U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

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 INSU	RANCE COMPANY USE
A1. Building Owner's Name Mariners Marina, Inc.					Policy Nun	nber:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.					Company	NAIC Number:	
	451 East Bay Avenue						
City Barnegat				State New Je	roov	ZIP Code	
	cription (Lot a	and Block Numbers, T	ax Parce			08005	
Tax Lot 12 Block 2	202, Barnega	at Township, Ocean Co	ounty, Ne	ew Jersey	-yai bescription, e		
		ntial, Non-Residential,		n, Accessory,	etc.) Restaura	nt Building	
A5. Latitude/Long	itude: Lat. 3	39-44'-50.7"	Long. 7	'4-11'-41.1"	Horizonta	al Datum: NAD	1927 × NAD 1983
A6. Attach at leas	t 2 photograp	phs of the building if th	e Certific	cate is being			Investoal
A7. Building Diagr							
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of craw	rispace or enclosure(s))		0.00 sq ft		
b) Number of	permanent fl	ood openings in the cr	rawlspac	e or enclosur		t above adjacent or	ade 0
		penings in A8.b				r and re dejacon gn	300 0
d) Engineered							
A9. For a building v			10				
		ned garage		0.00 sa fi	+		
		ood openings in the at	tached g			acent grade 0	
		penings in A9.b	100	0.00 sq	in		
d) Engineered	flood openin	igs? Yes N	No				
	SF	ECTION B - FLOOD I	INCIIDA	NCE DATE	SEAD (FIDER) INC	ODIN TON	
B1. NFIP Communi	ity Name & C	Community Number	INSURA			ORMATION	l no. o
	B1. NFIP Community Name & Community Number B2. County Name B3. State Ocean New Jersey						B3. State New Jersey
B4. Map/Panel	PA Mon/Denal DS O ff De Timus de la						
Number	DO. OUTIA	Date	Effe	M Panel ective/	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) Base Flood Depth)
34029C0502	F	09-29-2006	09-29-2	rised Date 2006	AE	6	, ,
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 X No							
Designation Date:							
2.3.3	CBRS OPA						

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PORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, a 451 East Bay Avenue	Policy Number:			
City Barnegat	State New Jersey	ZIP Code 08005	Company NAIC Number	
SECTION C - BUILDING	G ELEVATION INFOR	MATION (SURVEY R	EQUIRED)	
C1. Building elevations are based on: Const *A new Elevation Certificate will be required where the Elevations – Zones A1–A30, AE, AH, A (with Elevations – Zones A1–A30, AE, AH, A (with Elevations – Zones A1–A30, AE, AH, A (with Elevations elevation development of the Indicate elevation datum used for the elevation development of the Elevation development of the Indicate elevation development of the Indicate elevation elevatio	rruction Drawings* Interpretation of the base of the b	Building Under Constribution is complete. with BFE), AR, AR/A, AR fied in Item A7. In Puer itum: NAVD88 below.	Check the measurement used. 13.0 feet meters N/A feet meters	
f) Lowest adjacent (finished) grade next to but			3.1 X feet meters	
g) Highest adjacent (finished) grade next to bu	_ · ·		3.6 X feet meters	
Lowest adjacent grade at lowest elevation of structural support	f deck or stairs, includin	9	3.1 X feet meters	
SECTION D - SURVEY	OR, ENGINEER, OR	ARCHITECT CERTIF	ICATION	
This certification is to be signed and sealed by a lan I certify that the information on this Certificate repre- statement may be punishable by fine or imprisonme. Were latitude and longitude in Section A provided by	nt under 18 U.S. Code,	interpret the data availa Section 1001.	law to certify elevation information. ble. I understand that any false Check here if attachments.	
Certifier's Name John P. Augustine	License Number PLS 34838			
Title Land Surveyor Company Name Gravatt Consulting Group, Inc. (Project No. 5701.1) Address 414 Lacey Road City Forked River	State	ZIP Code	Al fort	
	New Jersey	08731	9	
Signature Polyute	Date 05-14-2020	Telephone (609) 693-6126	Ext. 100	
Copy all pages of this Elevation Certificate and all attack	chments for (1) communit	ty official, (2) insurance a	agent/company, and (3) building owner.	
Comments (including type of equipment and location This certificate certified to the owners in line A1 only per preliminary map 34029C0502G, published 1/30/FEMA. Utilities: A/C unit el.=12.0 all other utilities about the comment of	and is non-transferrable	. Property is located in	anly & subject to verification by	

ELEVATION CERTIFICATE

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Ru	ORTANT: In these spaces, copy the corresponding Street Address (including Street Address (including Address Ad	onding information	n from Section	on A.	FOR INSURA	NCE COMPANY USE
45	ilding Street Address (including Apt., Unit, Suite, 1 East Bay Avenue	and/or Bldg. No.)	or P.O. Route	and Box No.	Policy Number	,
Cit	rnegat	State	ZIP Co	de	Company NAI	Number
-		New Jersey	08005			
L	SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)					
For cor ent	Zones AO and A (without BFE), complete Items nplete Sections A, B,and C. For Items E1–E4, user meters.	E1–E5. If the Cerse natural grade, if	tificate is inter available. Ch	ded to support a ck the measure	a LOMA or LOMP ment used. In Pr	R-F request, uerto Rico only,
E1.	E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement					
	crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is			feet meter	Page 1	below the HAG.
	•			feet meter		below the LAG.
E2.	For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in the diagrams) of the building is	d openings provide	ed in Section /	-		
E3	Attached garage (top of slab) is	-		feet meter		below the HAG.
	Top of platform of machinery and/or equipment			feet meter	s above or	below the HAG.
	servicing the building is			feet meter		below the HAG.
E5.	Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	able, is the top of t	the bottom floo nown. The loo	r elevated in accal	cordance with the certify this inform	e community's ation in Section G.
	SECTION F - PROPERTY O	WNER (OR OWN	ER'S REPRES	SENTATIVE) CE	RTIFICATION	
The	property owner or owner's authorized representa munity-issued BFE) or Zone AO must sign here.	ative who complete The statements in	es Sections A, n Sections A, I	B, and E for Zo 3, and E are con	ne A (without a F	EMA-issued or f my knowledge.
Prop	perty Owner or Owner's Authorized Representati	ve's Name				-
Add	ress		City	Sta	ate	ZIP Code
Sigr	ature		Date	Tel	ephone	
Com	ments					
					Check he	ere if attachments.

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Buildi	RIANT: In these spaces, copy the cor	responding information	on from Section A.	F	OR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 451 East Bay Avenue City State 718 Code				olicy Number:			
Barne	egat	State New Jersey	ZIP Code	C	ompany NAIC Number		
-	New Jersey 08005 SECTION G - COMMUNITY INFORMATION (OPTIONAL)						
The lo							
Section used in	ocal official who is authorized by law or o ons A, B, C (or E), and G of this Elevation in Items G8–G10. In Puerto Rico only, e	ordinance to administer to administer to administer to a complete of the compl	the community's floodpl the applicable item(s) a	lain manag and sign be	gement ordinance can complete blow. Check the measurement		
G1. [The information in Section C was tal engineer, or architect who is authorized data in the Comments area below.)	ken from other documer zed by law to certify ele	ntation that has been si vation information. (Indi	igned and s licate the se	sealed by a licensed surveyor, ource and date of the elevation		
G2. [A community official completed Sector Zone AO.	tion E for a building loca	ted in Zone A (without	a FEMA-is	sued or community-issued BFE)		
G3. [The following information (Items G4-	-G10) is provided for co	mmunity floodplain mai	nagement	purposes.		
G4. P	ermit Number	G5. Date Permit Issu	ed	G6. Date	Certificate of		
				Com	pliance/Occupancy Issued		
	his permit has been issued for:		Substantial Improvement	ent			
G8. E	Elevation of as-built lowest floor (including fithe building:	g basement)		feet	meters Datum		
	BFE or (in Zone AO) depth of flooding at	the building site:		feet [meters Datum		
	Community's design flood elevation: Official's Name	; 		feet	meters Datum		
Local C	Aliciai s Name		Title				
Commi	unity Name		Telephone				
Signatu	ire		Date				
Comme	ents (including type of equipment and loc	cation, per C2(e), if appli	icable)				
			,				
					I.		
					1		
					Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

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.				
451 East Bay Avenue				
State	ZIP Code	Company NAIC Number		
New Jersey	08005			
	, Unit, Suite, and/or Bldg. No.) or State	, Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State ZIP Code		

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.

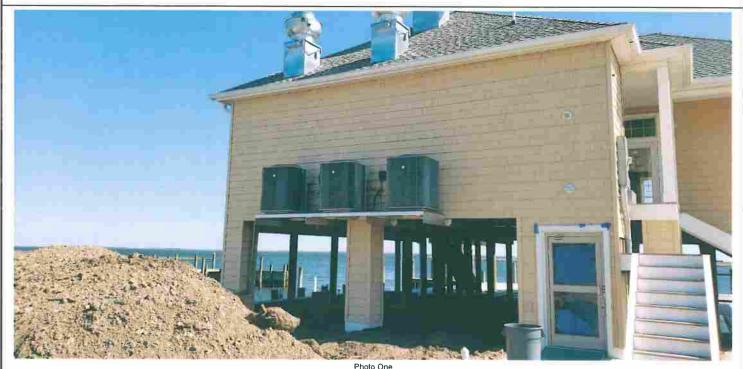


Photo One

Photo One Caption **FRONT VIEW - 3/4/20**

Clear Photo One



Photo Two Caption **REAR VIEW - 3/4/20**

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 451 East Bay Avenue	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Barnegat	New Jersey	08005	

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.

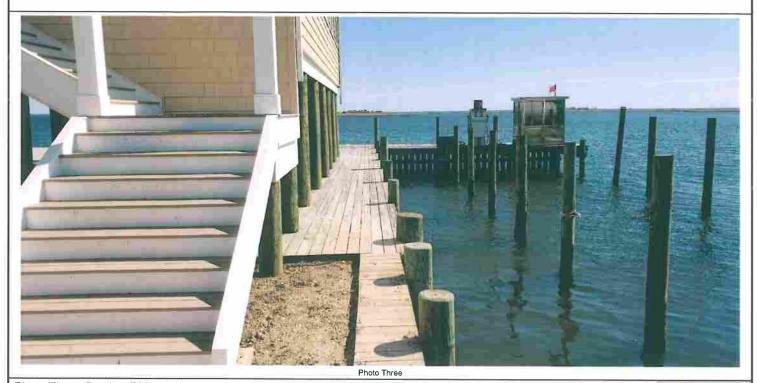


Photo Three Caption RIGHT SIDE VIEW - 3/4/20

Clear Photo Three

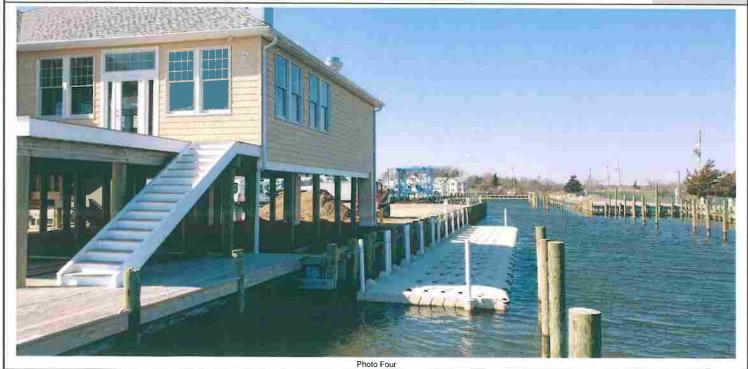


Photo Four Caption LEFT SIDE VIEW - 3/4/20

Clear Photo Four