U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

45/9

OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency
National Flood Insurance Program

Important: Read the instructions on pages 1-8

_	OFOTION A PROPERTY INFORMATION	Fas Incurance Constraint Uses					
	SECTION A - PROPERTY INFORMATION	For Insurance Company Use: Policy Number					
A1.	Building Owner's Name Kirk J. Eldridge	r oney Number					
	uilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. N. Pelham Ave.	Company NAIC Number					
	City Longport State NJ ZIP Code08403						
	Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	which my					
A5. A6. A7. A8	a) Square footage of crawl space or enclosure(s) b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 5 c) Total net area of flood openings in A8.b SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION NFIP Community Name & Community Number Orough of Longport 345302 A. Map/Panel Number B5. Suffix Date A. Map/Panel Number B5. Suffix Date No Index Printed B7. FIRM Panel Effective/Revised Date S1/15/83 B8. Flood Zone(s) A8	ned garage, provide: ned garage <u>n/a</u> sq ft openings in the attached garage idjacent grade <u>n/a</u> penings in A9.b <u>n/a</u> sq in					
dicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date CBRS OPA							
	SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRE						
C2.	 Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. 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/aVertical Datum NGVD29 						
	Conversion/Comments	O B					
	Top of bottom floor (including basement, crawl space, or enclosure floor) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) f) Lowest adjacent (finished) grade (LAG) g) Highest adjacent (finished) grade (HAG) Check the measurem 6.60 12.45 feet	o Rico only)					
-	SECTION D. SURVEYOR ENGINEER OR ARCHITECT CERTIFICATION	N					
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.	PLACE SEAL					
C	r's Name Paul H. Koelling, PLS License Number NJ 24GS 02177100	F. E. Start Start Start					
Title Professional Land Surveyor Company Name PAUL H. KOELLING & ASSOCIATES							
Address 2161 Shore Road City Linwood State NJ ZIP Code 08221							
Sign	nature Date 5-24-2007 Telephone (609) 927-0279						

IMPORTANT: In these spaces,	copy the corresponding information from Section	A. For Insurance	Company Use:			
	., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number				
City Longport StateNJZIP Code 08403	3	Company NAI	C Number			
SECTION	I D - SURVEYOR, ENGINEER, OR ARCHITECT CEI	RTIFICATION (CONTINUED)				
	ficate for (1) community official, (2) insurance agent/compar					
Comments C2e= Air unit elevation is 1		y, and (0) building owner.				
1 11 11 12						

Signature ()	Date 5-24-2007					
1-11			ck here if attachments			
SECTION E - BUILDING ELE	VÁTION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (V	NITHOUT BFE)			
and C. For Items E1-E4, use natural g E1. Provide elevation information for grade (HAG) and the lowest adja		Rico only, enter meters. ther the elevation is above or below the	e highest adjacent			
a) Top of bottom floor (including basement, crawl space, or enclosure) is feet						
 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 ordinance? Yes No Unknown. The local official must certify this information in Section G. 						
SECTION	F - PROPERTY OWNER (OR OWNER'S REPRESE	NTATIVE) CERTIFICATION				
	zed representative who completes Sections A, B, and E for Z		munity-issued BFE)			
	ments in Sections A, B, and E are correct to the best of my I		(
Address	City	State ZIP Code	:			
Signature	Date	Telephone				
Comments						
	SECTION C. COMMUNITY INCODMATION (THE RESIDENCE OF THE PARTY OF T	eck here if attachmen			
The local official who is authorized by law	SECTION G - COMMUNITY INFORMATION (v or ordinance to administer the community's floodplain man	•	tions A. B. C (or F)			
and G of this Elevation Certificate. Comp	plete the applicable item(s) and sign below. Check the mea vas taken from other documentation that has been signed ar	surement used in Items G8. and G9.				
	elevation information. (Indicate the source and date of the e					
	d Section E for a building located in Zone A (without a FEMA		Zone AO.			
	ns G4G9.) is provided for community floodplain manageme					
G4. Permit Number	G5. Date Permit Issued G6. Dat	e Certificate Of Compliance/Occupancy	y Issued			
67. This permit has been issued for:	☐ New Construction ☐ Substantial Improvement					
	uding basement) of the building: feet	meters (PR) Datum				
69. BFE or (in Zone AO) depth of floodin	g at the building site: feet _	meters (PR) Datum				
Local Official's Name	Title					
Community Name	Telephone					
Signature	Date					
Comments		5				
		Che	ck here if attachment			

Poplaces all provious aditions

FFMA Form 81-31 February 2006

Building Photographs

. 10	See Instructions for It		For Insurance Gompany Use:
Building Street Address (inc. 46 N. Pelham Ave.	Building Street Address (including Apt., Unit, Suite, and/or Bldg.) No. or P.O. Route and Box No. 46 N. Pelham Ave.		
City	State NJ	ZIP Code 08403	Company NAIC Number

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.





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)