**ELEVATION CERTIFICATE** OMB No. 1660-0008 U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency Expires February 28, 2009 National Flood Insurance Program Important: Read the instructions on pages 1-8. Bk/Pg 953/55 HDG # 5085 **SECTION A - PROPERTY INFORMATION** For Insurance Company Use: A1. Building Owner's Name Eustace Mita Policy Number Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number To South 18th Avenue City Longport State NJ ZIP Code 08403 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 1.01, Block 13 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. N 39° 18' 27.7" Long. W 74° 31' 50.1" Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1 A8. For a building with a crawl space or enclosure(s), provide A9. For a building with an attached garage, provide: a) Square foolage of crawl space or enclosure(s) N/A sq ft a) Square footage of attached garage sa ft b) No. of permanent flood openings in the crawl space or b) No. of permanent flood openings in the attached garage enclosure(s) walls within 1.0 foot above adjacent grade walls within 1.0 foot above adjacent grade 0 N/A Total net area of flood openings in A8.b N/A c) Total net area of flood openings in A9.b 0.0 sq in SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State Borough of Longport 345302 Atlantic County NJ B4. Map/Panel Number B5. Suffix **B6. FIRM Index B7. FIRM Panel** B8. Flood B9. Base Flood Elevation(s) (Zone Effective/Revised Date Date Zone(s) AO, use base flood depth) 345302 0001 В N/A 8/15/83 **A8** 10' B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. ☐ Community Determined Other (Describe) B11. Indicate elevation datum used for BFE in Item 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 ☐ CBRS ПОРА 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. 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 Vertical Datum Conversion/Comments Check the measurement used. Top of bottom floor (including basement, crawl space, or enclosure floor) 10.40 Top of the next higher floor N/A Bottom of the lowest horizontal structural member (V Zones only) c) N/A d) Attached garage (top of slab) ☑ feet ☐ meters (Puerto Rico only) <u>979</u> Lowest elevation of machinery or equipment servicing the building 10.25 (Describe type of equipment in Comments) Lowest adjacent (finished) grade (LAG) 9.75 Highest adjacent (finished) grade (HAG) 9.95 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 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 Thomas A. Prendergast, PLS License Number NJ 37604 HERE 2007 Time P.L.S. Company Name Hyland Design Group Address 101 East Eighth Street City Ocean City State NJ ZIP Code 08226 Signature Date 4/23/07 Telephone 609.398.4477 FEMA Form 81-31, February 2006 See reverse side for continuation.

IMPORTANT: In these spaces.	copy the corresponding information for	rom Section A	For Insurance Company Use:		
Building Street Address (including Apt., Unit, Suite, and/or Bldg, No.) or P.O. Route and Box No.			Policy Number		
118 South 18 <sup>th</sup> Avenue			harden & total of the catalog of the		
City Longport State NJ ZIP Code 08403			Company NAIC Number		
SECTIO	N D - SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFICATION (CO	NTINUED)		
Copy both sides of this Elevation Cert	tificate for (1) community official, (2) insurance	agent/company, and (3) building ov	wner.		
Comments C2a. Lowest Floor - Gro		, , , , , , , , , , , , , , , , , , ,			
C2e. Lowest Mechanica	ls Located on Utility Platform - Elev 10.25				
			zi		
Signature	Da	ite	Chook home 'f attack		
SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZONE AO	Check here if attachments  AND ZONE A (WITHOUT BFF)		
For Zones AO and A (without BFE), of and C. For Items F1-F4 use natural	complete Items E1-E5. If the Certificate is intergrade, if available. Check the measurement up	nded to support a LOMA or LOMR-f	request, complete Sections A, B,		
	r the following and check the appropriate boxe				
grade (HAG) and the lowest adj	acent grade (LAG).		(E) (E)		
a) Lop of bottom floor (including     b) Top of bottom floor (including	basement, crawl space, or enclosure) is basement, crawl space, or enclosure) is	feet meters	above or below the HAG.		
E2. For Building Diagrams 6-8 with	permanent flood openings provided in Section	A Items 8 and/or 9 (see page 8 of It	nstructions) the next higher floor		
(elevation C2.b in the diagrams)	of the building is let [	meters   above or   below the	HAG.		
E3. Attached garage (top of slab) is			ove or $\square$ below the HAC		
	<ul> <li>E4. Top of platform of machinery and/or equipment servicing the building is ☐ feet ☐ meters ☐ above or ☐ below the HAG.</li> <li>E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management</li> </ul>				
ordinance? ☐ Yes ☐ No	☐ Unknown. The local official must certify the	nis information in Section G.	on management		
OF OT ION					
	F - PROPERTY OWNER (OR OWNER'				
or Zone AO must sign here. <i>The state</i>	zed representative who completes Sections A, ements in Sections A, B, and E are correct to the	B, and E for Zone A (without a FEI) ne best of my knowledge	MA-issued or community-issued BFE)		
Property Owner's or Owner's Authorize		a a a a a a a a a a a a a a a a a a a			
Address	City	State	ZIP Code		
6.9		State	ZIF Code		
Signature	Date	Telepho	ne		
Comments					
	SECTION G - COMMUNITY INFO	RMATION (OPTIONAL)	Check here if attachments		
he local official who is authorized by la	w or ordinance to administer the community's f	loodplain management ordinance of	an complete Sections A. B. C (or F)		
nd G of this Elevation Certificate. Com	plete the applicable item(s) and sign below. C	heck the measurement used in Iten	ns G8. and G9.		
<ol> <li>The information in Section C v</li> <li>is authorized by law to certify a</li> </ol>	vas taken from other documentation that has belevation information. (Indicate the source and	een signed and sealed by a license	d surveyor, engineer, or architect who		
	d Section E for a building located in Zone A (w				
	ns G4G9.) is provided for community floodpla		Assued Bit E) of Zone Ao.		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Comp	Nignos/Ossupanov Jasus		
C II r GITIII TIGUI	Co. Date i enint issued	Go. Date Certificate of Comp	mance/Occupancy Issued		
7. This permit has been issued for:	☐ New Construction ☐ Substantial I	mprovement			
8. Elevation of as-built lowest floor (incl	uding basement) of the building:	_☐ feet ☐ meters (PR) Datum	9		
<ol><li>BFE or (in Zone AO) depth of flooding</li></ol>	g at the building site:	feet meters (PR) Datum			
Local Official's Name		Title Title			
Community Name		assertion Half			
•		elephone			
Signature		Date			
Comments					

Check here if attachments

## Building Photographs See Instructions for Item A6.

	For Insurance Company Use:
building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 118 South 18 <sup>th</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.



VIEW: FRONT