S. DEPARTMENT OF HOMELAND SECURITY EDERAL EMERGENCY MANAGEMENT AGENCY attonal Flood Insuranta Program

ELEVATION CERTIFICATE

88/5.01

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

SECTION	A - PROPERTY INFORM	MATION	Thorain Surfange Company Osien			
A1. Building Owner's Name Janet Schmidt	Followskie de de la company de					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. 216 N. 33 rd Ave.						
City BOROUGH OF LONGPORT .	State NJ ZIP Code	08403 (Δ	C Tolall			
A3. Property Description (Lot and Block Numbers, Tax Parcel Numbers, BLOCK 88 LOT 5.01	er, Legal Description, etc.)		C 103-51()			
 A4. Building Use (e.g., Residential, Non-Residential, Addition, Acces A5. Latitude/Longitude: Lat. N 39.3214 Long. W 074.5234 Horizont A6. Attach at least 2 photographs of the building if the Certificate is b A7. Building Diagram Number 8 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0 c) Total net area of flood openings in A8.b d) Engineered flood openings? Yes No 	al Datum: NAD 1927 seing used to obtain flood insu A9. For a sq ft a) So b) No wi sq in c) To d) Ei	building with an attac quare footage of attac umber of permanent thin 1.0 foot above a otal net area of flood ngineered flood open	ched garage N/A sq ft flood openings in the attached garage djacent grade N/A openings in A9.b N/A sq in ings? Yes No			
	County Name ANTIC COUNTY	and the second s	B3. State NJ			
B4. Map/Panel Number B5, Suffix B6. FIRM Index Date 345302/ 0001 B No Index Printed	B7. FIRM Panel Effective/Revised Date 08/15/1983	B8. Flood Zone(s) A8	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)			
310. 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:						
311. Indicate elevation datum used for BFE in Item B9: NGVD 192		Other/Source:				
312. Is the building located in a Coastal Barrier Resources System (CE Designation Date:	CBRS OPA	ected Area (OPA)?	☐ Yes			
			-			
SECTION C – BUILDING ELEV	ATION INFORMATION (SURVEY REQUIR	ED)			
21. Building elevations are based on: Construction Drawings		r Construction*				
*A new Elevation Certificate will be required when construction of the building is complete. 22. 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–h						
below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.						
	tical Datum: NGVD 1929	_				
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 BFE. Check the measurement used.						
a) Top of bottom floor (including basement, crawlspace, or enclosur	re floor) 6.1		⊠ feet			
b) Top of the next higher floor	<u>10.1</u>	·	⊠ feet ☐ meters			
c) Bottom of the lowest horizontal structural member (V Zones only			⊠ feet			
d) Attached garage (top of slab)	<u>N/A</u> .	_ [☑ feet ☐ meters			
e) Lowest elevation of machinery or equipment servicing the buildin	g <u>****</u> .					
(Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG)	6.1	,	7 fact			
g) Highest adjacent (finished) grade next to building (HAG)	<u>6.1</u> <u>6.5</u>		☑ feet ☐ meters ☑ feet ☐ meters			
h) Lowest adjacent grade at lowest elevation of deck or stairs, include			I feet ☐ meters			
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION						
This certification is to be signed and sealed by a land surveyor, engines information. I certify that the information on this Certificate represents m I understand that any false statement may be punishable by fine or imp	ny best efforts to interpret the	data available.	n			
	latitude and longitude in Sec		DI ACE			
The state of the s	ed land surveyor? 🛛 🛛 Ye		PLACE SEAL			
Certifier's Name Paul H. Koelling, PLS		110.100.001	HERE			
Title Licensed Land Surveyor . Company Name Paul H. Koelling & Associates, LLC						
Title Licensed Land Surveyor . Company Name Paul H.	License Number N Koelling & Associates, LLC	J24GS 02177100	-			
Address 2161 Shore Road City Linwood	Koelling & Associates, LLC	Gode 08221				
	Koelling & Associates, LLC State NJ ZIP C					

FEFAUIOIS OFICIA IOUIT'S PO			State Control of the				
IMPORTANT: In these spaces, o	ALTERNATION.	SURANCE COMPANY USE					
Building Street Address (including Apt 216 N. 33 rd Ave.	., Unit, Suite, and/or Bldg. No.) or P.O. Route			umber State grant i de bronde			
City BOROUGH OF LONGPORT	State NJ	ZIP Code 08403	Compa	ny NAIC-Number			
	D – SURVEYOR, ENGINEER, OR ARC			JED)			
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.							
Comments *A8b.) Dwelling has 7 air vents (Not F ***C2a.) crawlspace ****C2e.) exterior air unit elevation is	50						
Signature 1	Da	te 1/15/14					
SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZO	NE AO AND	ONE A (WITHOUT BFE)			
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters. 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 meters above or below the HAG. b) Top of bottom floor (including basement, crawlspace, or enclosure) is feet meters above or below the LAG. E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is feet meters above or below the HAG. E3. Attached garage (top of slab) is feet meters above or below the HAG. E4. Top of platform of machinery and/or equipment servicing the building is feet meters above or below the HAG. E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management							
	Unknown. The local official must certify this			TION			
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION							
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.							
Property Owner's or Owner's Authorize	ed Representative's Name						
Address	City		State ·	ZIP Code			
Signature	Date .		Telephone				
Comments			29	Check here if attachments.			
SECTION G - COMMUNITY INFORMATION (OPTIONAL)							
of this Elevation Certificate, Complete the	or ordinance to administer the community's floe applicable item(s) and sign below. Check the r	neasurement used in item	S G0-G10. III F	iello Mico only, enter meters.			
The information in Section C vis authorized by law to certify A community official complete	was taken from other documentation that has lelevation information. (Indicate the source and Section E for a building located in Zone A (vns G4–G10) is provided for community floodp	been signed and sealed b d date of the elevation da without a FEMA-issued or	y a licensed sur ta in the Comme community-issu	veyor, engineer, or architect who ents area below.)			
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificat	e Of Compliance	e/Occupancy Issued			
37. This permit has been issued for:	☐ New Construction ☐ Substantial						
38. Elevation of as-built lowest floor (in							
G9. BFE or (in Zone AO) depth of floor		feet met					
G10. Community's design flood elevation	n						
Local Official's Name		Title		Military (Filtre - Filtre - Fi			
Community Name		Telephone		470			
Signature		Date					
Comments	*		-	☐ Check here if attachments.			

11/1-1--

Building Photographs

See Instructions for Item A6.

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

216 N. 33rd Ave.

City

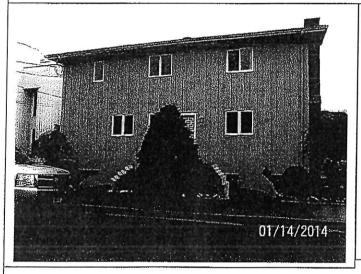
State

ZIP Code
Longport

NJ

08403

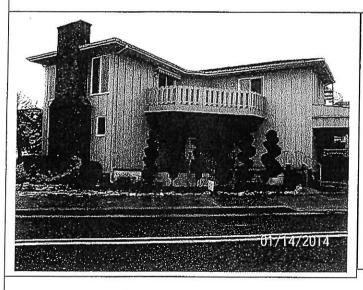
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.





Front View - Date of Photograph: (See Photo Stamp)

Rear View - Date of Photograph: (See Photo Stamp)





Right Side View - Date of Photograph: (See Photo Stamp)

Vent View - Date of Photograph: (See Photo Stamp)