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

OMB No. 1660-0008 Expiration Date: November 30, 2018

APR 18 2017

ELEVATION CERTIFICATE Important: Follow the instructions on pages 1–9.

Copy all pages of this E					I, (2) insurance a	gent/company	, and (3) building owner.
SECTION A - PROPERTY INFORMATION						ANCE COMPANY USE	
A1. Building Owner	TLIEB					Policy Numb	per:
Box No.		iding Apt., Unit, Suite, a	and/or	Bldg. No.) or P.O. F	Route and	Company N	AIC Number:
12 SOUTH THURLO	W AVENUE			State		ZIP Code	
City				New Jersey		08402	
MARGATE	tion (I at ano	Block Numbers, Tax F	Darcel	Page 1 - Company of the Company of t	cription etc.)		
BLOCK 121 LOT		I Block Nullibers, Tax I	arcci	Humber, Legar Dee	,		
A4. Building Use (e	g., Residentia	al, Non-Residential, Ad	dition,	Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longitude/Longitude/	ide: Lat. 39	19' 25.9" Lo	ong. 74	4	Horizontal Datu		927 X NAD 1983
A6. Attach at least	2 photographs	s of the building if the C	Certifica	ate is being used to	obtain flood insur	rance.	8
A7. Building Diagra	m Number _	8					
A8. For a building v	ith a crawlspa	ace or enclosure(s):					
a) Square foot	age of crawlsp	pace or enclosure(s)	1	,903 sq ft			
b) Number of p	ermanent floo	od openings in the crav	vispace	e or enclosure(s) wit	thin 1.0 foot abov	e adjacent gr	ade12
c) Total net are	a of flood ope	enings in A8.b2,40	0 s	q in			
d) Engineered	flood opening	s? 🛛 Yes 🗌 No					
A9. For a building v	vith an attache	ed garage:		~~	1)		
a) Square footage of attached garage sq ft							
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade							
c) Total net are	ea of flood ope	enings in A9.b _ 1	a	sq in			
d) Engineered	d) Engineered flood openings?						
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORM	IATION	
B1. NFIP Commun				B2. County Name			B3. State
	TE 345304	ommunity reams.		ATLANTIC			New Jersey
B4. Map/Panel	B5. Suffix	B6. FIRM Index		IRM Panel ffective/	B8. Flood Zone		use Flood Elevation(s) one AO, use Base
Number		Date	R	evised Date	A-8	Fic 10.0	ood Depth)
345304/0001	С	07/21/1974	10/20	3/1983	A-0		
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/Source:							
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No							
B12. Is the building	g located in a	Coastal Barrier Resor		ystem (obito) area	. 0. 0		
B12. Is the buildin				OPA			

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Secti	FOR INSURANCE COMPANY USE	
Juilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route 12 SOUTH THURLOW AVENUE	Policy Number:	
City State ZIP Command New Jersey 08402		Company NAIC Number
SECTION C - BUILDING ELEVATION INFORMATION	ON (SURVEY RI	EQUIRED)
C1. Building elevations are based on: Construction Drawings* Buildi *A new Elevation Certificate will be required when construction of the building	ng Under Constru	uction* X Finished Construction
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE Complete Items C2.a–h below according to the building diagram specified in Benchmark Utilized: RM-4 Vertical Datum: N	E), AR, AR/A, AR/ Item A7. In Puert	/AE, AR/A1–A30, AR/AH, AR/AO. to Rico only, enter meters.
Indicate elevation datum used for the elevations in items a) through h) below NGVD 1929 NAVD 1988 Other/Source:		
Datum used for building elevations must be the same as that used for the BF	E.	Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	9. 0	X feet meters
b) Top of the next higher floor	12. 73	X feet meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	X feet meters
d) Attached garage (top of slab)	N/A	X feet meters
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 	12. 73	X feet meters
f) Lowest adjacent (finished) grade next to building (LAG)	8. <u>95</u>	x feet meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>9</u> . <u>31</u>	x feet meters
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 	<u>9</u> . <u>0</u>	X feet meters
SECTION D – SURVEYOR, ENGINEER, OR ARC	HITECT CERTIF	ICATION
This certification is to be signed and sealed by a land surveyor, engineer, or arch I certify that the information on this Certificate represents my best efforts to interpretatement may be punishable by fine or imprisonment under 18 U.S. Code, Secti	on 1001.	able. I understand that any raise
Were latitude and longitude in Section A provided by a licensed land surveyor?	⊻Yes □ No	
Certifier's Name License Number DANIEL J. PONZIO, SR. GS37603		
Title PROFESSIONAL LAND SURVEYOR		
Company Name ARTHUR W. PONZIO CO. & ASSOC., INC.	Place Seal Here	
Address 400 NORTH-DOVER AVENUE		
City State New Jersey	ZIP Code 08401	
Signature Date 04/12/2017	Telephone (609) 344-8194	
Copy all pages of this Elevation Certificate and all attachments for (1) community off	icial, (2) insurance	agent/company, and (3) building owner
Comments (including type of equipment and location, per C2(e), if applicable)		
PROJECT #33074 A/C UNIT ELEV = 12.51' MECHANICALS ELEV =	12.73	
T.		

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Building Street Address (including Apt., Unit, Suite, a 12 S. THURLO W AVENUE	nd/or Bldg. No.) or I	P.O. Route and Box No.	Policy Number:
City MARGATE	State New Jersey	ZIP Code 08402	Company NAIC Number
SECTION E – BUILDING FOR ZO		ORMATION (SURVEY N NE A (WITHOUT BFE)	OT REQUIRED)
For Zones AO and A (without BFE), complete Items complete Sections A, B,and C. For Items E1–E4, us enter meters.	e natural grade, if a	available. Check the meas	urement used. In Puerto Rico only,
E1. Provide elevation information for the following a the highest adjacent grade (HAG) and the lower	nd check the approst st adjacent grade ()	opriate boxes to show whe LAG).	ther the elevation is above or below
a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet me	eters above or below the HAG.
crawlspace, or enclosure) is			eters above or below the LAG.
E2. For Building Diagrams 6–9 with permanent floor the next higher floor (elevation C2.b in the diagrams) of the building is	openings provided	d in Section A Items 8 and	V
E3. Attached garage (top of slab) is		feet _ me	eters above or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is			eters above or below the HAG.
E5. Zone AO only: If no flood depth number is availated floodplain management ordinance? Yes			
SECTION F - PROPERTY OF	WNER (OR OWNE	R'S REPRESENTATIVE)	CERTIFICATION
The property owner or owner's authorized represents community-issued BFE) or Zone AO must sign here.	ative who complete The statements in	s Sections A, B, and E for Sections A, B, and E are	Zone A (without a FEMA-issued or correct to the best of my knowledge.
Property Owner or Owner's Authorized Representation	ve's Name		
Address	(City	State ZIP Code
Signature		Dŧ	Telephone
Comments		The same of the sa	
			185
	7		
2			
4			
*			9
			Check here if attachments.

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, St 12 SOUTH THURLOW AVENUE	Policy Number:			
City MARGATE	State New Jersey	ZIP Code 08402	Company NAIC Number	
SECTION	ON G - COMMUNITY INFOR	MATION (OPTIONAL)		
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, er	Certificate. Complete the ap	mmunity's floodplain mar plicable item(s) and sign	nagement ordinance can complete below. Check the measurement	
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)				
G2. A community official completed Sect or Zone AO.	ion E for a building located in	Zone A (without a FEMA	\-issued or community-issued BFE)	
G3. The following information (Items G4-	-G10) is provided for commu	nity floodplain manageme	ent purposes.	
G4. Permit Number	G5. Date Permit Issued		ate Certificate of ompliance/Occupancy Issued	
G7. This permit has been issued for;	New Construction Subs	stantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building:				
G9. BFE or (in Zone AO) depth of flooding at t	the building site:	feet	meters Datum	
G10. Community's design flood elevation:		feet	meters Datum	
Local Official's Name	Title			
Community Name MARGATS		phone 609-822-	1918	
MANGATE $609-812-1918$ Signature Date $3/21/18$				
Comments (including type of equipment and loc	cation, per C2(e), if applicable	e) //		
		MARGATE CI 900	TY BUILDING DEPARTMENT 11 Winches Ave. 12 Ave. 13 Ave. 14 City, NJ 08402	
			Check here if attachments.	

BUILDING PHOTOGRAPHS

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See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

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uilding Street Address (including 12 SOUTH THURLOW AVENUE	Apt., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City MARGATE	State New Jersey	ZIP Code 08402	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption FRONT VIEW

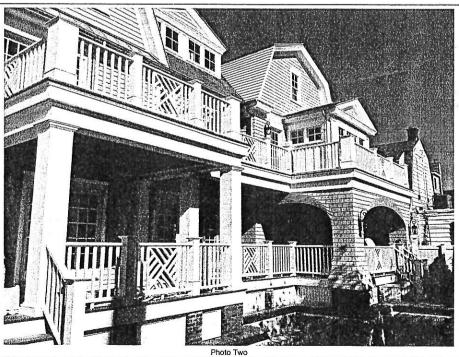


Photo Two Caption REAR VIEW

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.

3uilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

12 SOUTH THURLOW AVENUE

FOR INSURANCE COMPANY USE
Policy Number:

City State ZIP Code Company NAIC Number MARGATE New Jersey 08402

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

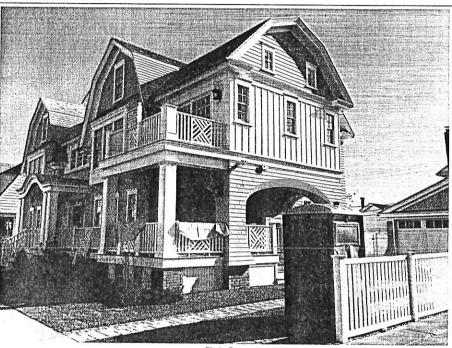


Photo One

Photo One Caption RIGHT SIDE VIEW

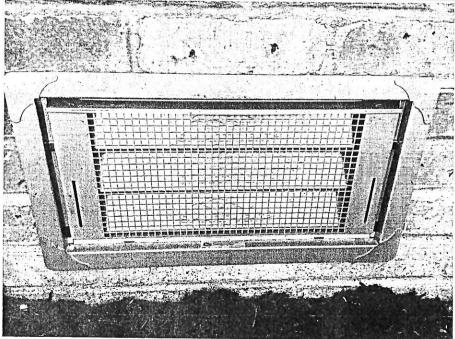


Photo Two