### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

# **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE			
A1. Building Owner's Name GEORGE THOMAS	Policy Number:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2921 LONGPORT DRIVE	Company NAIC Number:			
City State LONGPORT New Jersey	ZIP Code 08403			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 55 LOT 2				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL				
A5. Latitude/Longitude: Lat. 39° 32' 03" Long. 74° 52' 46" Horizontal Datu	m: NAD 1927 X NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insu	rance,			
A7. Building Diagram Number7				
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s)1,577 sq ft				
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot abov	re adjacent grade8			
c) Total net area of flood openings in A8.b1,600 sq in				
d) Engineered flood openings? 🗵 Yes 🗌 No				
A9. For a building with an attached garage:	.2.			
a) Square footage of attached garage o sq ft				
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent	grade 0			
c) Total net area of flood openings in A9.b 0 sq in				
d) Engineered flood openings? Yes X No				
OFOTION D. EL COD INICUDANCE DATE MAD (FIDM) INFODM	ATION			
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORM  B1. NFIP Community Name & Community Number B2. County Name	B3, State			
LONGPORT 345302 ATLANTIC	New Jersey			
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(	s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)			
34001C0434 F 08/28/2018 08/28/2018 AE	9.00'			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:				
☐ FIS Profile ☑ FIRM ☐ Community Determined ☐ Other/Source:				
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:				
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🗵 No				
Designation Date: CBRS DPA				

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City State ZIP C LONGPORT New Jersey 08403	Company NAIC Number			
SECTION C - BUILDING ELEVATION INFORMATI	ON (SURVEY RI	EQUIRED)		
*A new Elevation Certificate will be required when construction of the building C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BF	E), AR, AR/A, AR/	'AE, AR/A1A30, AR/AH, AR/AO.		
Complete Items C2.a–h below according to the building diagram specified in Benchmark Utilized: RM-1 Vertical Datum: N	NAVD 1988	o Rico only, enter meters.		
Indicate elevation datum used for the elevations in items a) through h) below  NGVD 1929 X NAVD 1988 Cher/Source:				
Datum used for building elevations must be the same as that used for the BF	E.	Check the measurement used.		
a) Top of bottom floor (including basement, crawispace, or enclosure floor)	<u>5</u> . <u>19</u>	x feet meters		
b) Top of the next higher floor	15, 0	🔀 feet 🔲 meters		
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u> .	X feet		
d) Attached garage (top of slab)	<u>5</u> , <u>19</u>	X feet  meters		
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>11</u> . <u>59</u>	X feet  meters		
f) Lowest adjacent (finished) grade next to building (LAG)	<u>5</u> . <u>14</u>	X feet meters		
g) Highest adjacent (finished) grade next to building (HAG)	5, 30	X feet meters		
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u> </u>	X feet meters		
SECTION D – SURVEYOR, ENGINEER, OR ARC	HITECT CERTIFI	CATION		
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.				
Were latitude and longitude in Section A provided by a licensed land surveyor?	⊠Yes □ No			
Certifier's Name License Number DANIEL J. PONZIO, SR. GS37603				
Title PROFESSIONAL LAND SURVEYOR				
Company Name ARTHUR W. PONZIO CO, & ASSOC, INC.	Place Seal			
Address 400 NORTH DOVER AVENUE		Here		
	ZIP Code 08401			
	Telephone (609) 344-8194			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.				
Comments (including type of equipment and location, per C2(e), if applicable)				
PROJECT #34327 SMART VENT MODEL 1540-510 ALL DUCT WORK ABOVE BASE FLOOD ELEVAITON				
HEATING UNIT: 11,59' AC UNIT: 14,74'				

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MPORTANT: In these spaces, copy the corresponding Information from Section A. FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  Policy Nu 2921 LONGPORT DRIVE	Imber;				
City State ZIP Code Company LONGPORT New Jersey 08403	NAIC Number				
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRE FOR ZONE AO AND ZONE A (WITHOUT BFE)	ED)				
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B,and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.					
<ul><li>E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevathe highest adjacent grade (HAG) and the lowest adjacent grade (LAG).</li><li>a) Top of bottom floor (including basement,</li></ul>	tion is above or below				
crawispace, or enclosure) is feet _ meters _ about 5 to p of bottom floor (including basement,	ove or Delow the HAG,				
crawlspace, or enclosure) is feet meters about E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 1).	ove or below the LAG.				
the next higher floor (elevation C2.b in	ove or below the HAG.				
——————————————————————————————————————	ove or Delow the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is feet meters about the building is feet feet meters about the building is feet	ove orbelow the HAG.				
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance w floodplain management ordinance?   Yes No Unknown. The local official must certify this is	vith the community's information in Section G.				
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICAT	ION				
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (with community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the	out a FEMA-issued or best of my knowledge.				
Property Owner or Owner's Authorized Representative's Name					
Address City State	ZIP Code				
Signature Date Telephone					
Comments					

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Building Street Address (including Apt., Unit, St 2921 LONGPORT DRIVE	uite, and/or Bldg. No.) o		o. Policy Number:
City	State	ZIP Code	Company NAIC Number
LONGPORT	New Jersey	08403	
SECTIO	ON G - COMMUNITY IN	NFORMATION (OPTION)	AL)
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	n Certificate. Complete th	he community's floodplair he applicable item(s) and	n management ordinance can complete sign below. Check the measurement
G1. The information in Section C was taken engineer, or architect who is authorized that in the Comments area below.)	en from other document ed by law to certify elev	tation that has been signa vation information. (Indica	ed and sealed by a licensed surveyor, te the source and date of the elevation
G2. A community official completed Section Zone AO.	on E for a building locat	ted in Zone A (without a F	FEMA-issued or community-issued BFE)
G3. The following information (Items G4-	G10) is provided for cor	mmunity floodplain mana	gement purposes.
G4. Permit Number	G5. Date Permit Issue	ed G	66. Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction	Substantial Improvement	t
G8. Elevation of as-built lowest floor (including of the building:	j basement)		feet meters Datum
G9. BFE or (in Zone AO) depth of flooding at t	he building site:		feet meters Datum
G10. Community's design flood elevation:			feet meters Datum
Local Official's Name		Title	
Community Name		Telephone	
Signature	***************************************	Date	
Comments (including type of equipment and loc	ation, per C2(e), if appli	icable)	
24.1.1.1.2.1.2.1.1.2.1.1.2.1.1.1.1.1.1.1	anout has awfall a when	louble,	
		·	
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			Check here if attachments.

#### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6,

OMB No. 1660-0008

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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. 2921 LONGPORT DRIVE  City State LONGPORT New Jersey 08403  FOR INSURANCE COMPANY USE Policy Number:  Company NAIC Number			<u> </u>	
2921 LONGPORT DRIVE  City State ZIP Code Company NAIC Number	IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Company MAIC Name		Apt., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
	l '			Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

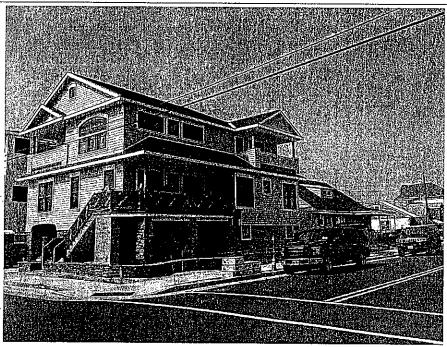


Photo One

Photo One Caption FRONT VIEW

**ELEVATION CERTIFICATE** 

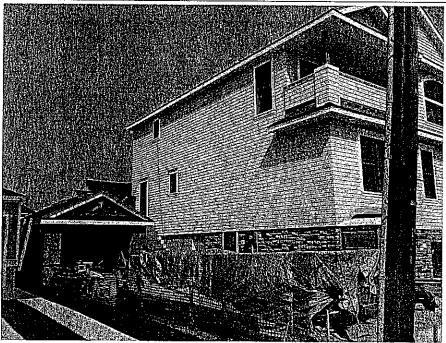


Photo Two

Photo Two Caption REAR VIEW

#### **BUILDING PHOTOGRAPHS**

Continuation Page

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If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

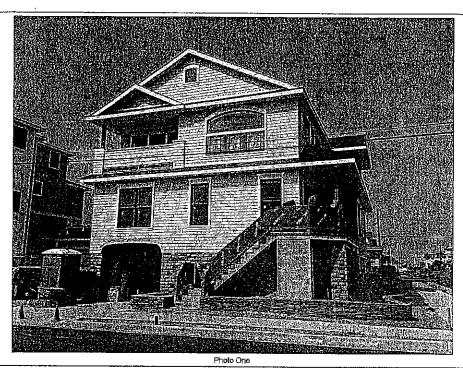


Photo One Caption LEFT SIDE VIEW

**ELEVATION CERTIFICATE** 

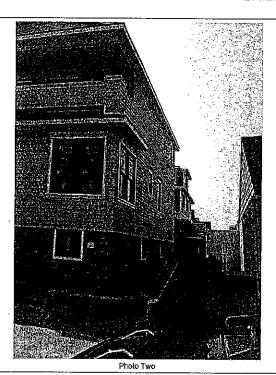


Photo Two Caption RIGHT SIDE VIEW