72/2

OMB No. 1660-0008 **LLEVATION CERTIFICATE** U.S. UEPARIMENT OF HOMELAND SECURITY Expires February 28, 2009 Federal Emergency Management Agency Important: Read the instructions on pages 1-8. National Flood Insurance Program SECTION A - PROPERTY INFORMATION For Insurance Company Use: Policy Number A1. Building Owner's Name Gary J. & Alice Bruder Company NAIC Number A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 3105 Pacific Ave. City Longport State NJ ZIP Code08403 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 72 lot 2 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential NAD 1927 X NAD 1983 Horizontal Datum: A5. Latitude/Longitude: Lat. N 39" 19' 00.1" Long. W 074° 31' 18.3" A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number8 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 attached garage 260 sq ft a) Square footage of crawl space or enclosure(s) 1025sq ft b) No. of permanent flood openings in the attached garage b) No. of permanent flood openings in the crawl space or walls within 1.0 foot above adjacent grade enclosure(s) walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A9.b sq in 1000 Total net area of flood openings in A8.b SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION **B2. County Name** B3. State **B1. NFIP Community Name & Community Number** NJ **Borough of Longport** Atlantic 345302 B9, Base Flood Elevation(s) (Zone B8. Flood **B7. FIRM Panel B6. FIRM Index** B4, Map/Panel Number B5. Suffix AO, use base flood depth) Date Effective/Revised Date Zone(s) 8/15/83 A8 10.0 345302 0001 B No Index Printed B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. Other (Describe) FIS Profile **INFIRM** Community Determined Other (Describe) □ NAVD 1988 B11. Indicate elevation datum used for BFE in Item B9: X NGVD 1929 ПҮев B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ⊠No ☐ OPA CBRS Designation Date\_ SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Building Under Construction\* ☐ Construction Drawings\* C1. Building elevations are based on: A new Elevation Certificate will be required when construction of the building is complete. C2. 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 n/eVertical Datum NGVD29 Conversion/Comments Check the measurement used. ☑ feet ☐ meters (Puerto Rico only) Top of bottom floor (including basement, crawl space, or enclosure floor)\_ Z.00 ☑ feet ☐ meters (Puerto Rico only) Top of the next higher floor 11.20 Bottom of the lowest horizontal structural member (V Zones only) ☑ feet ☐ meters (Puerto Rico only) c) n/a. ☑ feet ☐ meters (Puerto Rico only) Attached garage (top of slab) Z.15 Lowest elevation of machinery or equipment servicing the building ☑ feet ☐ meters (Puerto Rico only) 11.00 (Describe type of equipment in Comments) Lowest adjacent (finished) grade (LAG) Z.Q Highest adjacent (finished) grade (HAG) 7.3 ☑ feet ☐ meters (Puerto Rico only) 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. M. Ash. 5- 1 Certifier's Name Paul H. Koelling, PLS License Number NJ 24GS 02177100 1:30 Company Name PAUL H. KOELLING & ASSOCIATES Title Professional Land Surveyor ZIP Code 08221 City Linwood State NJ Address 2161 Shore Road

Signature

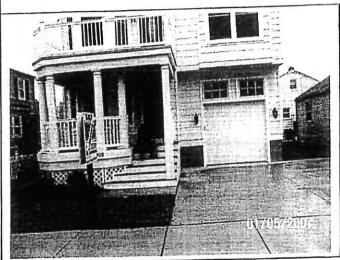
Date 1/08/07

Telephone (609) 927-0279

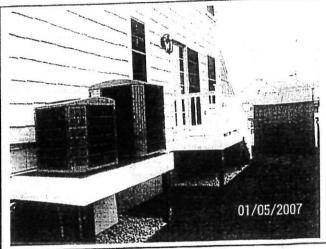
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ADORTANT: In these space	s, copy the corresponding information from Section A	Policy Number
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	403	CONTINUED)
	CALCINEED OR ARCHITECT CER	TIFICATION (CONTINUED)
SEO II	ON D - SURVEYOR, ENGINEER, ON A septificate for (1) community official, (2) insurance agent/company.	, and (3) building owner.
Copy both sides of this Elevation C	Giulicato 101 (1)	
Comments C2e= Air unit elevation		
:		
Signature 1	Date 1/08/07	Check here if attachments
Signature	ELEVATION INFORMATION (SURVEY NOT REQUIRED)	FOR ZONE AO AND ZONE A (WITHOUT ET =)
SECTION E - BUILDING E	LEVATION INFORMATION (Company)	o LOMA or LOMR-F request, complete Sections A, B,
E1. Provide elevation informatio	ELEVATION INFORMATION (SORVE):  ), complete items E1-E5. If the Certificate is intended to support ural grade, if available. Check the measurement used. In Puerto in for the following and check the appropriate boxes to show whet adjacent grade (LAG).  ding basement, crawl space, or enclosure) is	feet meters above or below the HAG.
b) Top of bottom floor (inclu- F2. For Building Diagrams 6-8 v	with permanent flood openings provided in Section A Items 8 and	for 9 (see page 8 of Instructions), the hox inguistress sove or _ below the HAG.
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E3. Attached garage (top of state) E4. Top of platform of machiner	b) is	accordance with the community's floodplain management
E5. Zone AO only: If no flood d	epth number is available, is the top of the bottom floor electrical in No Unknown. The local official must certify this information	In Section G.
ordinance? Li res Li	No El Cimpioni	TATIVE CERTIFICATION
SEC'	TION F - PROPERTY OWNER (OR OWNER'S REPRESE of thorized representative who completes Sections A, B, and E for statements in Sections A, B, and E are correct to the best of my	NIATIVE) CERTIFICATION OF COmmunity-Issued BFE)
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Property Owner's or Owner's Aut	horized Representative's Name	MIS Ondo
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Signature Comments	SECTION G - COMMUNITY INFORMATION	(OPTIONAL)
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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. **Policy Number** 3105 Pacific Ave. Company NAIC Number ZIP Code State 08403 NJ

Longport 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, following.

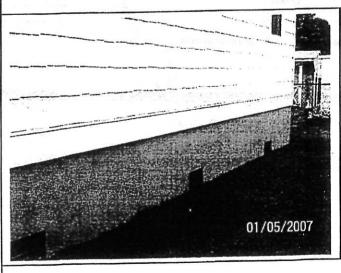


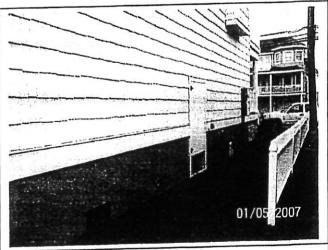
City



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)

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