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

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expires March 31, 2012

national Flood Insur	ance Program	important	. Read the	nstructions	on pa	iges 1-9.	
		SEC	TION A - PR	OPERTY IN	FORMA	ATION	For Insurance Company Use:
A1. Building Owner's Name MAC Property Group LLC						Policy Number	
uilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 88 <sup>th</sup> Ave.					Company NAIC Number		
City LONGPO	ORT State NJ ZIP C	ode 08403					
A3. Property Desc Block 33 lot 12	ription (Lot and Block N	umbers, Tax Parcel N	Number, Legal	Description, e	tc.)		
A5. Latitude/Longit	e.g., Residential, Non-R ude: Lat. <u>N 39.3146</u> L 2 photographs of the bo Im Number <u>9</u>	ong. <u>W 074.5258</u>			od insura	Horizontal Datum ance.	n: □ NAD 1927 ⊠ NAD 1983
a) Square foo b) No. of perm enclosure(s c) Total net an	with a crawlspace or en- tage of crawlspace or en- nanent flood openings in s) within 1.0 foot above rea of flood openings in flood openings?	nclosure(s) n the crawlspace or adjacent grade	1920 sq ft 0 sq in		<ul><li>a) Squ</li><li>b) No.</li><li>with</li><li>c) Tota</li></ul>	in 1.0 foot above a	ached garage <u>n/a</u> sq ft d openings in the attached garage adjacent grade <u>n/a</u> openings in A9.b <u>n./a</u> sq in
	SEC	TION B - FLOOD	INSURANCE	RATE MAP	(FIRM	) INFORMATIO	N
B1. NFIP Communit Borough of Longpor	y Name & Community I t 345302	Number	B2. County Na Atlantic	ime			B3. State NJ
B4. Map/Panel Nui 345302 / 0001		B6. FIRM Index Date No Index Printed	Effectiv	FIRM Panel re/Revised Da 8/15/83	ate	B8. Flood Zone(s) A8	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
		rier Resources Syste	m (CBRS) area	☐ OPA	Protect		☐ Yes ⊠ No
	SECTIO	N C - BUILDING E	LEVATION I	NFORMATI	ON (SL	JRVEY REQUIR	RED)
<ol> <li>Elevations – Zon below according</li> </ol>	Certificate will be requi	with BFE), VE, V1-V3 specified in Item A7.	n of the buildin 30, V (with BFE Use the same	g is complete.	AR/AE. /	Construction* AR/A1-A30, AR/Al	⊠ Finished Construction             H, AR/AO. Complete Items C2.a-h
	ments <u>Survey Datum</u> +			TCON			
		Di E Butuiii	7 BY NOO VEIV	10011	Cł	neck the measurer	ment used.
	m floor (including baser	nent, crawlspace, or	enclosure floor	<u>7</u> . <u>1</u>		meters (Puer	to Rico only)
	b) Top of the next higher floor						
	e lowest horizontal stru	ctural member (V Zor	nes only)	<u>n/a</u>		meters (Puerl	
e) Lowest eleva	rage (top of slab) ation of machinery or ed se of equipment and loc	quipment servicing the	e building	<u>n/a</u> n/a		☐ meters (Puert ☐ meters (Puert	
f) Lowest adjac	cent (finished) grade ne	xt to building (LAG)		<u>7.6</u>		meters (Puert	to Rico only)
	cent (finished) grade ne cent grade at lowest ele		rs, including	<u>7.8</u> n/a		☐ meters (Puert	to Rico only)
Structurar Su	CONTRACTOR OF THE PERSON NAMED IN COLUMN 1	N D - SURVEYOR	PENGINEER	OR ARCH	ITECT	CERTIFICATIO	NI
This certification is to	be signed and sealed						
information. I certify	that the information on false statement may b	this Certificate repres	ents my best e	fforts to interr	ret the	data available	
	nments are provided or		Were latitude a licensed land s		in Section	on A provided by a	PLACE SEAL
Certifier's Name Pau	H. Koelling, PLS			License Num	nber NJ	24GS 02177100	HERE
Ti censed Land		Company Name P.	AUL H. KOELL	ING & ASSO	CIATES	, LLC	Scotter Control of the Control of th
Address 2161 Shore	Road	City Linwood		State NJ		ZIP Code 08221	_
Signature 7	RHIL	Date 7/	17/13	Telephone	(609)92	7-0279	

	, copy the corresponding informati		For Insurance Company Use.
8 N. 28 <sup>th</sup> Ave.	pt., Unit, Suite, and/or Bldg. No.) or P.O. F	Route and Box No.	Policy Number
City Longport State NJ ZIP Code	: 08403		Company NAIC Number
SECTIO	N D - SURVEYOR, ENGINEER, OR	ARCHITECT CERTIFICATION	ON (CONTINUED)
Copy both sides of this Elevation Cer	rtificate for (1) community official, (2) insur	ance agent/company, and (3) bu	ilding owner.
	(not flood vents) The square feet of crawl		
	/ /		» يغليقاندن . - يغليقاندن .
Signature		Date	Check here if attachments
SECTION E - BUILDING EL	EVATION INFORMATION (SURVEY	NOT REQUIRED⊁FOR ZON	E AO AND ZONE A (WITHOUT BFE)
and C. For Items E1-E4, use natura E1. Provide elevation information for grade (HAG) and the lowest ac a) Top of bottom floor (including b) Top of Building Diagrams 6-9 with (elevation C2.b in the diagrams E3. Attached garage (top of slab) is E4. Top of platform of machinery at E5. Zone AO only: If no flood deption ordinance? Yes No SECTIO	Il grade, if available. Check the measurem or the following and check the appropriate djacent grade (LAG).  g basement, crawlspace, or enclosure) is g basement, crawlspace, or enclosure) is g permanent flood openings provided in Se s) of the building is feet meters and/or equipment servicing the building is h number is available, is the top of the bot Unknown. The local official must certificate representative who completes Sections A, B, and E are corrected the service of the property of	pent used. In Puerto Rico only, e boxes to show whether the eleving boxes to show whether the eleving feet	ation is above or below the highest adjacent eters  above or below the HAG. eters  above or below the LAG. ges 8-9 of Instructions), the next higher floor elow the HAG.  above or below the HAG. with the community's floodplain management
Troporty Owner 5 or Owner 5 Authoriz			
Address	(	City	State ZIP Code
Signature	]	Date	Telephone.
Comments			
			Chillian State of the character
	SECTION G - COMMUNITY	INFORMÁTION (OPTIONAL	☐ Chêck here if attachments
	aw or ordinance to administer the commun	nity's floodplain management ord	inance can complete Sections A, B, C (or E),
G1.   The information in Section C	mplete the applicable item(s) and sign below was taken from other documentation that relevation information. (Indicate the source	has been signed and sealed by	a licensed surveyor, engineer, or architect who
G2. A community official complete	ed Section E for a building located in Zone	A (without a FEMA-issued or co	ommunity-issued BFE) or Zone AO.
G3.  The following information (Ite	ems G4-G9) is provided for community floo	odplain management purposes.	
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate	Of Compliance/Occupancy Issued
G4. Permit Number	GS. Date Ferrit Issued		1
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (i	☐ New Construction ☐ Substa	antiał Improvement 	R) Datum
G7. This permit has been issued for:	☐ New Construction ☐ Substruction ☐	antiał Improvement	
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (i	☐ New Construction ☐ Substanctuding basement) of the building:	antiał Improvement 	R) Datum
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (i) G9. BFE or (in Zone AO) depth of floo	☐ New Construction ☐ Substanctuding basement) of the building:	antiał Improvement	R) Datum
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (i G9. BFE or (in Zone AO) depth of floo G10. Community's design flood elevation	☐ New Construction ☐ Substanctuding basement) of the building:	antiał Improvement	R) Datum
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (i) G9. BFE or (in Zone AO) depth of floo G10. Community's design flood elevation Local Official's Name	☐ New Construction ☐ Substanctuding basement) of the building:	antiał Improvement	R) Datum
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## **Building Photographs**

	See Instructions for	or Item A6.	For Insurance Company Use:
Building Street Address (includ <b>3 N. 28<sup>th</sup> Ave.</b>	ng Apt., Unit, Suite, and/or Bldg.) No. o	or P.O. Route and Box No.	Policy Number
City	State	ZIP Code	Company NAIC Number
Longport	NJ	08403	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.

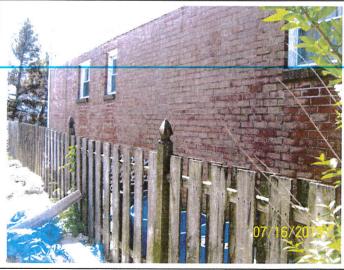




Front View - Date of Photograph: (See Photo Stamp)

Rear View - Date of Photograph: (See Photo Stamp)





Vent View - Date of Photograph: (See Photo Stamp)

Left Side View - Date of Photograph: (See Photo Stamp)

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