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APR 4 - 2002

BOROUGH OF LONGPORT
CONSTRUCTION OFFICE

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME JAY & ELAINE SCHWARTZ		For Insurance Company Use:	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 105 SOUTH TWENTY-SIXTH AVENUE		Policy Number	
CITY LONGPORT		STATE NJ	ZIP CODE 08403
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 27 LOT 3			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.###" or ###.#####°)		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER LONGPORT 345302		B2. COUNTY NAME ATLANTIC		B3. STATE NJ	
B4. MAP AND PANEL NUMBER 0001	B5. SUFFIX B	B6. FIRM INDEX DATE 8/15/83	B7. FIRM PANEL EFFECTIVE/REVISED DATE 8/15/83	B8. FLOOD ZONE(S) A-8	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 10.00'

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

FIS Profile FIRM Community Determined Other (Describe): _____

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): _____

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* Finished 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 C3a-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 or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum NGDV 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) 7. 70 ft.(m)
- o b) Top of next higher floor 12. 10 ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) _____ ft.(m)
- o d) Attached garage (top of slab) 8. 90 ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building 12. 00 ft.(m)
- o f) Lowest adjacent grade (LAG) 8. 80 ft.(m)
- o g) Highest adjacent grade (HAG) 8. 80 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 16
- o i) Total area of all permanent openings (flood vents) in C3h 2048 sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

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.

CERTIFIER'S NAME ARTHUR W. PONZIO, JR.		LICENSE NUMBER 28314	
TITLE LAND SURVEYOR	COMPANY NAME ARTHUR W. PONZIO CO. & ASSOCIATES		
ADDRESS 400 NORTH POWER AVENUE	CITY ATLANTIC CITY	STATE NJ	ZIP CODE 08401
SIGNATURE	DATE 4/2/02	TELEPHONE 609-344-8194	

Check here if attachments

COMMENTS

SIGNATURE

DATE

COMMUNITY NAME

TELEPHONE

LOCAL OFFICIAL'S NAME

TITLE

G7. This permit has been issued for: New Construction Substantial Improvement
G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m)
Datum: _____ Datum: _____
G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m)
Datum: _____ Datum: _____

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

Check here if attachments

COMMENTS

SIGNATURE

DATE

TELEPHONE

ADDRESS

CITY

STATE

ZIP CODE

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.
E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is the highest adjacent grade.
E2. The top of the bottom floor (including basement or enclosure) of the building is _____ ft.(m) _____ in.(cm) above or below (check one) the highest adjacent grade.
E1. Building Diagram Number _____ (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.)
Information for a LOMA or LOMR-F, Section C must be completed.
For Zone AO and Zone A (without BFE), complete items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

Check here if attachments

* AIR CONDITIONING UNIT

** RM 1 THRU RM 6

COMMENTS US ARMY CORP ELEVATION DISK

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

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

LONGPORT CITY	STATE NJ	ZIP CODE 08403	Company NAIC Number
105 SOUTH TWENTY-SIXTH AVENUE	OR P.O. ROUTE AND BOX NO.	Policy Number	For Insurance Company Use:

IMPORTANT: In these spaces, copy the corresponding information from Section A.