DE ARTMENT OF HOMELAND SECURITY ral Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

National Flood Insurance Program Important: Read the ins	tructions on pages 1-9.			
SECTION A - PROP	PERTY INFORMATION	For Insurance Company Use:		
Building Owner's Name ANTHONY AND SANDRA FORINO		Policy Number		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. 1107 BEACH TERRACE	Route and Box No.	Company NAIC Number		
City LONGPORT State NJ ZIP Code 08403	Townson			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 2 - LOT 2				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) R A5. Latitude/Longitude: Lat. 39.18151 Long. 074.32051 A6. Attach at least 2 photographs of the building if the Certificate is being used to A7. Building Diagram Number 8 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b d) Engineered flood openings? Yes No	Horizontal Datum o obtain flood insurance. A9. For a building with an atta a) Square footage of atta	ached garage: ached garage ached garage d openings in the attached garage adjacent grade openings in A9 b sq in		
SECTION B - FLOOD INSURANCE R	ATE MAP (FIRM) INFORMATIO	N		
B1. NFIP Community Name & Community Number B2. County Nam		B3. State		
LONGPORT 345302 ATLANTIC COU		NEW JERSEY		
345302\0001 B Date Effective/	RM Panel B8. Flood Revised Date Zone(s) (15/83 A-8	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10.00'		
311. Indicate elevation datum used for BFE in Item B9: ⊠ NGVD 1929 □ NAVD 1988 □ Other (Describe) 3 's the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? □ Yes ☑ No Designation Date □ CBRS □ OPA				
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)				
 Building elevations are based on:				
	Check the measure	ment used.		
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 and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG)	0.16 ☑ feet ☐ meters (Puer of the content of the cont	to Rico only) tto Rico only)		
SECTION D - SURVEYOR, ENGINEER,	OR ARCHITECT CERTIFICATION	ON		
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.				
	I longitude in Section A provided by a	1 101,4.95 55.41		
er's Name DANIEL J. PONZIO, SR. L	icense Number GS37603	(a) 16 (b) 10		
Title LAND SURVEYOR Company Name ARTHUR W. PONZIO CO. & ASSOCIATES, INC.				
Address 400 NORTH DOYER AVENUE City ATLANTIC CITY S	tate NJ ZIP Code 08401			
Signature Date 7/29/10 To	elephone 609-344-8194			

			Programme and the constitution of the constitu
IMPORTANT: In these spaces,	copy the corresponding information	from Section A.	For Insurance Company Use:
Building Street Address (including Apt 1107 BEACH TERRACE	t., Unit, Suite, and/or Bldg. No.) or P.O. Rou	te and Box No.	Policy Number
City LONGPORT State NJ ZIP Co.	de 08403		Company NAIC Number
SECTION	N D - SURVEYOR, ENGINEER, OR AI	RCHITECT CERTIFICA	TION (CONTINUED)
Copy both sides of this Elevation Cert	ificate for (1) community official, (2) insuran	ce agent/company, and (3) building owner.
Comments * AIR CONDITIONING	NIT= 17:01' DUCT WORK = 12.06'	PROJECT #29252	
July	Jan J	Date 7/29/10	
Signature			☐ Check here if attachments
SECTION E - BUILDING ELE	VATION INFORMATION SURVEY N	OT REQUIRED) FOR Z	ONE AO AND ZONE A (WITHOUT BFE)
and C. For Items E1-E4, use natural E1. Provide elevation information fo grade (HAG) and the lowest adj a) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including E2. For Building Diagrams 6-9 with (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is E4. Top of platform of machinery an E5. Zone AO only: If no flood depth ordinance? ☐ Yes ☐ No ☐	grade, if available. Check the measuremer r the following and check the appropriate be acent grade (LAG). I basement, crawlspace, or enclosure) is I basement, crawlspace, or enclosure) is permanent flood openings provided in Section of the building is feet meters Iddor equipment servicing the building is	at used. In Puerto Rico on oxes to show whether the end oxes to show or below the hand of this information in Section oxes to show or below the hand oxes this information in Section	meters above or below the highest adjacent meters above or below the HAG. meters above or below the LAG. pages 8-9 of Instructions), the next higher floor below the HAG. AG. meters above or below the HAG. meters above or below the HAG. meters floodplain management G.
			vithout a FEMA-issued or community-issued BFE)
or Zone AO must sign here. The state	ements in Sections A, B, and E are correct t	o the best of my knowledg	е.
Property Owner's or Owner's Authoriz	ed Representative's Name		
Auuress	Cit	у	State ZIP Code
Signature	Da	te	Telephone
Comments			9
	¥		Charlebons if attachments
	SECTION G - COMMUNITY IN	EODMATION (ODTION	☐ Check here if attachments
The local official who is authorized by la	w or ordinance to administer the communit	y's floodplain management	t ordinance can complete Sections A, B, C (or E),
and G of this Elevation Certificate. Com	plete the applicable item(s) and sign below	 Check the measurement 	t used in Items G8 and G9. I by a licensed surveyor, engineer, or architect who
is authorized by law to certify	elevation information. (Indicate the source	and date of the elevation of	data in the Comments area below.)
herd A Victors of the Control of the	ed Section E for a building located in Zone A		
	ms G4-G9) is provided for community flood		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certific	ate Of Compliance/Occupancy Issued
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (in G9. BFE or (in Zone AO) depth of floor G10. Community's design flood elevatio	ncluding basement) of the building: ding at the building site:	feet meters	s (PR) Datum s (PR) Datum s (PR) Datum
Local Official's Name		Title	
Community Name		Telephone	
Si: ature		Date	
Comments		5	
-e-constantifications			
			iii

Check here if attachments

Building Photographs See Instructions for Item A6.

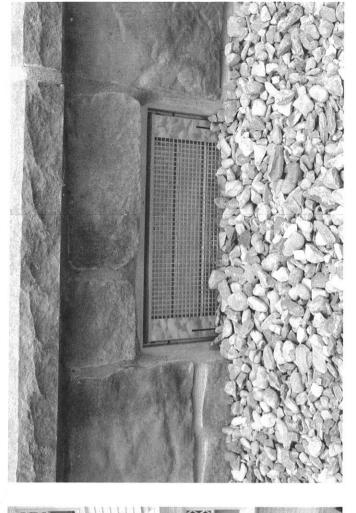
	For Insurance Company Use:
building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
City LONGPORT State NJ ZIP Code 08403	Company NAIC Number

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 on the reverse.

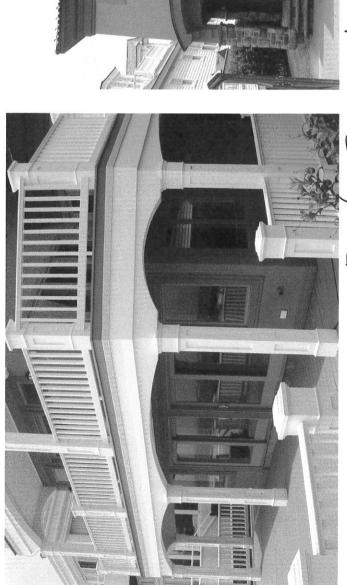


1107

29252









Longport