U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance 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 PAT AND KELLY AGNELLINI	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 18 SOUTH 31 ST AVENUE	Company NAIC Number
City LONGPORT State NJ ZIP Code 08403	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 61 - LOT 8	
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 2 * A8. For a building with a crawl space or enclosure(s), provide a) Square footage of crawl space or enclosure(s) NA sq ft a) Square footage of attach	ched garage <u>NA</u> sq ft openings in the attached garage ove adjacent grade <u>0</u> openings in A9.b <u>0</u> sq in
	B3. State
	NEW JERSEY
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/Revised Date 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) 10.00'
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe) 11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) 12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date ☐ CBRS ☐ OPA	□Yes ⊠No
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIR	ED)
 Building elevations are based on: Construction Drawings* Building Under 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/AF below according to the building diagram specified in Item A7. Benchmark Utilized RM-2 Vertical Datum NGVD 1929 Conversion/Comments	☑ Finished Construction I, AR/AO. Complete Items C2.a-g
Check the measurem	nent used.
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) 5.13 feet	o Rico only)
	A B
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. 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.	on Spain
Certifier's Name DANIEL J. PONZIO, SD. License Number GS37603	(2005년 - 12년 - 1
Company Name ARTHUR W. PONZIO CO. & ASSOCIATES, INC.	
Address 400 NORALPOOVER AVENUE City ATLANTIC CITY State NJ ZIP Code 08401	apart and another land
Date 5/15/09 Telephone 609-344-8194	

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.	For Insurance Company Use:
Building Street Address (including Apt., Unit. Suite. and/or Bldg. No.) or P.O. Route and Box No.	
18 SOUTH 31 ST AVENUE	Policy Number
City LONGPORT State NJ ZIP Code 08403	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CC	NATINIED
	The state of the s
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building of Comments * DIAGRAM #2 - BASEMENT ** AIR CONDITIONING UNIT PROJECT #299	
Sideates 5/15/09	
	☐ Check here if attachments
SECTION E-BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO	AND ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter me E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawl space, or enclosure) is feet meters b) Top of bottom floor (including basement, crawl space, or enclosure) is feet meters b) Top of bottom floor (including basement, crawl space, or enclosure) is feet meters above or below the (elevation C2.b in the diagrams) of the building is feet meters above or below the HAG. E3. Attached garage (top of slab) is feet meters above or below the HAG. E4. Top of platform of machinery and/or equipment servicing the building is feet meters ab E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the ordinance? Yes No Unknown. The local official must certify this information in Section G.	above or below the highest adjacent above or □ below the HAG. above or □ below the LAG. Instructions), the next higher floor HAG. above or □ below the HAG.
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTI	FICATION
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FE	
or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.	
Property Owner's or Owner's Authorized Representative's Name	
Address City State	ZIP Code
Signature Date Telepho	one
Comments	
	Check here if attachments
SECTION G - COMMUNITY INFORMATION (OPTIONAL) The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance of the local official who is authorized by law or ordinance to administer the community's floodplain management ordinance of the local official who is authorized by law or ordinance of the local official who is authorized by law or ordinance of the local official who is authorized by law or ordinance of the local official who is authorized by law or ordinance of the local official who is authorized by law or ordinance of the local official who is authorized by law or ordinance of the local official who is authorized by law or ordinance of the local official who is authorized by law or ordinance of the local official who is authorized by law or ordinance of the local official who is authorized by law or ordinance of the local official who is authorized by law or ordinance of the local official who is authorized by law or ordinance of the local official who is a community of the local o	can complete Sections A. B. C. (or E)
and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Item	ms G8. and G9.
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensi is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the C	ed surveyor, engineer, or architect who Comments area below.)
G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community)	ty-issued BFE) or Zone AO.
33. The following information (items G4G9.) is provided for community floodplain management purposes.	
G4. Permit Number G5. Date Permit Issued G6. Date Certificate Of Com	pliance/Occupancy Issued
G7. This permit has been issued for: New Construction Substantial Improvement	
G8. Elevation of as-built lowest floor (including basement) of the building: ☐ feet ☐ meters (PR) Datum	
39. BFE or (in Zone AO) depth of flooding at the building site:	
Local Official's Name Title	
Community Name Telephone	
Signature Date	
Comments	

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. 18 SOUTH 31 ST 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







