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

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

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

| SECTION A - PROPERTY INFORMATION | | | | | FOR INSUR | ANCE COMPANY USE |
|----------------------------------------------------------------------|---------------------------|----------|---------------------------------------|----------------------|-------------------|-------------------------------------------------------|
| A1. Building Owner's Name NICOLE STAMPS & EUGENE | ROSADINO | | | | Policy Numb | per: |
| A2. Building Street Address (in Box No. 364 NORTH RUMSON AVENU | | and/or | Bldg. No.) or P.O. | Route and | Company N | AIC Number: |
| City MARGATE | | | State New Jersey | | ZIP Code 08402 | |
| A3. Property Description (Lot a BLOCK 619 LOT 3.02 | nd Block Numbers, Tax | Parcel | Number, Legal De | scription, etc.) | | |
| A4. Building Use (e.g., Resider | ntial, Non-Residential, A | ddition, | Accessory, etc.) | RESIDENTIAL | | a 9 |
| A5. Latitude/Longitude: Lat | 39 19' 48.9" L | ong. 7 | 4 30' 50.7" | Horizontal Datum | : NAD 1 | 927 🗵 NAD 1983 |
| A6. Attach at least 2 photograp | hs of the building if the | Certific | ate is being used to | obtain flood insura | nce. | |
| A7. Building Diagram Number | 7 | | | | | |
| A8. For a building with a crawls | space or enclosure(s): | | | | | |
| a) Square footage of craw | space or enclosure(s) | | 1,009 sq ft | | | 1 1 |
| b) Number of permanent f | ood openings in the cra | wlspac | e or enclosure(s) w | ithin 1.0 foot above | adjacent gra | ade6 |
| c) Total net area of flood of | penings in A8.b1,20 | 00 s | q in | | | |
| d) Engineered flood openi | ngs? 🛛 Yes 🗌 No |) | | | | |
| A9. For a building with an attac | hed garage: | | | | | |
| a) Square footage of attac | hed garage249 | | sq ft | | | |
| b) Number of permanent f | lood openings in the atta | ached o | garage within 1.0 foo | ot above adjacent g | rade | 2 |
| c) Total net area of flood c | penings in A9.b 4 | 00 | sq in | | | |
| d) Engineered flood openi | ngs? 🛛 Yes 🗌 N | 0 | | | | |
| S | ECTION B - FLOOD IN | ISURA | NCE RATE MAP | (FIRM) INFORMA | TION | |
| B1. NFIP Community Name & MARGATE 34530 | | 19 | B2. County Name ATLANTIC | | | B3. State New Jersey |
| B4. Map/Panel B5. Suffix Number | B6. FIRM Index Date | E | IRM Panel ffective/ evised Date | B8. Flood Zone(s) | (Zo | se Flood Elevation(s) ne AO, use Base od Depth) |
| 345304/0001 C | 07/21/1974 | | 3/1983 | A-8 | 10.00 | ' |
| B10. Indicate the source of the ☐ FIS Profile ☒ FIRM | | | | | n B9: | |
| B11. Indicate elevation datum | used for BFE in Item B9 |): X N | IGVD 1929 🔲 NA | AVD 1988 | her/Source: | |
| B12. Is the building located in | a Coastal Barrier Resou | ırces S | ystem (CBRS) area | or Otherwise Prote | ected Area (| OPA)? ☐ Yes ☒ No |
| Designation Date: | 50-0 <u>0</u> 6 | CBRS | □ОРА | | | |
| - | | | | B 6 | | |
| 1 | **** | | | | | |

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| | RTANT: In these spaces, copy the corresponding informati | FOR INSURANCE COMPANY USE | | |
|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------|
| | ng Street Address (including Apt., Unit, Suite, and/or Bldg. No.) IORTH RUMSON AVENUE | Policy Number: | | |
| City | State | ZIP Co | 7 | Company NAIC Number |
| MAR | GATE New Jersey | 08402 | 57 | |
| | SECTION C – BUILDING ELEVATION | | | |
| C1. | Building elevations are based on: Construction Drawing | 0 100-110 | | ction* X Finished Construction |
| | *A new Elevation Certificate will be required when construction | | | AE ABIAT ASS ABIAT ABIAS |
| C2. | Elevations –.Zones A1–A30, AE, AH, A (with BFE), VE, V1–V3 Complete Items C2.a–h below according to the building diagra Benchmark Utilized: RM-3 | 30, V (With BFE im specified in rtical Datum: N | Item A7. In Puert | o Rico only, enter meters. |
| | Indicate elevation datum used for the elevations in items a) thr | - | | |
| | NGVD 1929 | , | | |
| | Datum used for building elevations must be the same as that u | sed for the BFI | E. | Check the measurement used. |
| | a) Top of bottom floor (including basement, crawlspace, or en | closure floor) _ | <u>6</u> . <u>47</u> | × feet meters |
| | b) Top of the next higher floor | _ | 14. 17 | |
| | c) Bottom of the lowest horizontal structural member (V Zones | s only) _ | N/A. | X feet meters |
| | d) Attached garage (top of slab) | _ | 6. 57 | 🔀 feet 🗌 meters |
| | E) Lowest elevation of machinery or equipment servicing the background (Describe type of equipment and location in Comments) | ouilding _ | 1 12. 37 | X feet meters |
| | f) Lowest adjacent (finished) grade next to building (LAG) | 20 | 4, 95 | 🗓 feet 🗌 meters |
| | g) Highest adjacent (finished) grade next to building (HAG) | | 6, 59 | 🔀 feet 🗌 meters |
| | h) Lowest adjacent grade at lowest elevation of deck or stairs | including - | 5 0 | |
| | structural support | , mordaling _ | | |
| | SECTION D - SURVEYOR, ENGINE | ER, OR ARCH | IITECT CERTIF | CATION |
| LCE | certification is to be signed and sealed by a land surveyor, eng tify that the information on this Certificate represents my best e ement may be punishable by fine or imprisonment under 18 U.S | efforts to interpr | et the data availa | law to certify elevation information. ble. I understand that any false |
| | e latitude and longitude in Section A provided by a licensed lan | | | ○ Check here if attachments. |
| 2016 SECTION 10 | ifier's Name License | | | |
| DAN | NIEL J. PONZIO, SR. GS3760 | 3 | | |
| Title PR0 | DFESSIONAL LAND SURVEYOR | | | |
| Company Name | | | | Place Seal |
| ARTHUR W. PONZIO CO. & ASSOC., INC. | | | Here | |
| | ress NORTH DOVER AVENUE | 0 | n ± ⁿ | |
| City ATL | ANTIC CITY State New Jei | | ZIP Code 08401 | |
| Sigr | Date 07/27/20 | | Telephone (609) 344-8194 | |
| Cop | y all pages of this Ejevation Certificate and all attachments for (1) | community offic | cial, (2) insurance | agent/company, and (3) building owner. |
| | nments (including type of equipment and location, per C2(e), if | | | |
| PRO | DJECT #33096 *DUCT WORK A/C UNIT ELEV = 13. SMART VENT MODEL #1540-510 | 03' HEATE | ER ELEV = 14.17 | |
| | SMART VERY MODEL # 1040 010 | - 2 | | |
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| IMP | ORTANT: In these spaces, copy | y the corresponding info | rmation from Secti | on A. | FOR INSURANC | E COMPANY USE |
|---------------------|-------------------------------------------------------------------------------------|--------------------------------------------------------|--------------------------------------------------|------------------------------------------|-----------------------------------------|-----------------------------------|
| | ding Street Address (including Ap NORTH RUMSON AVENUE | ot., Unit, Suite, and/or Bldg | . No.) or P.O. Route | and Box No. | Policy Number: | |
| City | N . | State | ZIP C | ode | Company NAIC N | Number |
| MA | RGATE | New Jer | sey 08402 | ! | | |
| · | SECTION E | – BUILDING ELEVATION FOR ZONE AO A | ON INFORMATION ND ZONE A (WITH | | REQUIRED) | |
| com | Zones AO and A (without BFE), on plete Sections A, B, and C. For It er meters. | complete Items E1–E5. If t ems E1–E4, use natural g | he Certificate is inte rade, if available. Ch | nded to support a neck the measure | a LOMA or LOMR-F ment used. In Pue | request, rto Rico only, |
| E1. | Provide elevation information for the highest adjacent grade (HAC | and the lowest adjacent | | s to show whethe | r the elevation is a | bove or below |
| | Top of bottom floor (including crawlspace, or enclosure) is | g basement, | [| feet meter | rs above or [| below the HAG. |
| | Top of bottom floor (including crawlspace, or enclosure) is | g basement, | [| feet meter | rs above or [| below the LAG. |
| E2. | For Building Diagrams 6–9 with | | provided in Section | A Items 8 and/or | 9 (see pages 1-2 | of Instructions), |
| | the next higher floor (elevation C the diagrams) of the building is | 52.D IN | | feet meter | rs above or [| below the HAG. |
| E3. | Attached garage (top of slab) is | e e | [| feet meter | rs above or [| below the HAG. |
| E4. | Top of platform of machinery and servicing the building is | d/or equipment | [| feet meter | rs 🗌 above or [| below the HAG. |
| E5. | Zone AO only: If no flood depth floodplain management ordinand | number is available, is the ce? | top of the bottom flo Unknown. The lo | oor elevated in ac ocal official must | cordance with the certify this informat | community's tion in Section G. |
| | SECTION F - | PROPERTY OWNER (OF | R OWNER'S REPRE | ESENTATIVE) CI | ERTIFICATION | |
| 83807 | | | | | | TMA issued or |
| The | property owner or owner's autho | rized representative who c | completes Sections | A, B, and E for Zo | me A (Williout a FE | IVIA-ISSUEU OI |
| com | munity-issued BFE) or Zone AO | must sign here. The states | ments in Sections A, | B, and E are cor | rect to the best of i | my knowleage. |
| com | munity-issued BFE) or Zone AO perty Owner or Owner's Authorize | | | B, and E are cor | rect to the best of t | my knowledge. |
| com | * | | | | | |
| Pro | * | | | | ate | ZIP Code |
| Prop | perty Owner or Owner's Authorize | | | St | | |
| Prop Add Sign | perty Owner or Owner's Authorize | | City | St | ate | |
| Prop Add Sign | ress | | City | St | ate | |
| Prop Add Sign | ress | | City | St | ate | |
| Prop Add Sign | ress | | City | St | ate | |
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| In the second se | | | |
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| IMPORTANT: In these spaces, copy the corre | FOR INSURANCE COMPANY USE | | |
| Building Street Address (including Apt., Unit, Su 364 NORTH RUMSON AVENUE | ite, and/or Bldg. No.) o | or P.O. Route and Box No. | Policy Number: |
| City | State | ZIP Code | Company NAIC Number |
| MARGATE | New Jersey | 08402 | |
| SECTIO | N G - COMMUNITY IN | NFORMATION (OPTIONAL) | |
| The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent | Certificate. Complete t | he community's floodplain ma he applicable item(s) and sig | anagement ordinance can complete n below. Check the measurement |
| G1. The information in Section C was take engineer, or architect who is authorized data in the Comments area below.) | en from other documen ed by law to certify elev | tation that has been signed a vation information. (Indicate t | and sealed by a licensed surveyor, he source and date of the elevation |
| G2. A community official completed Section or Zone AO. | on E for a building loca | ted in Zone A (without a FEN | 1A-issued or community-issued BFE) |
| G3. The following information (Items G4- | G10) is provided for co | mmunity floodplain managen | nent purposes. |
| G4. Permit Number | G5. Date Permit Issu | ed 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 of the building: | basement) | fee | t meters Datum |
| G9. BFE or (in Zone AO) depth of flooding at t | he building site: | fee | t meters Datum |
| G10. Community's design flood elevation: | | fee | t meters Datum |
| Local Official's Name | in Galante | Title CFM | - |
| Community Name | prope | Telephone 609-277 | -1576 |
| Signature (1) | | Date 6 - 18 | 18 |
| Comments (including type of equipment and loc | ation, per C2(e), if app | olicable) | |
| | | | |
| | | | |
| | | | |
| | | | ** |
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| - | | | |
| | 20 | | |
| | | | |
| | | | Check here if attachments. |

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 364 NORTH RUMSON AVENUE FOR INSURANCE COMPANY USE Policy Number:

City State ZIP Code Company NAIC Number MARGATE New Jersey 08402

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.

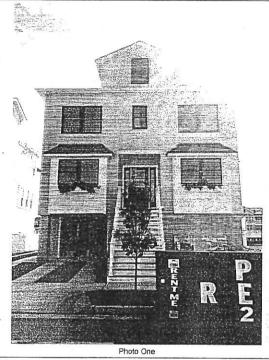


Photo One Caption FRONT VIEW 7/26/17

ELEVATION CERTIFICATE

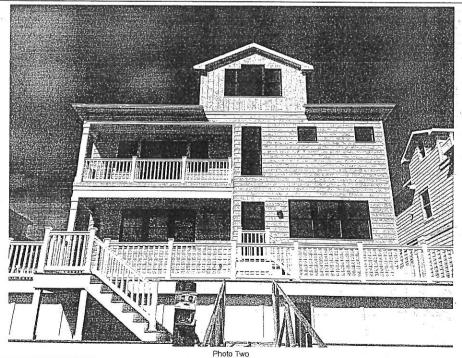


Photo Two Caption REAR VIEW 7/26/17

BUILDING PHOTOGRAPHS

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Continuation Page

| IMPORTANT: In these spaces, c | FOR INSURANCE COMPANY USE | | |
|------------------------------------------------------------|-----------------------------------------|----------------------|---------------------|
| Building Street Address (including 364 NORTH RUMSON AVENUE | Apt., Unit, Suite, and/or Bldg. No.) or | P.O. Route and Box N | lo. Policy Number: |
| City MARGATE | State New Jersey | ZIP Code 08402 | Company NAIC Number |

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.

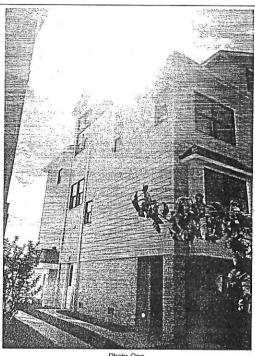


Photo One Caption LEFT SIDE VIEW 7/26/17

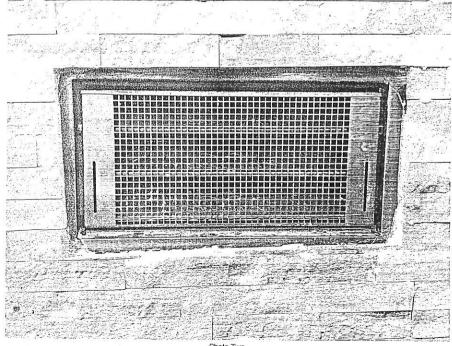


Photo Two Caption SMART VENT MODEL #1540-510 7/26/17