FEDERAL EMERSENCY MANAGEMENT AGENCY NATIONAL FLCOD INSURANCE PROGRAM

**ELEVATION CERTIFICATE** 

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

Important: Read the instructions on pages 1 - 7.

	terit etk deus gegentet en er en	SECTION A	- PROPERTY OWNER INFORM	ATION	For Insurance Company Use:	
BUILDING OWNER'S N BRIDGET MC LAU					Policy Number	
	DRESS (Including	Apt., Unit, Suite, and/or	Bldg. No.) OR P.O. ROUTE AND	BOX NO.	Company NAIC Number	
CITY		4	STATE	ZIP CO	DE	
LONGPORT PROPERTY DESCRIPT	ION (Lot and Bloc	x Numbers, Tax Parcel N	NJ Number, Legal Description, etc.)			
					9	
BUILDING USE (e.g., RE RESIDENTIAL	esidential, Non-res	idential, Addition, Access	ory, etc. Use a Comments area, it	necessary.)		
LATITUDE/LONGITUDE		HORIZON	TAL DATUM:	SOURCE: GPS (Type	e);	
( ##° - ##' - ##.##" or #	#.####*)	☐ NAD 1927	☑ NAD 1983	🖾 USGS Qu		
	(	SECTION B - FLOOD IN	ISURANCE RATE MAP (FIRM)	NFORMATION		
	B1. NFIP COMMUNITY NAME & COMMUNITY NUMBE				B3. STATE	
LONGPORT 345302		A	TANTIC	NJ		
B4. MAP AND PANEL			B7. FIRM PANEL	T	B9. BASE FLOOD ELEVATION(S)	
NUMBER 0001	B5. SUFFIX B	B6. FIRM INDEX DATE	EFFECTIVE/REVISED DATE 8/15/83	B8. FLOOD ZONE(S) A-8	(Zone AO, use depth of flooding) 10.00'	
B10. Indicate the source of the	Base Flood Elevati	ion (BFE) data or base floo	d depth entered in B9.		93/109/5/20	
	⊠ FIRM	☐ Community Determined				
B11. Indicate the elevation dat				Other (Describe):		
312. Is the building located in a			rea or Otherwise Protected Area (OPA		esignation Date	
	SEC	TION C - BUILDING EL	EVATION INFORMATION (SUR	VEY REQUIRED)		
<ol><li>Building elevations are bas</li></ol>			Building Under Construction*	Finished Construction		
*A new Elevation Certificat	e will be required w	hen construction of the build	ding is complete.			
			ne building for which this certificate is t	eina completed - see nages	6 and 7. If no diagram	
accurately represents the I				on g completed accorpaged	ound it in no diagram	
			FE), AR, AR/A, AR/AE, AR/A1-A30, A	DIALI ADIAO		
Complete Items C3 a i bo	ow according to the	building disgram specified	in Item C2. State the datum used. If the			
Section B convert the date	ow according to the	o DEE Chau fold massus	ements and datum conversion calcula	ne datum is different from the	e datum used for the BFE in	
Section D or Section G as	annomista to doc	ument the datum conversion	ana is and datum conversion calcula	auon. Use ine space provide	d or the Comments area of	
Datum NGVD 29 Convers						
			appear on the FIRM? ☐ Yes ☒	No.		
o a) Top of bottom floor (in					7 1	
o b) Top of next higher floor		i encoure)	6. 61 ft (m)	Seal	1	
			<u>9</u> . <u>86</u> ft.(m)	. 0	1 ~~	
o c) Bottom of lowest horiz		nber (V zones only)	ft.(m)	License Number, Embosse Signature, and Dae		
o d) Attached garage (top			ft.(m)	g g	LAP A	
o e) Lowest elevation of ma		1.0134034034034040		2 g	111	
servicing the building		ments area)	ft.(m)	å å å	10 0	
o f) Lowest adjacent (finish	Market Committee		<u>6</u> . <u>51</u> ft.(m)	Nu Nu Nu Nu	L V	
o g) Highest adjacent (finish			<u>6</u> . <u>51</u> ft.(m)	as,		
o h) No. of permanent oper	nings (flood vents) w	rithin 1 ft. above adjacent gr	ade <u>2</u>	i c	VA.	
o i) Total area of all perman	ent openings (flood	vents) in C3.h 256 sq. in. (s	sq. cm)			
	SEC	TION D - SURVEYOR.	ENGINEER, OR ARCHITECT CE	RTIFICATION		
his certification is to be sign			er, or architect authorized by law to		ion	
certify that the information in	in Sections A. B. a	and C on this certificate re	epresents my best efforts to interpr	et the data available	1011.	
understand that any false s	tatement may be i	ounishable by fine or imp	risonment under 18 U.S. Code, Se	ection 1001		
ERT'F'ER'S NAME DANIEL	J. PONZIO, SR.	**		ICENSE NUMBER 37603		
TLE LAND SUPPEYOR		<del>)</del>	CCMPANY NAME A	RTHUR W. PONZIO CO. 8	ASSOCIATES INC	
	1		John Filter Ville P			
DRESS			CITY	STATE	ZIP COCE	
ONCRIA DOVER AVENUE	N		ATLANTIC CITY	NJ	08401	
GNATURE		1	CATE	TELEPHONE		
K/N-	Jan	$\sim$	4/7/03	609-344-8194	1	
~	1	. 1				

3301 PACIFIC AVENUE	the aiding Apt. Unante, aixfort p fint.t.r O. Re-UTL AN	U BOX NO		Policy Hamber
CITY LONGPORT	NJ		ZIP CODE 08403	Company NAIC Number
	SECTION D - SURVEYOR, ENGINEER, OR	ARCHITECT CER	TIFICATION (CONTINUE	ED)
Copy both sides of this Elevati	ion Certificate for (1) community official, (2) insurance ager	nV∞mpany, and (3) !	building owner.	
COMMENTS US ARMY CORP ELE	VATION DICK			
** RM 1 THRU RM 6	VATION DISK			
SECTION E - BI	UILDING ELEVATION INFORMATION (SURVEY)	NOT DECUIDED	FOR ZONE AO AND ZO	Check here if attachments
For Zone AO and Zone A (without	ut BFE), complete Items E1 through E4. If the Elevation C	'artificate is intended	for your an authorities in factor	NE A (WITHOUT BFE)
Section C must be completed.	A ST E/, COMPLETE HENS ET HITOUGH E4. IT THE ELEVATION C	eruncate is interided	ior use as supporting informa	lion for a LOMA of LOMK+,
	(Select the building diagram most similar to the building for ride a sketch or photograph.)	r which this certificate	is being completed – see pa	ges 6 and 7. If no diagram accurately
	ncluding basement or enclosure) of the building isft.(n	n) _in.(cm) [] abo	ve or Delow (check one)	the highest adjacent grade. (Use
	ith openings (see page 7), the next higher floor or elevated	I floor (elevation b) of	the building isft.(m)ir	n.(cm) above the highest adjacent
grade. Complete items C3.h				*
±4. The top of the platform of ma natural grade, if available).	chinery and/or equipment servicing the building is ft.(n	n)in.(cm) [_] abo	ve or below (check one)	the highest adjacent grade. (Use
	d depth number is available, is the top of the bottom floor el	levated in accordanc	e with the community's floods	olain management ordinance?
Yes No Unkr	nown. The local official must certify this information in Sect	tion G.	e morale continuity 3 noods	nair management ordinaries:
	SECTION F - PROPERTY OWNER (OR OWN	THE RESERVE AND PERSONS ASSESSED.	A PROPERTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLU	
	authorized rep <mark>resentative who completes Sections A, B, C</mark> sign here. The statements in Sections A, B, C, and E are o			hout a FEMA-issued or community-
	WNER'S AUTHORIZED REPRESENTATIVE'S NAME			
ADDRESS	·	CITY	STATE	E ZIP CODE
SIGNATURE		DATE	TELEF	PHONE
COMMENTS				
	P			
	8			Check here if attachments
	SECTION G - COMMUNITY IN	IFORMATION (OF	PTIONAL)	Check here is attachments
he local official who is authorized	by law or ordinance to administer the community's floodpl			ns A, B, C (or E), and G of this Elevatio
ertificate. Complete the applicab	vle item(s) and sign below.			
	C was taken from other documentation that has been sig			eer, or architect who is authorized by st
	ation information. (Indicate the source and date of the elev pleted Section E for a building located in Zone A (without a			. 40
	(Items G4-G9) is provided for community floodplain manag		ninanity-issued BrE) of Zone	AU.
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		DATE CERTIFICATE OF COMPI	TANCE (COCHDANCY ICCHED
OY. 7 ENWIT NOWINGER	GS. DATE LENVIT ISSUED	G0. L	DATE CERTIFICATE OF COMP	LANCE/OCCUPANCT ISSUED
	or: New Construction Substantial Improvement			
	or (including basement) of the building is:		ft.(m)	Datum:
9. BFE or (in Zone AO) depth of I	looding at the building site is:		ft.(m)	Dalum:
LOCAL OFFICIAL'S NAME		TITLE		
COMMUNITY NAME		TELEPHO	NE	
GIGNATURE	-	DATE		
COMMENTS				
	. •			Chook have if all a larger
	· · · · · · · · · · · · · · · · · · ·			Check here if attachments