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

## **ELEVATION CERTIFICATE**

OMB No. 1660-0008 Expires February 28, 2009

Important: Read the instructions on pages 1-8.

A NUMBER						-2		
SECTION A - PROPERTY INFORMATION								e Company Use:
A1. Building Owner's Name JAMES P. & KATHLEEN CULLEN								er .
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3 N. THIRTY-FOURTH AVENUE  City LONGPORT State NJ ZIP Code 08403								IC Number
			<u> </u>			1 100		i es
A3. Property Description (L BLOCK 110 LOT 2	ot and block Numbers	s, Tax Parcel Ni	umber, Legal L	Jescription,	etc.)			¥
A4. Building Use (e.g., Res A5. Latitude/Longitude: Lat A6. Attach at least 2 photog A7. Building Diagram Numb A8. For a building with a cn a) Square footage of c b) No. of permanent fl enclosure(s) walls v c) Total net area of flo	N 39-19-09.8" Long praphs of the building part 8 and space or enclosure arawl space or enclosure od openings in the critish in 1.0 foot above a od openings in A8.b	. W 74-31'-11.7 if the Certificate e(s), provide ire(s) awl space or djacent grade	is being used  830 sq ft  0 sq ii	to obtain fl A9	ood insura  For a bu  a) Squ  b) No.  walls  c) Tota	nice.  silding with an attained are footage of attood footage of attood foot and the foot attood foot at area of flood	ached garage, pro ached garage od openings in the bove adjacent gra d openings in A9.b	512 sq attached garage ade 0
	SECTION	B - FLOOD II	NSURANCE	RATE MA	P (FIRM	) INFORMATIC	N	
B1. NFIP Community Name LONGPORT NJ 345302	& Community Numbe		32. County Na ATLANTIC	me			B3. State NJ	
B4. Map/Panel Number 345302-0001	**500	5. FIRM Index Date 8-15-1983	Effectiv	FIRM Pane re/Revised I I-15-1983	2200	B8. Flood Zone(s) A-8	B9. Base Flo AO, use	ood Elevation(s) (Z base flood depth) 10.0
B10. Indicate the source of the	ne Base Flood Elevation	on (BFE) data o	r base flood d	epth entere	d in Item E	39.	<del></del>	
C1. Building elevations are be *A new Elevation Certifica C2. Elevations – Zones A1-A below according to the be Benchmark Utilized RM-	ased on: Co ate will be required wh 30, AE, AH, A (with BI illding diagram specifi 4 Vertical Datum 192	nstruction Draw en construction FE), VE, V1-V30 ed in Item A7.	rings* of the building	☐ Buildin	g Under C	JRVEY REQUII construction* AR/A1-A30, AR/A	☐ Finished C	
Conversion/Comments 1	<u>IA</u>			No.	Cł	neck the measure	ment used	
a) Top of bottom floor (include	Top of bottom floor (including basement, crawl space, or end					meters (Pue		
<ul><li>b) Top of the next high</li></ul>		9.3 X feet T meters (Puerto Rico only)						
<ul> <li>c) Bottom of the lowest</li> <li>d) Attached garage (to)</li> </ul>	nember (V Zon	es only)	<u>N.A</u>		meters (Pue	TO SEE STATE OF THE PROPERTY O		
e) Lowest elevation of a (Describe type of eq	nt servicing the	building	<u>6.8</u> <u>8.5</u>		☐ meters (Pue ☐ meters (Pue			
	f) Lowest adjacent (finished) grade (LAG)			<u>6.8</u> 7.0		meters (Pue		
	SECTION D	SURVEYOR	ENGINEER	10-20-20		CERTIFICATION		
This certification is to be sign information. I certify that the I understand that any false st	ed and sealed by a lai information on this Ce atement may be punis	nd surveyor, en ertificate represe shable by fine o	gineer, or arch	nitect author	rized by la	w to certify elevat	tion	
Check here if comments							1	PLAC
Certifier's Name GORDON N						SS03353100	T	
Title LAND SURVEYOR		Company Name		POINT SUF	RVEYING	CO. L.L.C.	TIVI	1/1
Address P.O. BOX 299		City SOMERS		State NJ	ZIP Cod	le 08244	I 1/2	por
Signature	Date	5-21-2010	Telephon	e 609-927-	9295		1 1	
She Mr.							The state of the s	
EMA Form 81-31, Februar	y 2006	See	reverse side	e for contir	nuation.		Replaces	all previous editi

IMPORTANT: In these space	es, copy the corresponding informat	ion from Section A.	For Insurance Company Use:
Building Street Address (including 3 N. THIRTY: FOURTH AVENIE	Policy Number		
City LONGPORT State NJ ZIP C	Company NAIC Number		
SECTI	ON D - SURVEYOR, ENGINEER, OR	ARCHITECT CERTIFICATION	(CONTINUED)
	Certificate for (1) community official, (2) insur		
Comments C2-A IS THE CRAWL (FLOOR ELEV. 8.0), THERE ARE		SILL OF THE FRONT ENTRANCE	C2-E IS THE HEATER IN THE UTL. ROOM
Signature	18	Date 5-21-2010	
SECTION E - BUILDING E	LEVATION INFORMATION (SURVEY	NOT PEOUIPED) FOR ZONE	Check here if attachments
and C. For Items E1-E4, use natu E1. Provide elevation informatior grade (HAG) and the lowest a) Top of bottom floor (includ b) Top of bottom floor (includ clevation C2.b in the diagram clevation C3.b in the diagram clevation C3.b in the diagram clevation C4.b in the diagram clevation C4.b in the diagram clevation C5.b in the diagram clevation C6.b in the diagram clevation C7.b in the diagram	ling basement, crawl space, or enclosure) is ling basement, crawl space, or enclosure) is ith permanent flood openings provided in Soms) of the building is feet meters and/or equipment servicing the building is pth number is available, is the top of the bowlood Unknown. The local official must continue to CON F - PROPERTY OWNER (OR OWN provided representative who completes Sectitatements in Sections A, B, and E are corrected.	ment used. In Puerto Rico only, en e boxes to show whether the elevate feet feet feet feet feet feet feet f	Iter meters.  Ition is above or below the highest adjacent ers ☐ above or ☐ below the HAG.  Iters ☐ above or ☐ below the LAG.  Iters ☐ above or ☐ below the LAG.  Iters ☐ above or ☐ below the HAG.  Iters ☐ above or ☐ below the HAG.  Iters ☐ above or ☐ below the HAG.  Iters ☐ above or ☐ below the HAG.
Address		City S	State ZIP Code
			Contraction Contraction Contraction
Signature		Date T	Felephone
Comments	4		
		1	☐ Check here if attachment
	SECTION G - COMMUNITY	INFORMATION (OPTIONAL)	
The local official who is authorized by	y law or ordinance to administer the commu	inity's floodplain management ordii	nance can complete Sections A. B. C (or E).
G1.   The information in Section	Complete the applicable item(s) and sign be C was taken from other documentation tha tify elevation information. (Indicate the sou	t has been signed and sealed by a	licensed surveyor, engineer, or architect who
	leted Section E for a building located in Zor		
	Items G4G9.) is provided for community fl		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate C	Of Compliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ Subs		
	(including basement) of the building:	tantial Improvement	Dietum
G9. BFE or (in Zone AO) depth of flo		feet _ meters (PR) I	
Local Officially Name			
Local Official's Name		Title	
Community Name		Telephone	
Signature .		Date	
Comments			
			☐ Check here if attachment
FEMA Form 81-31, February 200	06		Replaces all previous editions