

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2006

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-7.

7/2/06

109/3.0 Sale

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:	
BUILDING OWNER'S NAME WILLIAM CURTIS		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 19 S. 36 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 109 LOT 3.01			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL			
LATITUDE/LONGITUDE (OPTIONAL) (##-##-### or ##.####)		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input type="checkbox"/> USGS Quad Map 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 8-15-1983
B7. FIRM PANEL EFFECTIVE/REVISED DATE 8-15-1983	B8. FLOOD ZONE(S) A-S	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 10.0
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): _____		
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): _____		
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date		

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
C2. Building Diagram Number 2 (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 C3-a-h 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 1929 Conversion/Comments NO CONVERSION Elevation reference mark used RM-1 Does the elevation reference mark used appear on the FIRM? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	9 ft.(m)
<input type="checkbox"/> b) Top of next higher floor	10.2 ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	A ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	A ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	UNKNOWN ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	7.6 ft.(m)
<input checked="" type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	7.7 ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 4	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3-h 1360 sq. in. (sq. cm)	

License Number, Embossed Seal, Signature, and Date

10#33531

[Signature]

7-2-06

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 GORDON M. LUDWIG		LICENSE NUMBER 24GS03353100	
TITLE LAND SURVEYOR	COMPANY NAME POINT TO POINT SURVEYING CO., LLC.		
ADDRESS P.O. BOX 299	CITY SOMERS POINT	STATE NJ	ZIP CODE 08244
SIGNATURE <i>[Signature]</i>	DATE 4-2-06 REV 7-2-06	TELEPHONE 609-927-9295	

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. 19 S. 36TH AVENUE			Policy Number	
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) building owner.

COMMENTS
ACCESS TO THE DWELLING WAS NOT GAINED. C3-A IS THE CRAWL SPACE (MORE OR LESS). C3-B IS THE SILL OF THE FRONT ENTRANCE. C3-E WAS NOT OBTAINABLE. CRAWL SPACE APPEARS TO BE BELOW GRADE ON ALL SIDES. THIS ELEVATION CERTIFICATE IS FOR INSURANCE PURPOSES ONLY. IT IS NOT TO BE USED FOR ANY DESIGN OR PERMITTING, ETC. PURPOSE. ADDED ADDITIONAL VENT 7-2-08 G.M.L.

Check here if attachments

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

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.

- 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.)
- 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. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ___ ft.(m) ___ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is ___ ft.(m) ___ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. 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.

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

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME			
ADDRESS		CITY	STATE
SIGNATURE		DATE	TELEPHONE
COMMENTS			

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- 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.)
- 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.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
-------------------	------------------------	---

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: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	