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

OMB No. 1660-0008 Expiration Date: November 30, 2018

JUL 25 2017

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION				FOR INSUI	RANCE COMPANY USE		
A1. Building Owner's Name Revolution Builders				Policy Num	nber:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.117 North Thurlow Avenue				Route and	Company N	NAIC Number:	
City Margate	\$100.00 P				ZIP Code 08402		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 320, Lot 4							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential							
A5. Latitude/Longit	ude: Lat. N	39°19'36.7"	ong. V	V74°30'41.8"	Horizontal Datum	: NAD	1927 🔀 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	Certific	cate is being used to	o obtain flood insura	nce.	
A7. Building Diagra	am Number	8					
A8. For a building v	with a crawls	pace or enclosure(s):					
a) Square foot	age of crawls	space or enclosure(s)	2	1,087 sq ft			
b) Number of	permanent flo	ood openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade7
c) Total net are	ea of flood op	penings in A8.b1,40	00s	sq in			
d) Engineered	flood openin	gs? 🗵 Yes 🗌 No)				
A9. For a building v	vith an attach	ed garage:					
a) Square foot	age of attach	ed garage 0		sq ft			
b) Number of p	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0						
c) Total net area of flood openings in A9.b 0 sq in							
d) Engineered flood openings?							
	SE	CTION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMA	ΓΙΟΝ	
B1. NFIP Community Name & Community Number Margate 345304		B2. County Name Atlantic			B3. State New Jersey		
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date		IRM Panel ffective/	B8. Flood Zone(s)		se Flood Elevation(s) ne AO, use Base
345304/0001	С	06/18/1971	R	evised Date /1983	A8		od Depth)
B10. 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:							
B11. Indicate elevation datum used for BFE in Item B9: X NGVD 1929 NAVD 1988 Other/Source:							
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🗌 Yes 🗵 No							
Designation Date: CBRS DPA							

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding information from Secti	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route	Policy Number:				
117 North Thurlow Avenue	O				
City State ZIP C Margate New Jersey 08402	90-5-478/08DD	Company NAIC Number			
SECTION C - BUILDING ELEVATION INFORMATION	ON (SURVEY RI	EQUIRED)			
C1. Building elevations are based on: Construction Drawings* Buildi	ing Under Constru	uction* Finished Construction			
*A new Elevation Certificate will be required when construction of the building	g is complete.	, _			
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE Complete Items C2.a–h below according to the building diagram specified in	Item A7. In Puert				
Benchmark Utilized: RM #1 Vertical Datum: N					
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 BF	E.				
8 505 DM 37 75 0		Check the measurement used.			
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) _		X feet meters			
b) Top of the next higher floor	13. 2	X feet meters			
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	x feet meters			
d) Attached garage (top of slab)	<u>N/A</u>	X feet meters			
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	13. 2	X feet meters			
f) Lowest adjacent (finished) grade next to building (LAG)	<u> </u>	X feet meters			
g) Highest adjacent (finished) grade next to building (HAG)	<u>9</u> . <u>8</u>	X feet meters			
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 	<u>7</u> . <u>8</u>	X feet meters			
SECTION D – SURVEYOR, ENGINEER, OR ARCH	HITECT CERTIFI	CATION			
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.					
Were latitude and longitude in Section A provided by a licensed land surveyor?	<u> </u>	☐ Check here if attachments.			
Certifier's Name License Number James R. Boney, PLS 31264					
Title Professional Land Surveyor		1			
Company Name	Place				
James R. Boney & Associates, LLC	Seal				
Address 13 Stone Mill Court					
	ZIP Code 08234				
(A - d c l -	Telephone (609) 788-8013	-			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.					
Comments (including type of equipment and location, per C2(e), if applicable) Two story dwelling on a crawlspace. There are two (2) A/C unit on canter levered 2nd floor joists at elevation 22.8. All other mechanicals servicing the dwelling are assumed to be inside and at or above the finished floor elevation. There are seven (7) SMART vents in the crawlspace.					

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY					
Building Street Address (including Apt., Unit, Suite, ar 117 North Thurlow Avenue	Policy Number:				
City Margate	State New Jersey	ZIP Code 08402	Company NAIC Number		
SECTION E – BUILDING E FOR ZON	LEVATION INFORM NE AO AND ZONE A		REQUIRED)		
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 b) Top of bottom floor (including basement,		feet mete	rs above or below the HAG.		
crawlspace, or enclosure) is E2. For Building Diagrams 6–9 with permanent flood	onenings provided in	feet mete	Property Commence of the Comme		
the next higher floor (elevation C2.b in the diagrams) of the building is		feet mete			
E3. Attached garage (top of slab) is		feet mete	rs above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		feet mete			
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	ole, is the top of the bo	ottom floor elevated in ac The local official must	ccordance with the community's certify this information in Section G.		
SECTION F - PROPERTY OW	NER (OR OWNER'S	REPRESENTATIVE) C	ERTIFICATION		
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 or Owner's Authorized Representative	e's Name				
Address	City	S	ate ZIP Code		
Signature	Date 7/	25/1) Te	elephone		
Comments	11				
l —					
			Check here if attachments.		

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, St 117 North Thurlow Avenue	Route and Box No.	Policy Number:			
City Margate		ZIP Code 08402	Company NAIC Number		
SECTIO	ON G - COMMUNITY INFOR	MATION (OPTIONAL)			
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.					
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)	ed by law to certify elevation i	nformation. (Indicate the	e source and date of the elevation		
G2. A community official completed Secti or Zone AO.	on E for a building located in 2	Zone A (without a FEMA	A-issued or community-issued BFE)		
G3. The following information (Items G4–	G10) is provided for commun	ty floodplain manageme	ent purposes.		
G4. Permit Number	G5. Date Permit Issued		ate Certificate of ompliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction Subst	antial Improvement			
G8. Elevation of as-built lowest floor (including of the building:	basement)	feet	meters Datum		
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	feet	meters Datum		
G10. Community's design flood elevation:		feet	meters Datum		
Local Official's Name	Title				
Community Name	Telep	hone			
Signature Date					
Comments (including type of equipment and location, per C2(e), if applicable)					
2			47		
		9			
			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 117 North Thurlow Avenue			Policy Number:
City	State	ZIP Code	Company NAIC Number
Margate	New Jersey	08402	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One Caption Front 7/20/17



Photo Two

Photo Two Caption Rear 7/20/17

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

MPORTANT: In these spaces, copy the correspon	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, ar 117 North Thurlow Avenue	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Margate	New Jersey	08402	,,,
If submitting more photographs than will fit on the with: date taken; "Front View" and "Rear View"; photographs must show the foundation with represent	and, if required, "Ri	ght Side View" and "L	eft Side View." When applicable,
	Photo One		
	Photo One		
Photo One Caption			
			×
			,
	Photo Two		
	Photo Two		
Photo Two Caption	. 1.0.0 1 110		