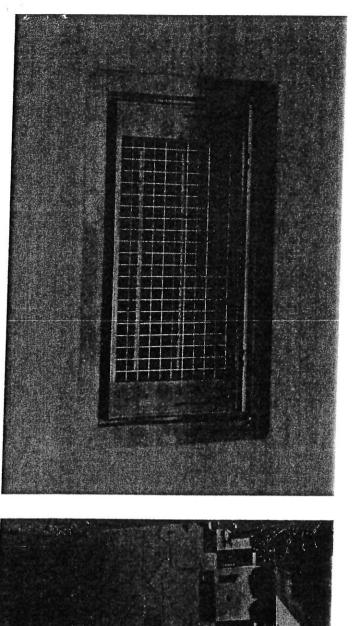
U.S. DEPARTMENT OF HOMELAND SECURITY **ELEVATION CERTIFICATE** OMB No. 1660-0008 Federal Emergency Management Agency Expires February 28, 2009 National Flood Insurance Program Important: Read the instructions on pages 1-8. SECTION A - PROPERTY INFORMATION For Insurance Company Use: A1. Building Owner's Name SAMANDA PROPERTIES Policy Number Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number 2505 OBERON AVENUE City LONGPORT State NJ ZIP Code 08403 Merry A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 26 - LOT 2 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 39 18' 47.3" Long. 074 31' 36.2" Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 8 A8. For a building with a crawl space or enclosure(s), provide A9. For a building with an attached garage, provide: a) Square footage of crawl space or enclosure(s) 1012 sq ft a) Square footage of attached garage sq ft No. of permanent flood openings in the crawl space or No. of permanent flood openings in the attached garage enclosure(s) walls within 1.0 foot above adjacent grade 6 walls within 1.0 foot above adjacent grade 1 Total net area of flood openings in A8.b 1200 Total net area of flood openings in A9.b sq in SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number **B2. County Name** B3. State LONGPORT 345302 ATLANTIC COUNTY **NEW JERSEY** B4. Map/Panel Number B5. Suffix B6. FIRM Index **B7. FIRM Panel** B8. Flood B9. Base Flood Elevation(s) (Zone Date Effective/Revised Date Zone(s) AO, use base flood depth) 0001 В 8/12/70 8/15/83 A-8 10 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 (Describe) B11. Indicate elevation datum used for BFE in Item B9: ☑ NGVD 1929 □ NAVD 1988 ☐ Other (Describe) Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐Yes No **Designation Date** ☐ CBRS □ OPA 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. 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 C2.a-g below according to the building diagram specified in Item A7. Duef work Benchmark Utilized RM-1 Vertical Datum NGVD 1929 Conversion/Comments Top of bottom floor (including basement, crawl space, or enclosure floor) 7.0 Top of the next higher floor 11.40 Bottom of the lowest horizontal structural member (V Zones only) C) NA. ☑ feet ☐ meters (Puerto Rico only) d) Attached garage (top of slab) 6.80 ☑ feet ☐ meters (Puerto Rico only) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) Lowest adjacent (finished) grade (LAG) 5.99 Highest adjacent (finished) grade (HAG) ☐ feet ☐ meters (Puerto Rico only) 5.99 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 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. Check here if comments are provided on back of form. PLACE SEAL DANIEL J. PONZIO, SR. Certifier's Name License Number GS37603 HERE LAND SURVEYO Company Name ARTHUR W. PONZIO CO. & ASSOCIATES, INC. Address A00 NORTH DOVER AVENUE City ATLANTIC CITY ZIP Code 08401 State NJ Signature Date 8/9/07 Telephone 609-344-8194

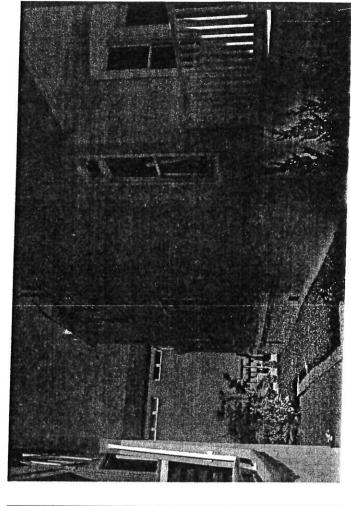
IMPORTANT: In these spaces, copy the corresponding information from Section A.	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
2505 OBERON AVENUE	
City LONGPORT State NJ ZIP Code 08403	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (	CONTINUED)
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) buildin	g owner.
	JECT #28401
Signature Date 8/9/07	
CECTION E DINI DINC EL EVATION (SURVEY NOT DECUMPED) FOR ZONE A	Check here if attachments
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE A	O AND ZONE A (WITHOUT BEE)
For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOM	
and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter	
E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation grade (HAG) and the lowest adjacent grade (LAG).	is above or below the highest adjacent
a) Top of bottom floor (including basement, crawl space, or enclosure) is	above or below the HAG.
b) Top of bottom floor (including basement, crawl space, or enclosure) is	
E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 (elevation C2.b in the diagrams) of the building is feet meters above or below	
E3. Attached garage (top of slab) is feet  meters above or below the HAG.	
E4. Top of platform of machinery and/or equipment servicing the building is feet meters _	
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with ordinance?    Yes    No    Unknown, The local official must certify this information in Section G.	the community's noodplain management
Graniance: The Granian in cost of the morniage in a section of	
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CEF	RTIFICATION
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a or Zone AO must sign here. <i>The statements in Sections A, B, and E are correct to the best of my knowledge</i> .	FEMA-issued or community-issued BFE)
erty Owner's or Owner's Authorized Representative's Name	
Address City State	zIP Code
Signature Date Tele	phone
Comments	
	Check here if attachment
SECTION G - COMMUNITY INFORMATION (OPTIONAL)	
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinan- and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in	ce can complete Sections A, B, C (or E), Items G8. and G9.
The information in Section C was taken from other documentation that has been signed and sealed by a lice is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the	ensed surveyor, engineer, or architect who e Comments area below.)
62. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community)	unity-issued BFE) or Zone AO.
The following information (Items G4G9.) is provided for community floodplain management purposes.	
G4. Permit Number G5. Date Permit Issued G6. Date Certificate Of Co	ompliance/Occupancy Issued
77. This permit has been issued for: New Construction Substantial Improvement	
8. Elevation of as-built lowest floor (including basement) of the building: feet	ım
9. BFE or (in Zone AO) depth of flooding at the building site:	ım
Local Official's Name Title	
Community Name Telephone	
Signature Date	
Uniments .	

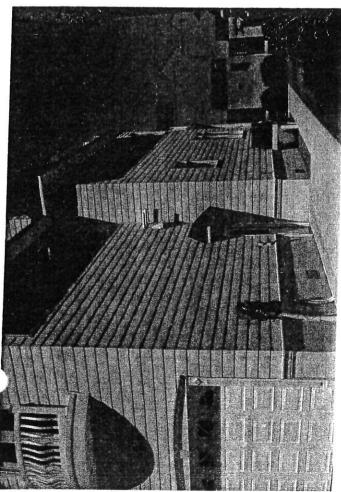
## Building Photographs See Instructions for Item A6.

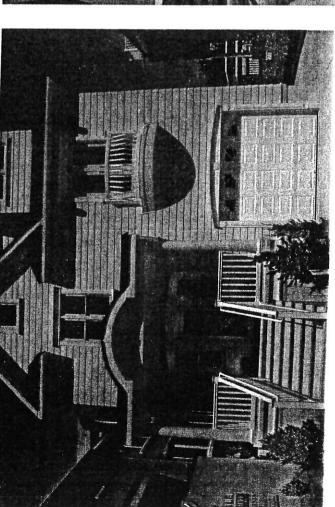
15.75	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2505 OBERON AVENUE	Policy Number
City LONGPORT State NJ ZIP Code 08403	Company NAIC Number
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photo the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View" and "Left Side View." If submitting more photographs than will fit on this page, ufollowing.	ographs below according to

SEE ATTACHED PHOTOS









#28401 - 2505 Oberon Ave., Longport