

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

609-344-8194

important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: Policy Number **BUILDING OWNER'S NAME** JOE POPPER Company NAIC Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 1403 BEACH TERRACE ZIP CODE STATE CITY LONGPORT N.J PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 8 LOT 4 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): (##° - ##' - ##.##" or ##.####") □ USGS Quad Map Other: □ NAD 1927 ☑ NAD 1983 SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME B3. STATE** ATLANTIC LONGPORT 345302 B9. BASE FLOOD ELEVATION(S) **B4. MAP AND PANEL B7. FIRM PANEL** B8. FLOOD ZONE(S) (Zone AO, use depth of flooding) EFFECTIVE/REVISED DATE **B6. FIRM INDEX DATE B5. SUFFIX** NUMBER 8/12/70 8/15/83 10.00 0001 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. **⊠** FIRM ☐ FIS Profile Community Determined Other (Describe): ☐ NAVD 1988 ☐ Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes 🔀 No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on:

Construction Drawings* ☐ Building Under Construction* *A new Elevation Certificate will be required when construction of the building is complete. C2. Building Diagram Number 8 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.) C3. 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided on the Comments area of Section D or Section G, as appropriate, to document the datum conversion. Datum NGVD 29 Conversion/Comments N/A Elevation reference mark used ** Does the elevation reference mark used appear on the FIRM? Yes No o a) Top of bottom floor (including basement or enclosure) 9. 92 ft.(m) *10.40ft.(m) o b) Top of next higher floor o c) Bottom of lowest horizontal structural member (V zones only) N/A . ft.(m) 10. 00 ft.(m) o d) Attached garage (top of slab) o e) Lowest elevation of machinery and/or equipment License Number, Signature, 12.00 ft.(m) servicing the building (Describe in a Comments area) o f) Lowest adjacent (finished) grade (LAG) 9.75 ft.(m) o g) Highest adjacent (finished) grade (HAG) 9. 75 ft.(m) o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 10 o i) Total area of all permanent openings (flood vents) in C3.h 1280 sq. in. (sq. cm) 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 in Sections A, B, and C 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. LICENSE NUMBER 29314 CERTIFIER'S NAME ARTHUR W. PONZIO, JR. COMPANY NAME ARTHUR W. PONZIO CO. & ASSOCIATES, INC. TITLE LAND SURVEYOR ZIP CODE CITY STATE **ADDRESS** 400 NORTH DØVER AVENUE ATLANTIC CITY 08401 **TELEPHONE** DATE SIGNATURE

8/20/04

IMPORTANT: In these spaces, cop	y the corresponding information	from Section A.			surance Company Use:
BUILDING STREET ADDRESS (Including Apt., 1403 BEACH TERRACE	Unit, Suite, and/or Bldg. No.) OR P.O. ROUT	E AND BOX NO.		Policy	Number
CITY LONGPORT		STATE NJ	ZIP CODE	Comp	any NAIC Number
	ION D - SURVEYOR, ENGINEER,	OR ARCHITECT CER	TIFICATION (CONTIN	JED)	
Copy both sides of this Elevation Certificate	e for (1) community official, (2) insurance	agent/company, and (3) b	ouilding owner.		
COMMENTS					
US ARMY CORP ELEVATION DIS	SK				
** RM 1 THRU RM 6					
*LOWFLOOR ELEVATION - 10.40	NEXT HIGHER FLOOR ELEVATION	ON = 12.35'			
PROJECT # 25367					heck here if attachmen
	LEVATION INFORMATION (SUR	VEY NOT REQUIRED)	FOR ZONE AO AND	ONE A (WI	THOUT BFE)
For Zone AO and Zone A (without BFE), con Section C must be completed.	nplete Items E1 through E4. If the Eleva	tion Certificate is intended	for use as supporting infor	mation for a LO	OMA or LOMR-F,
E1. Building Diagram Number _(Select the b	ouilding diagram most similar to the build	ing for which this certificate	e is being completed – see	pages 6 and	If no diagram accurate
represents the building, provide a sketch				\	t - 11 t da - // la -
E2. The top of the bottom floor (including bas	ement or enclosure) of the building is	ft.(m)in.(cm) abo	ve or <u>l</u> below (check o	ne) the highes	t adjacent grade. (Use
natural grade, if available). 3. For Building Diagrams 6-8 with openings	(see page 7) the next higher floor or ele	evated floor (elevation b) o	f the building is ft.(m)	in.(cm) abov	ve the highest adjacent
grade. Complete items C3.h and C3.i or		valou noor (oronalorra) o		()	,
4. The top of the platform of machinery and	or equipment servicing the building is	ft.(m)in.(cm) abo	ve or 🔲 below (check o	ne) the highes	t adjacent grade. (Use
natural grade, if available).					
55. For Zone AO only: If no flood depth num			ce with the community's 110	odplain mana	gement ordinance?
YesNoUnknown. The F	ocal official must certify this information i	n Section G.			
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