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

0MB 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.

opy an pages of the ziot.	SECTIO	N A - PROPERTY IN	FORM	IATION	F	OR INSURA	ANCE COMPANY USE
A1. Building Owner's Name IAN CASEY and MAEVE MILLIGAN						olicy Numb	er:
Box No.	A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 38 GULPH MILL ROAD Company NAIC Number:						
City	State 7IP Code						
SOMERS POINT				New Jersey		8244	
A3. Property Description		Block Numbers, Tax I	Parcel	Number, Legal Des	cription, etc.)		Address of the second
A4. Building Use (e.g.,	Residentia	al, Non-Residential, Ad	dition,	Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longitude:	Lat. 39	19.1220 Lo	ong. <u>74</u>	37.081	Horizontal Datum:	☐ NAD 19	927 NAD 1983
A6. Attach at least 2 ph							
A7. Building Diagram N					÷		
A8. For a building with	a crawlspa	ace or enclosure(s):					
a) Square footage	of crawlsp	pace or enclosure(s)		613 sq ft			
b) Number of perm	nanent floo	d openings in the crav	vispace	e or enclosure(s) wit	thin 1.0 foot above a	idjacent gra	de 0
c) Total net area o	f flood ope	nings in A8.b 0	S	q in			
d) Engineered floo	d opening	s? 🗌 Yes 🗵 No					
A9. For a building with	an attache	ed garage:					
_		ed garage 372	:	sa ft			
		od openings in the atta			ot above adjacent gr	ade	0
							
		enings in A9.b (sqin			s#i
d) Engineered floo	od opening	s? Tyes X No)				(5
	SEC	TION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Community N SOMERS POINT / 340	lame & Co			B2. County Name ATLANTIC			B3. State New Jersey
B4. Map/Panel B Number	5. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/ evised Date	B8. Flood Zone(s)	(Zoi	se Flood Elevation(s) ne AO, use Base od Depth)
340017 / 0001 B		11/17/1982		7/1982	A5	9	
B10. Indicate the sour		Base Flood Elevation (I			epth entered in Item	B9:	
B11. Indicate elevatio	n datum us	sed for BFE in Item B9	: 🛛 N	IGVD 1929 🔲 NA	AVD 1988 Oth	ner/Source:	Manufath and the second and the seco
B12. Is the building lo	cated in a	Coastal Barrier Resou	ırces S	ystem (CBRS) area	or Otherwise Prote	cted Area (OPA)? 🗌 Yes 🗵 No
Designation Dat				☐ OPA			
203131101111111111111111111111111111111			•				

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE CO				
Building Street Address (including Apt., Unit, Suite, and/or 38 GULPH MILL ROAD	Policy Number:			
City Sta	te ZIP (Code	Company NAIC Number	
	w Jersey 0824	4		
SECTION C BUILDING EL	EVATION INFORMAT	ION (SURVEY RE	EQUIRED)	
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when constructions.	• -	ling Under Constru	ction* 🔀 Finished Construction	
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE),			AE. AR/A1-A30, AR/AH, AR/AO.	
Complete Items C2.a–h below according to the buil Benchmark Utilized: RM # 2	ding diagram specified in Vertical Datum:	i Item A7. In Puert	o Rico only, enter meters.	
Indicate elevation datum used for the elevations in i		<i>i</i> .		
Datum used for building elevations must be the sam		FE.		
	1 0 >	7. 0	Check the measurement used.	
 a) Top of bottom floor (including basement, crawlsp 	pace, or enclosure floor)	15 5		
b) Top of the next higher floor			X feet meters	
 c) Bottom of the lowest horizontal structural members 	er (V Zones only)	N/A	X feet meters	
d) Attached garage (top of slab)		7.0	x feet meters	
 e) Lowest elevation of machinery or equipment ser (Describe type of equipment and location in Con 	vicing the building nments)	7. 2	X feet meters	
f) Lowest adjacent (finished) grade next to building	g (LAG)	6.8	X feet meters	
g) Highest adjacent (finished) grade next to building	g (HAG)	8. 8	X feet	
 h) Lowest adjacent grade at lowest elevation of des structural support 	ck or stairs, including	6.8	✓ feet ☐ meters	
SECTION D - SURVEYOR	, ENGINEER, OR ARC	HITECT CERTIF	ICATION	
This certification is to be signed and sealed by a land su I certify that the information on this Certificate represent statement may be punishable by fine or imprisonment up	rveyor, engineer, or arch	nitect authorized by	law to certify elevation information.	
Were latitude and longitude in Section A provided by a li			Check here if attachments.	
Certifier's Name	License Number GS34853			
STEVEN GLASSER PLS	G334033		/ //	
Title PRESIDENT				
Company Name PRICE GLASSER ASSOCIATES INC.			99966 3691 1865 VS	
Address 331 TILTON ROAD			22 8 20	
City NORTHFIELD	State New Jersey	ZIP Code 08225	Place See 185 7018	
Signature	Date 09/28/2018	Telephone (609) 646-8757		
Copy all pages of this Elevation Certificate and all attachm	ents for (1) community of	ficial, (2) insurance	agent/company, and (3) building owner.	
Comments (including type of equipment and location, per A8a AND A9a ARE THE SAME "ENCLOSURE" BUT AND C2e IS AC CONDENSOR OUTSIDE DWELLING C2b IS MAIN LIVING AREA IS AT ELEVATION 15.5 THERE IS A SMALL FOYER LANDING (25 SQ FT +/-) ATHIS PROPERTY HAS BEEN DESIGNATED TO BE IN NO. 34001CO428G. BASED ON NAVD 1988 DATUM	N AREA IS WALLED OF	TWEEN THE TWO	D LEVELS AT FRONT DOOR	

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE				
SOMERS POINT N	ew Jersey 082		Company NAIC Number		
SECTION E - BUILDING ELE FOR ZONE	VATION INFORMATION AO AND ZONE A (WI	N (SURVEY NOT THOUT BFE)	REQUIRED)		
For Zones AO and A (without BFE), complete Items E1–complete Sections A, B,and C. For Items E1–E4, use na enter meters.	E5. If the Certificate is in tural grade, if available.	itended to support a Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,		
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	,	☐ feet ☐ meter	rs 🔲 above or 🔲 below the HAG.		
 Top of bottom floor (including basement, crawlspace, or enclosure) is 		☐ feet ☐ mete			
E2. For Building Diagrams 6-9 with permanent flood op	enings provided in Secti	on A Items 8 and/or	9 (see pages 1–2 of Instructions),		
the next higher floor (elevation C2.b in the diagrams) of the building is		☐ feet ☐ mete	rs 🔲 above or 🔲 below the HAG.		
E3. Attached garage (top of slab) is		☐ feet ☐ mete	rs above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		☐ feet ☐ mete	rs above or below the HAG.		
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	, is the top of the bottom No Unknown. Th	floor elevated in ac e local official must	cordance with the community's certify this information in Section G.		
SECTION F - PROPERTY OWN	ER (OR OWNER'S REP	RESENTATIVE) C	ERTIFICATION		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	e who completes Section e statements in Sections	ns A, B, and E for Zo A, B, and E are co	one A (without a FEMA-issued or rrect to the best of my knowledge.		
Property Owner or Owner's Authorized Representative's	Name				
Address	City	Si	tate ZIP Code		
Signature	Date	Te	elephone		
Comments					
	Tip.				
			æ		
is .			•		
			Check here if attachments.		

IMPORTANT: In these spaces, copy the corre	MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: 38 GULPH MILL ROAD							
City SOMERS POINT	State ZIP Co New Jersey 08244		Company NAIC Number				
SECTIO	N G - COMMUNITY INFORMATIO	N (OPTIONAL)					
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.							
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 Section or Zone AO.	on E for a building located in Zone A	(without a FEM/	A-issued or community-issued BFE)				
G3. The following information (Items G4-	G10) is provided for community floo	dplain managem	ent purposes.				
G4. Permit Number	G5. Date Permit Issued	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:	j basement)	[eet	meters Datum				
G9. BFE or (in Zone AO) depth of flooding at	he building site:	feet	meters Datum				
G10. Community's design flood elevation:		feet	meters Datum				
Local Official's Name	Title						
Community Name	Telephone						
Signature	Date						
Comments (including type of equipment and loc	cation, per C2(e), if applicable)						
•							
'							
_			Check here if attachments.				

ELEVATION CERTIFICATE

See Instructions for Item A6.

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

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 38 GULPH MILL ROAD			Policy Number:
City	State	ZIP Code	Company NAIC Number
SOMERS POINT	New Jersey	08244	

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.

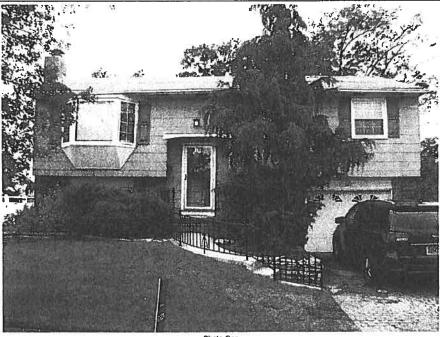


Photo One

Photo One Caption

FRONT VIEW 11.30.2017

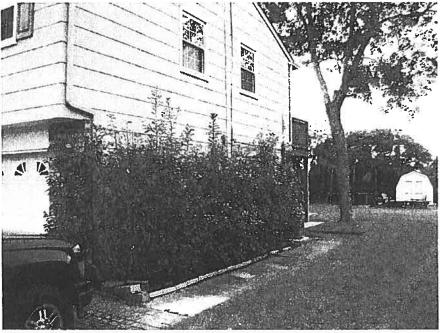


Photo Two

Photo Two Caption

RIGHT SIDE VIEW 11.30.2017

ELEVATION CERTIFICATE

Continuation Page

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

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt 38 GULPH MILL ROAD	Policy Number:		
City SOMERS POINT	State New Jersey	ZIP Code 08244	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.

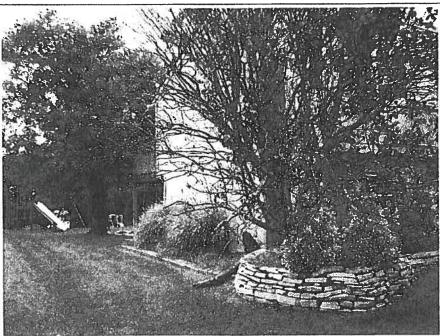


Photo One

Photo One Caption

LEFT SIDE VIEW 11.30.2017



Photo Two

Photo Two Caption

REAR VIEW 11.30.2017

'Ü.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					ANCE COMPANY USE		
A1. Building Owner's Name			F	Policy Numb	er:		
IAN CASEY and MAEVE MILLIO	IAN CASEY and MAEVE MILLIGAN						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 38 GULPH MILL ROAD							
	•	State		IP Code	-		
City SOMERS POINT		New Jersey		8244			
A3. Property Description (Lot a	nd Block Numbers, Tax Par	cel Number, Legal Des	scription, etc.)				
BLOCK 1937 LOT 29							
A4. Building Use (e.g., Resider	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL						
A5. Latitude/Longitude: Lat. 3	9 19.1220 Long	74 37.081	Horizontal Datum:	☐ NAD 1	927 🔲 NAD 1983		
A6. Attach at least 2 photograp	hs of the building if the Cert	ificate is being used to	obtain flood insurar	nce.			
A7. Building Diagram Number	7		₹.				
A8. For a building with a crawls	pace or enclosure(s):						
	space or enclosure(s)				25.7		
b) Number of permanent fl	ood openings in the crawlsp	ace or enclosure(s) wi	thin 1.0 foot above	adjacent gra	nde 0		
c) Total net area of flood o	penings in A8.b 0	_sq in					
d) Engineered flood openir	ngs? 🗌 Yes 🗵 No						
A9. For a building with an attac	hed garage:						
-	hed garage 372	sq ft					
	ood openings in the attache		ot above adjacent gi	ade	0		
	penings in A9.b 0		, ,				
					Ÿ		
d) Engineered flood openi	igs? [] res [A 140						
S	ECTION B - FLOOD INSU	RANCE RATE MAP	(FIRM) INFORMA	rion .			
B1. NFIP Community Name &	Community Number	B2. County Name			B3. State		
SOMERS POINT / 340017		ATLANTIC			New Jersey		
B4. Map/Panel B5. Suffix Number	B6. FIRM Index B7	7. FIRM Panel Effective/	B8. Flood Zone(s)	1 100	e Flood Elevation(s) ne AO, use Base		
340017 / 0001 B		Revised Date /17/1982	A5	9 Floo	od Depth)		
34001770001	1,11,11002						
B10. Indicate the source of the	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 NA	AVD 1988 🔲 Oth	ner/Source:			
B12. Is the building located in	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes X No						
Designation Date:		RS OPA					

MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Suite, and/or 38 GULPH MILL ROAD	Policy Number:				
City Sta	te ZIP (ode	Company NAIC Number		
J.,	w Jersey 0824				
SECTION C – BUILDING EL	EVATION INFORMAT	ON (SURVEY RE	EQUIRED)		
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when one		ling Under Constru g is complete.	uction*		
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the buil	VE, V1–V30, V (with BF ding diagram specified in	E), AR, AR/A, AR/ Item A7. In Puert	AE, AR/A1-A30, AR/AH, AR/AO. o Rico only, enter meters.		
Benchmark Utilized: RM # 2	Vertical Datum:	1929			
Indicate elevation datum used for the elevations in i NGVD 1929 NAVD 1988 Other/		/.			
Datum used for building elevations must be the same	e as that used for the B	FE.	Check the measurement used.		
a) Top of bottom floor (including basement, crawls	pace, or enclosure floor)		X feet meters		
b) Top of the next higher floor		15. 5	X feet meters		
c) Bottom of the lowest horizontal structural member	er (V Zones only)	N/A 7. 0	X feet meters meters		
d) Attached garage (top of slab)e) Lowest elevation of machinery or equipment ser	vicina the buildina	7. 2	X feet meters		
(Describe type of equipment and location in Con	nments)				
f) Lowest adjacent (finished) grade next to building		6. 8 8. 8	X feet meters		
g) Highest adjacent (finished) grade next to buildinh) Lowest adjacent grade at lowest elevation of de		6, 8	X feet meters		
structural support					
SECTION D - SURVEYOR					
This certification is to be signed and sealed by a land su I certify that the information on this Certificate represent statement may be punishable by fine or imprisonment up	s my best efforts to interp nder 18 U.S. Code, Sect	oret the data avalla ion 1001.	/ law to certify elevation information. able. I understand that any false		
Were latitude and longitude in Section A provided by a li	censed land surveyor?	⊠Yes □No	Check here if attachments.		
Certifier's Name STEVEN GLASSER PLS	License Number GS34853				
Title PRESIDENT			1/1/1		
Company Name PRICE GLASSER ASSOCIATES INC.	ne en e		P466		
Address 331 TILTON ROAD			Place (95 3) (8 (73 20		
City NORTHFIELD	State New Jersey	ZIP Code 08225	- Coan		
Signature	Date 09/28/2018	Telephone (609) 646-8757			
Copy all pages of this Elevation Certificate and all attachm		ficial, (2) insurance	agent/company, and (3) building owner.		
Comments (including type of equipment and location, per A8a AND A9a ARE THE SAME "ENCLOSURE" BUT AND C2e IS AC CONDENSOR OUTSIDE DWELLING C2b IS MAIN LIVING AREA IS AT ELEVATION 15.5 THERE IS A SMALL FOYER LANDING (25 SQ FT +/-) ATHIS PROPERTY HAS BEEN DESIGNATED TO BE IN NO. 34001CO428G. BASED ON NAVD 1988 DATUM	N AREA IS WALLED OF	TWEEN THE TWO	O LEVELS AT FRONT DOOR		

IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURA	NCE COMPANY USE
	ing Street Address (including Apt., Unit, Suite, a ULPH MILL ROAD	nd/or Bldg. No.)	or P.O. Rou	te and Box No.	Policy Number	
City SOM	ERS POINT	State New Jersey	ZIP 0824	Code 14	Company NA	IC Number
	SECTION E – BUILDING E FOR ZO	LEVATION INF NE AO AND ZO	ORMATIO NE A (WIT	N (SURVEY NO HOUT BFE)	OT REQUIRED)	
comp	Cones AO and A (without BFE), complete Items & plete Sections A, B, and C. For Items E1-E4, use meters.	E1–E5. If the Cer natural grade, if	tificate is int available. (tended to suppor Check the measu	rt a LOMA or LON urement used. In I	IR-F request, Puerto Rico only,
	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			☐ feet ☐ me	eters above	or Delow the HAG.
	 Top of bottom floor (including basement, crawlspace, or enclosure) is 	*		☐ feet ☐ me	eters 🔲 above	or Delow the LAG.
	For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in	openings provid	led in Section	on A Items 8 and	or 9 (see pages	1–2 of Instructions),
	the diagrams) of the building is	*		feet me	eters above	or below the HAG.
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			☐ feet ☐ me	eters above	or below the HAG.
	Zone AO only: If no flood depth number is availa floodplain management ordinance? Yes	able, is the top of	the bottom nown. The	floor elevated in local official mu	accordance with est certify this info	the community's mation in Section G.
	SECTION F - PROPERTY O	WNER (OR OWN	IER'S REPI	RESENTATIVE)	CERTIFICATION	
The	property owner or owner's authorized representa munity-issued BFE) or Zone AO must sign here.	ative who comple The statements	tes Sections in Sections	s A, B, and E for A, B, and E are	Zone A (without a correct to the best	a FEMA-issued or tof my knowledge.
Prop	erty Owner or Owner's Authorized Representative	ve's Name				
Addr	ess		City		State	ZIP Code
Sign	ature		Date		Telephone	
Com	ments					
					#	
T.						,
					*	
				•		
					Check	here if attachments.

MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE						
Building Street Address (including Apt., Unit, State of Street Address) 38 GULPH MILL ROAD	Policy Number:					
City SOMERS POINT		IP Code 8244	Company NAIC Number			
SECTION	ON G - COMMUNITY INFORM	ATION (OPTIONAL)				
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.						
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation					
G2. A community official completed Section Zone AO.	on E for a building located in Z	one A (without a FEM/	A-issued or community-issued BFE)			
G3. The following information (Items G4-	G10) is provided for community	y floodplain managem	ent purposes.			
G4. Permit Number	G5. Date Permit Issued	G6. [Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for.	New Construction Substa	ntial Improvement				
G8. Elevation of as-built lowest floor (including of the building:	g basement)	feet	meters Datum			
G9. BFE or (in Zone AO) depth of flooding at	the building site:	feet	meters Datum			
G10. Community's design flood elevation:		feet	meters Datum			
Local Official's Name	Title					
Community Name	Telepl	hone				
Signature	Date					
Comments (including type of equipment and lo	cation, per C2(e), if applicable)					
			Check here if attachments.			

ELEVATION CERTIFICATE

See Instructions for Item A6.

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

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 38 GULPH MILL ROAD	Policy Number:		
City SOMERS POINT	State New Jersey	ZIP Code 08244	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.

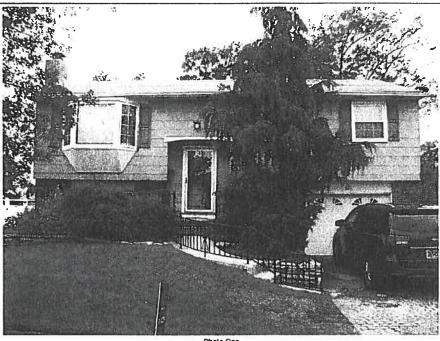


Photo One

Photo One Caption

FRONT VIEW 11.30.2017



Photo Two

Photo Two Caption

RIGHT SIDE VIEW 11.30.2017

ELEVATION CERTIFICATE

Continuation Page

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

IMPORTANT: In these spaces, cop	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 38 GULPH MILL ROAD			Policy Number:
City	State	ZIP Code	Company NAIC Number
SOMERS POINT	New Jersey	08244	

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.

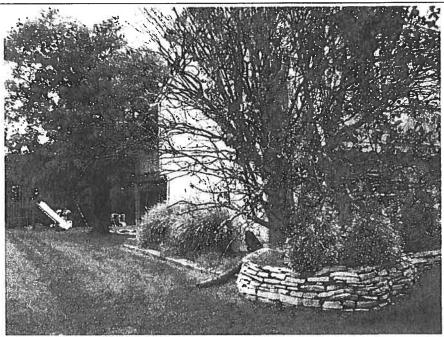


Photo One

Photo One Caption

LEFT SIDE VIEW 11.30.2017



Photo Two

Photo Two Caption

REAR VIEW 11.30.2017