

35/2

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 GALLAGHER BROTHERS, LLC	For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 109 SOUTH 28 TH AVENUE	Company NAIC Number
CITY LONGPORT	STATE NJ
ZIP CODE 08403	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 35 LOT 2	
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.) RESIDENTIAL	
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.##" or ##.#####)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

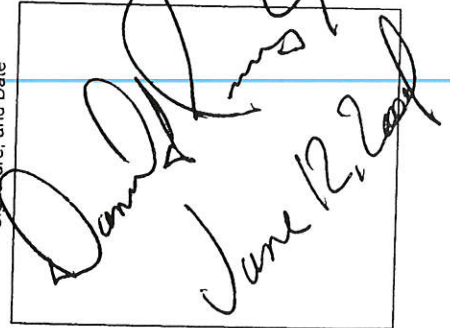
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 345302	B2. COUNTY NAME ATLANTIC	B3. STATE NJ
B4. MAP AND PANEL NUMBER 0001	B5. SUFFIX B	B6. FIRM INDEX DATE 8/15/83
B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) A-8	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 10.00'

- 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)

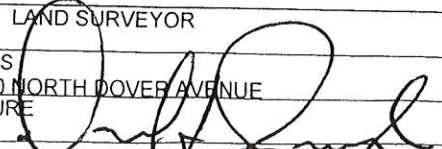
- C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.
- .. Building Diagram Number 8 (Select the building diagram most similar to the building for 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 _____ Conversion/Comments _____
- 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) 9.38 ft. (m)
 - o b) Top of next higher floor 11.36 ft. (m)
 - o c) Bottom of lowest horizontal structural member (V zones only) _____ ft. (m)
 - o d) Attached garage (top of slab) 9.21 ft. (m)
 - o e) Lowest elevation of machinery and/or equipment servicing the building _____ ft. (m)
 - o f) Lowest adjacent grade (LAG) 9.11 ft. (m)
 - o g) Highest adjacent grade (HAG) 9.33 ft. (m)
 - o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 20
 - o i) Total area of all permanent openings (flood vents) in C3h 2560 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 DANIEL J. PONZIO, SR.	LICENSE NUMBER 37603
TITLE LAND SURVEYOR	COMPANY NAME ARTHUR W. PONZIO CO. & ASSOCIATES
ADDRESS 400 NORTH DOVER AVENUE	CITY ATLANTIC CITY
SIGNATURE 	STATE NJ
	ZIP CODE 08401
	DATE 6/12/01
	TELEPHONE 609-344-8194