## U.S. DEPARTMENT OF HOMELAND SECURITY

OMB No. 1660-0008

**ELEVATION CERTIFICATE** Expires February 28, 2009 Federal Emergency Management Agency Important: Read the instructions on pages 1-8. National Flood Insurance Program For Insurance Company Use: SECTION A - PROPERTY INFORMATION Policy Number A1. Building Owner's Name NORTHEAST FRANKLIN AND ATLANTIC, LLC A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number 7815 ATLANTIC AVENUE - UNIT R3 City MARGATE State NJ ZIP Code 08402 A3 Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 106 - LOT 5 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) COMMERCIAL / RESIDENTIAL Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983 A5. Latitude/Longitude: Lat. 39 19' 45.5" Long. 074 29' 51.2" A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1 A9. For a building with an attached garage, provide: A8. For a building with a crawl space or enclosure(s), provide a) Square footage of crawl space or enclosure(s) a) Square footage of attached garage sq ft \* NA sq ft b) No. of permanent flood openings in the crawl space or b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade 0 enclosure(s) walls within 1.0 foot above adjacent grade 0 Total net area of flood openings in A9.b sq in Total net area of flood openings in A8.b sq in SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. State B1. NFIP Community Name & Community Number B2. County Name **NEW JERSEY** ATLANTIC COUNTY **MARGATE** 345304 B9. Base Flood Elevation(s) (Zone B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood B4. Map/Panel Number AO, use base flood depth) Effective/Revised Date Zone(s) Date 10.00 C 6/18/71 7/1/74 A-8 0001 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. Other (Describe) ☐ Community Determined ☐ FIS Profile Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: ☑ NGVD 1929 ■ NAVD 1988 ⊠No B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐Yes ☐ CBRS ☐ OPA Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Building Under Construction\* C1. Building elevations are based on: ☐ Construction Drawings\* \*A new Elevation Certificate will be required when construction of the building is complete. 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 C2.a-g below according to the building diagram specified in Item A7. Benchmark Utilized RM-1 Vertical Datum NGVD 1929 Conversion/Comments \_\_\_ Check the measurement used. Top of bottom floor (including basement, crawl space, or enclosure floor)\_ 11.17 20.02 Top of the next higher floor b) Bottom of the lowest horizontal structural member (V Zones only) NA. c) 9.65 Attached garage (top of slab) d) ☑ feet ☐ meters (Puerto Rico only) NA. Lowest elevation of machinery or equipment servicing the building e) (Describe type of equipment in Comments) 8.25 Lowest adjacent (finished) grade (LAG) f) 8.25 Highest adjacent (finished) grade (HAG) g) 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 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. ☐ Check here if comments are provided on back of form. PLACE SEAL DANJEL J. BONZIO, SR. License Number GS37603 Certifier's Name HERE Company Name ARTHUR W. PONZIO CO. & ASSOCIATES, INC. LAND SURVEYOR Title ZIP Code 08401 City ATLANTIC CITY State NJ Address 400 MORTH **OVER AVENUE** Telephone 609-344-8194 ate 2/28/08

IMPORTANT: In these spaces, of	copy the corresponding informa	tion from Section A.	For Insurance Company Use:
Building Street Address (including Apt. 7815 ATLANTIC AVENUE - UNIT R3	., Unit, Suite, and/or Bldg. No.) or P.O.	Route and Box No.	Policy Number
City MARGATE State NJ ZIP Code	08402		Company NAIC Number
SECTION	I D - SURVEYOR, ENGINEER, O	R ARCHITECT CERTIFICA	TION (CONTINUED)
Copy both sides of this Elevation Certif	ficate for (1) community official, (2) ins	urance agent/company, and (3	) building owner.
Comments *6EE A7 -DIAGRAM	IS# SLAB ON GRADE	PROJECT #28016-R3  Date 2/28/08	☐ Check here if attachments
SECTION E BUILDING ELE	VATION NECKWATION (SURVE	Y NOT REQUIRED) FOR 2	ONE AO AND ZONE A (WITHOUT BFE)
and C. For Items E1-E4, use natural g E1. Provide elevation information for grade (HAG) and the lowest adja a) Top of bottom floor (including	grade, if available. Check the measure the following and check the appropriation scent grade (LAG). basement, crawl space, or enclosure)	ement used. In Puerto Rico on te boxes to show whether the is feet	elevation is above or below the highest adjacent  meters  above or below the HAG.
<ul> <li>E2. For Building Diagrams 6-8 with p (elevation C2.b in the diagrams)</li> <li>E3. Attached garage (top of slab) is</li> <li>E4. Top of platform of machinery and</li> <li>E5. Zone AO only: If no flood depth is</li> </ul>	ermanent flood openings provided in S of the building is   fe feet   meters d/or equipment servicing the building is	Section A Items 8 and/or 9 (see let	AG. eters □ above or □ below the HAG. nce with the community's floodplain management
	F - PROPERTY OWNER (OR OV		
The property owner or owner's authorize or Zone AO must sign here. <i>The stater</i> Property Owner's or Owner's Authorize	ments in Sections A, B, and E are corr	tions A, B, and E for Zone A (vect to the best of my knowledge	vithout a FEMA-issued or community-issued BFE) e.
Address	- Topicsonative o Name	City	State ZIP Code
Security section of the Section Sectio		Date	Telephone
Signature		Date	Tolophone
Comments			2
			☐ Check here if attachment
	SECTION G - COMMUNITY		
and G of this Elevation Certificate. Comp	plete the applicable item(s) and sign be	elow. Check the measuremen	
G1. The information in Section C w is authorized by law to certify e	as taken from other documentation the elevation information. (Indicate the sou	at has been signed and sealed arce and date of the elevation o	by a licensed surveyor, engineer, or architect who lata in the Comments area below.)
1. Communication (Communication Communication Communicatio			or community-issued BFE) or Zone AO.
G3.  The following information (Item	s G4G9.) is provided for community		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certific	ate Of Compliance/Occupancy Issued
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (incl G9. BFE or (in Zone AO) depth of flooding	uding basement) of the building:	stantial Improvement	
Local Official's Name	alantino	Title Constall	teon official
Signature	margate	Dates /	10
Comments		1/20/0	1
		,	

## Building Photographs See Instructions for Item A6.

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7815 ATLANTIC AVENUE - UNIT R3	Policy Number
City MARGATE State NJ ZIP Code 08402	Company NAIC Number
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs with: date taken; "Front View" and "Rear View" and	

Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.

SEE ATTACHED PHOTOS





