## EXPIRES: JUNE 30 1990

## ELEVATION CERTIFICATE FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

This form is to be used for: 1) Post-FIRM construction only when the base flood information is ava Instructions for completing this form can be	ilable for the building site; and 2) Pre-FIRM buildings rated using Post-FIRM rules. found on the reverse side.
Peter Mucciarone	POLICY NUMBER
BUILDING OWNER'S NAME	TODOT NOMEZA
27 N. Colmar Circle	
STREET ADDRESS	
AptA/Unit-U Suite-S/BldgB NO.	ROUTE BOX NUMBÉR
Block 509 Lot 79	
OTHER DESCRIPTION (Block and lot numbers., etc.) Margate	New Jersey 08402
CITY	OTATE
This form is to be completed by a land surveyor, engineer, or architect who is authinformation for zones A1-A30, AE, AH, A(with BFE), V1-V30, VE, and V(with BFE) is owner, or the owner's representative should complete the information in Section I a authorized by local law or ordinance to provide floodplain management information	nd may also complete the certification. Community officials who are may also complete this form.
SECTION I BUILDING ELEVA	TION INFORMATION
Using the Flood Insurance Manual or the NFIP Flood Insurance Applicati	on-Part 2 Worksheet, indicate the proper diagram number
2 FIRM Zones A1-A30, AE, AH, and A (with BFE). The top of the reference	ce level floor from the selected diagram is at an
elevation of 11.53 feet NGVD. (or other datum-see #5) 3. FIRM Zones V1-V30, VE, and V (with BFE). The bottom of the lowest h	
the diagram is at an elevation of feet NGVD (or other	datum-see #5).
the reference level from the selected	diagram is     feet above highest natural glade flext to
4. FIRM Zone AO. The floor used as the reference level from the selected diagram to the building (also enter in line 8). This value must be equal to or greater than the AO Zone flood depth number listed below. If no flood depth number is available, is the building's lowest floor (or reference level) elevated in accordance with the community's	
flood depth number is available, is the building's lowest floor (or referen	nce level) elevated in accordance with the community 3
floodplain management ordinances? Yes No Unknown  5. Indicate the elevation datum system used in determining the above refe	erence level elevations: XNGVD Other (describe on back)
6. Indicate the elevation datum system used on the FIRM for base flood e	elevations: NGVD Other (describe on back)
(ATTENTION), if the elevation datum used in measuring the elevations is diff	erent than that used on the FIRM, then the elevations provided
must be converted to the datum system used on the Firms.	MSL = NGVD
3 feet Xabove below (check one) the highest grade.	ed, a post-construction elevation certificate will be required for $0.00  \mathrm{MSL}$
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SECTION II FLOOD INSURANCE RATE MAP INFORMATION	
Provide the following from the proper FIRM (see Instructions on back-Dai	
COMMUNITY NO. PANEL NO. SUFFIX DATE OF FIRM FIRM ZON  3.4.5.3.0.4 0.0.0.1 C 10/18/83 A-8	BASE FLOOD ELEV. (In A0 Zone, use depth)  10.00 MSL  COMMUNITY ESTIMATED BASE FLOOD ELEVATION ESTABLISHED FOR ZONE A OR ZONE V, IF AVAILABLE
345304 0001 0 20727	(N.G.V.D. LEVELS FROM U.S.C.&G.S. BENCH MARKS)
Elevation reference mark used appears on FIRM Tes Millor.	TEICATION
This certification is to be signed by a land surveyor, engineer, or architect who is a elevation information for zones A1-A30, AE, AH, A(with BFE), V1-V30, VE, and V(v) property owner, or the owner's representative can sign the certification. Community floodplain management information, may also sign the certification. I certify that the detay available I understand that any false statement may be punishable by find	authorized by state law to certify elevation information when the with BFE) is required. In the case of zone AO, the building official, the yo officials who are authorized by local law or ordinance to provide information on this certificate represents my best efforts to interpret or imprisonment under 18 U.S. Code, Section 1001.
NOTE THIS FORM NOT VALID UNLESS RAISED SEAL AFFIXED ATO	P SURVEYORS SIGNATURE #18612
Robert J. Catalano  CERTIFIER'S NAME  Land Surveyor   Robert J. Catalano a:	LICENSE NUMBER (or Affix Seal)
COMPANY	NAME 00401
1020 Atlantic Ave. Room 202 Atlantic	ITY STATE ZIP
ADDRESS L.S. 18617	5/7/91 609-345-1887
SIGNATURE	DATE PHONE
The insurance agent should stach the original copy of the completed form to the floopolicyholder and the third copy retained by the agent. The fourth copy retained by the agent. The form MAY BE RE	d insurance policy application. The second copy should be supplied to the popy is for the local community permit office, if required.
FOR OPTIONAL COMMUNITY USE: Is the reference level also the lowest floor un	der the community's floodplain management ordinances?
FOR OPTIONAL COMMUNITY USE: IS the releisance level also the interest	