City LONGPORT State NJ ZIP Code	e 08403		Company NAIC Number
SECTION	D - SURVEYOR, ENGINEER, OR AR	CHITECT CERTIFICATION (CO	NTINUED)
	icate for (1) community official, (2) insurance		vner.
Comments * AIR CONDITIONING UN	HT = 11.76' PROJECT #2934	1	
- my for	and I		
Signature	$\gamma/f$	Date 9/5/08	☐ Check here if attachments
SECTION E - BUILDING ELEV	VATION INFORMATION (SURVEY NO	T REQUIRED) FOR ZONE AO	
and C. For Items E1-E4, use natural g E1. Provide elevation information for grade (HAG) and the lowest adja a) Top of bottom floor (including b) E2. For Building Diagrams 6-8 with proceedings of the diagrams) (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no flood depth in	basement, crawl space, or enclosure) is	sused. In Puerto Rico only, enter measures to show whether the elevation is a feet meters feet meters feet meters may make a make a show or below the subove or below the subove or feet meters about the subove or subove or feet meters about the subove or feet meters subove or subo	ters. above or below the highest adjacent above or below the HAG. above or below the LAG. nstructions), the next higher floor HAG. ove or below the HAG.
SECTION	F - PROPERTY OWNER (OR OWNE	R'S REDRESENTATIVE) CERTI	FICATION
	red representative who completes Sections		
	ments in Sections A, B, and E are correct to		
Address	City	State	ZIP Code
Signature	Dat	e Telepho	one
Comments			
	OFOTION O COMMUNITY IN	COMATION (ORTIONAL)	Check here if attachments
The local official who is authorized by lay	SECTION G - COMMUNITY INI w or ordinance to administer the community		can complete Sections A. B. C. (or E)
and G of this Elevation Certificate. Comp G1. The information in Section C w is authorized by law to certify e	plete the applicable item(s) and sign below.  yas taken from other documentation that ha elevation information. (Indicate the source	Check the measurement used in Ite s been signed and sealed by a licens and date of the elevation data in the C	ms G8. and G9. ed surveyor, engineer, or architect who Comments area below.)
5 5	d Section E for a building located in Zone A		ty-issued BFE) or Zone AO.
	ns G4G9.) is provided for community flood		nliance/Occupancy leaved
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Com	pliance/Occupancy issued
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (inc G9. BFE or (in Zone AO) depth of floodir	luding basement) of the building:	ial Improvement 	Marian China Carlo
Local Official's Name		Title	
Community Name		Telephone	
Signature		Date	
omments			

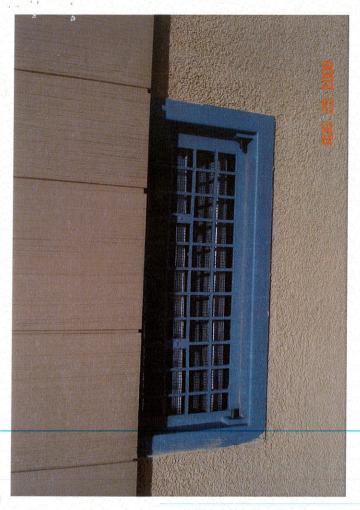
## **Building Photographs**

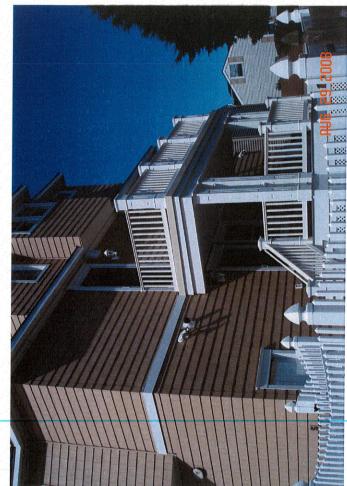
See Instructions for Item A6.

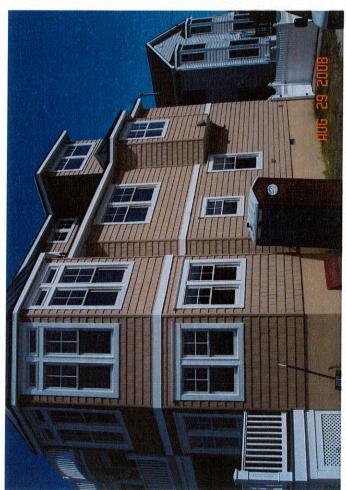
	For Insurance Company Use:
uilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 201 N. 36 <sup>™</sup> AVENUE	Policy Number
City LONGPORT State NJ ZIP Code 08403	Company NAIC Number

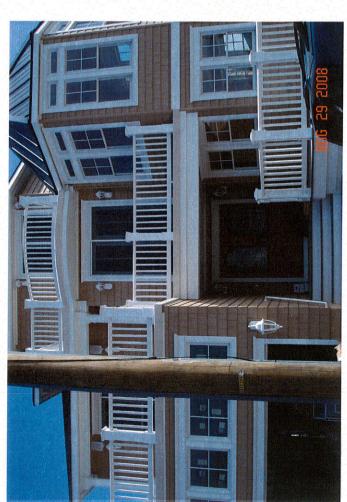
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.

SEE ATTACHED PHOTOS









36 th ST., 201 17566 #



