U.S. DEPARTMENT OF HOMELAND SECURITY טועום ועט. וטסט-טטטא CLEVATION CERTIFICATE Expires February 28, 2009 Federal Emergency Management Agency National Flood Insurance Program Important: Read the instructions on pages 1-8. **SECTION A - PROPERTY INFORMATION** For Insurance Company Use: A1. Building Owner's Name: Stephen F. and Rosemarie A. Whelan Policy Number

	Building Street Addre East Sherman Avenue		, Unit, Suite, and/o	r Bldg. No.) or l	P.O. Route and B	ox No.		Company NAIC Number	
	City: Strathmere	State	NJ	ZIP Code: 08	3248	,			
A3.	Property Description t 13, Block 834	(Lot and Block Nu	ımbers, Tax Parcel	Number, Lega	I Description, etc.)	······		
					·				
	Building Use (e.g., Re								
	Latitude/Longitude: L Attach at least 2 phot				lorizontal Datum:		7 [NAD 1983	
	Building Diagram Nur		nding if the Certific	ate is being use	a to obtain flood	insurance.			
A8.	For a building with a	a crawl space or e	nclosure(s), provide	•	A9. Fo	r a building with	an attach	ed garage, provide:	
	a) Square footageb) No. of permaner			<u>301</u> s	qft a)	Square footage	of attach	ed garage <u>727</u> sq ft	
			above adjacent gra		D) Wa	No. or permane. Ils within 1.0 fool	nt flood o	openings in the attached garage diacent grade 4	
		f flood openings in		See com		Total net area o			
		SECT	TION B - FLOOD	INSURANCI	E RATE MAP (F	IRM) INFORM	IATION		
B1. N	NFIP Community Nam Inship of Upper 34015	e & Community N	umber	B2. County N Cape May	lame		В	3. State	
	Map/Panel Number	B5. Suffix	B6. FIRM Index		. FIRM Panel			NJ	
J-1.		DO. Guilla	Date		ive/Revised Date	B8. Flo Zone(1	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)	
	340159 0014	В			lune 1, 1984	A10	, ,	10.0 and 11.0	
B10.	Indicate the source of								
D11	FIS Profile	FIRM	Community De		Other (Desc				
	Indicate elevation datured in the building located in			NGVD 1929	NAVD 1988		escribe)		
	Designation Date	iii a Cuastai bairi	er Resources Syst		a or Otherwise Pi	otected Area (O	PA)?	∐Yes ⊠No	
					_ OFA				
		SECTION	C - BUILDING	ELEVATION	INFORMATION	I (SURVEY RE	QUIRE	D)	
	uilding elevations are		Construction Dr	awings*	Building Ur	der Construction	1*	☐ Finished Construction	
	new Elevation Certifications – Zones A1-					AE AB/A1 A30	A D / A LJ	AR/AO. Complete Items C2.a-g	
De	slow according to the t	ouliding diagram s	pecified in Item A7		- <i>)</i> , AIV, AIVA, AIV	AE, ANA 1-A30,	AIVAII,	ARVAO. Complete items C2.a-g	
	enchmark Utilized N.								
	onversion/Comments								
a) To	p of bottom floor (incli		rawl space, or enc	osure floor)_	8 4	🛛 feet 📗	meters	(Puerto Rico only)	
b)	b) Top of the next higher floor				<u>17. 7</u>	⊠ feet [] meters	(Puerto Rico only)	
C)	Bottom of the lowes	nes only)	_N/A	feet [] meters	(Puerto Rico only)			
d)	Attached garage (to		84	⊠ feet [] meters	(Puerto Rico only)			
e)	e) Lowest elevation of machinery or equipment servicing the building 11 0 feet meters (Puerto Rico only) (Describe type of equipment in Comments)								
f)	Lowest adjacent (fir				9 4	⊠ feet [7	(Duanta Dian aut.)	
g)	Highest adjacent (fi	, • ,	,		<u>8.4</u> 8.9	feet		(Puerto Rico only)	
3/	. ngoot aajaooni (ii						-	(Puerto Rico only)	
This	adification is to be sign	SECTIO	N D - SURVEYO	R, ENGINEE	R, OR ARCHIT	ECT CERTIFIC	CATION		
intom	ertification is to be signation. I certify that the rstand that any false s	information on th	is Certificate repres	sents my best e	efforts to interpret	the data availabl	۵		
	neck here if comments			,		,	- * '		
Certifie	er's Name				License Number		····		
Stephen A. Klotz 38622									
	Professional Land Sur	-	Company Nam						
Addres Signat	ss: 522 Sea Isle Bou		City: Ocean V		State: NJ	ZIP Code:	08230		

FEMA Form 81-31, February 2006

	-p,py are correspo	munig miormation nom section	A.	For insurance Company Use:
Building Street Address (inc 33 East Sherman Avenue	cluding Apt., Unit, Suite, and/or E e	Bldg. No.) or P.O. Route and Box No.		Policy Number
City: Strathmere	State: NJ	ZIP Code: 08248		Company NAIC Number
	SECTION D - SURVEYOR,	ENGINEER, OR ARCHITECT CER	RTIFICATION (CON	TINUED)
		ity official, (2) insurance agent/compan		
Comments: Structure is a 3 certification from manufactu	B story, 2 family frame residence.	There are (7) 8" X 16" "Smart vents"	provided, all are within	1' to adjacent grade. Owner to ob
	(Si E 13.0), however, residence	appears to be located within the (2) A-	10 zones (Base Flood	Elevations 10.0 & 11.0).
)			
Signature Rigin	Lu AKIS	Date 08-02-06		
SECTION E - BÚILDI	ING ELEVATION INFORMA	TION (SURVEY NOT REQUIRED)	FOR ZONE AO AN	Check here if attachment
For Zones AO and A (without	BFE), complete Items F1-F5	f the Certificate is intended to support a ck the measurement used. In Puerto R	LOMA and OME	
 Provide elevation inform (HAG) and the lowest ac 	nation for the following and check	the appropriate boxes to show whether	er the elevation is above	e or below the highest adjacent gr
a) Top of bottom floor (in	ncluding basement, crawl space,		eet meters at	pove or Delow the HAG.
For Building Diagrams 6	ncluding basement, crawl space, i-8 with permanent flood opening agrams) of the building is	or enclosure) is find the state of the	eet	ove or below the LAG.
3. Attached garage (top of	-	feet meters abo et meters above or belo		AG.
4. Top of platform of machi	nery and/or equipment servicing	the building is feet	□ meters □ above	or Delow the HAG
 Zone AO only: If no floor 	<u>d depth num</u> ber is available, is tl	ne top of the bottom floor elevated in accal official must certify this information i	cordance with the con	munity's floodplain management
S	ECTION F - PROPERTY OV	VNER (OR OWNER'S REPRESEN	TATIVE) CERTIFIC	ATION
The property owner or owner	's authorized representative who	completes Sections A. B. and F. for Zo	ne A (without a EEMA	issued or community-issued REE)
. Zono no mast sign nois.	Authorized Representative's Na	and \sqsubseteq are correct to the best of my kn	owledge.	
	Additionated Representative's Na	TIE		
ddress		City	State	ZIP Code
ignature		Date	Telephone	
omments				
				Check here if attachmen
local official who is authoriz	ed by law or ordinance to admin	COMMUNITY INFORMATION (OF ister the community's floodplain manage)		
	to. Complete the applicable itell	i(s) and sign below. Check the measur	ement used in Items G	i8. and G9.
	outerly distraction anomiation. (cumentation that has been signed and sumentation that has been signed and sig	ation data in the Comn	ients area helow \
A community official c	completed Section E for a building	g located in Zone A (without a FEMA-is	sued or community-iss	ued BFE) or Zone AO.
Permit Number		or community floodplain management		
. Femili Number	G5. Date Permit Issue	G6. Date C	ertificate Of Compliand	ce/Occupancy Issued
This permit has been issued				
	floor (including basement) of the of flooding at the building site:		eters (PR) Datum	
cal Official's Name		Title		
mmunity Name		Telephone		
nature		Date		
mments		Value		
				Check here if attachments