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OMB 3067-0077 Expires: Feb. 1987



FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

This form is to be used for: 1) New/Emergency Program construction in Special Flood Hazard Areas; 2) Pre-FIRM construction after

		t-FIRM cor	struction; and	d, 4) Other b	uildings rated as	Post-FIRI	M rules.			
Mark Nai					ADDRESS					
NAME			Λ							
PROPERTY LOC	~~~~				ort, N.J.					
	111011 (20	t and bloo	ii iidiiiboio di	10 4401000 11	available,					
I certify that the	nformatio	n on this co	ertificate repr	esents my be	est efforts to inter	pret the d	lata available	1 understa	nd that ar	ny false
SECTION I ELIC	punishab	le by fine o	or imprisonme	ent under 18	U.S. code, Sectio	n 1001.				
			Archit	ect, or Surve	eyor)					J
COMMUNITY NO. P.	ANEL NO.	SUFFIX E	DATE OF FIRM	FIRM ZONE	DATE OF CONSTR.		FLOOD ELEV. one, use deptn)	BUILDING IS	□ New/Em	iergency
345302	0001	В	9/15/83	A-8		10	.00	☐ Pre-FIRM Reg. ☐ Post-FIRM Reg.		M Reg.
YES NO It is in	ince. The i	certifier ma t, NGVD. F	ling described by rely on con	d above will nmunity reco	be constructed in ords. The lowest fi illding at this elev	complian	nce with the outling baseme	ent) will be	at an elev	ation
					in compliance wit			od plain ma	ınagemen	t
- Ordine					tion or other reas the community.	onable m	eans:			
YES NO The m	obile hom	e located a	it the address	described a	bove has been tie	ed down (anchored) in	compliance	with the	
□ □ comm	unity's floo	od plain ma	anagement or	dinance, or	in compliance wit	h the NFI	P Specification	ons.		
MOBILE HOME MAKE MODE				YR. OF MANUFACTURE SERIA			SERIAL N	NO. DIMENSIONS X		
(Community Pern	nit Official	or Registe	red Professio	nal Engineer	. Architect, or Su	rveyor)				
NAME Arthu	r W. P	onzio,	Jr.		ADDRESS 40	0 Nort	h Dover	Avenue	3	
TITLE Land	Surve	yor	CITY	Atlant	ic City	STA	TE N.	J.	7IP	0840
/	1.++		N O	_	h 10 h			244 0404		
SIGNATURE (Min	uu	17600	w.	DATE 4/24		HOIVE	344-8194		
SECTION II ELI	EVATION	CERTIFIC	ATION (Certi Archi	fied by a Loc tect, or Surv	cal Community Pe eyor.)	ermit Offic	ial or a Regis	tered Profes	ssional En	gineer,
FIRM ZONE A1-A	at ar	elevation	of 10.42 7.45±	feet, NGV	location describe D (mean sea leve	ed above h	nas the lowes e average gra	floory(ngot) ade at the b	diog kope uilding si	te is at
FIRM ZONES V,	V1-V30: I	certify tha	t the building tion of	at the prope	NGVD (mean sea	ibed abov level), an	e has the bott nd the averag	om of the lo	west flooi the buildi	r beam ng site
FIRM ZONES A, A					nat the building at t ghest adjacent gra					lowest NGVD.
FIRM ZONE AO: I feet, NGVD. The e	certify that	t the build	ing at the pro	perty location	on described abov			elevation o		
SECTION III FLO	OODPROC	FING CEI	RTIFICATION	(Certification	on by a Registere	d Professi	ional Enginee	er or Archite	ect)	
certify to the be walls substantially and hydrodynamic forces associated YES C NO (impermeation in impermeation i	able to the d effects of ase flood.	passage of vi buoyancy th	water and st at would be	ructural compone caused by the flo	ents havin ood depth	g the capabi is, pressures	lity of resis velocities, in	ting hydr mpact and	ostatic
	(Hun cur u	nan interve	ntion means t sures are take	hat water wi	of floodproofing be ill enter the building e flood to prevent	ng when f	loods up to t	he base floo	od level od	
YES IND E if the answer to be completed and cer	th questio	ns is YES,	be occupied the floodprodete both the e	fing cannot	be credited for ra	iting purpo ertificates.	oses and the	actual lowe	st floor m	ust be
FIRM ZONES A, A	1,-A30, V1-	-V30, AO ai	nd AH;		Certified FI	loodproof	ed Elevation i	s	feet, (N	GVD).
THIS CERTIFICAT		PX SECT	ION II	BOTH SECT	TIONS II AND III ((Check O	ne)			
CERTIFIER'S NAM	E			COMPANY I	NAME		LIC	CENSE NO.	(or Affix S	Seal)
Arthur W.	Ponzio	, Jr.		rthur W	. Ponzio Co	o. & A	SSOC.	28314 ZIP		
Land Surv	eyor	550 T 550 TV 48 500 440	400	North	Dover Aven	nue		084	101	
SIGNATURE	\hat{O}		DATE	CITY	/*********************************	;	STATE	PHO		
thenky	myo		4/87		ic City		N.J.		44-819	
The insu					f the completed for olicyholder and t					on,