

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

Building Owner's Name MARK and JAMIE MOORE	FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 17 N. DOUGLAS AVENUE	Policy Number:
City MARGATE State NJ ZIP Code 08402	Company NAIC Number:

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
BLOCK 204.03 LOT 11

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL
A5. Latitude/Longitude: Lat. 39 -19.929 Long. 74 -29.870 Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.
A7. Building Diagram Number 7

SEP 14 2016

A8. For a building with a crawlspace or enclosure(s):
a) Square footage of crawlspace or enclosure(s) 812 sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 4
c) Total net area of flood openings in A8.b 1000 sq in
d) Engineered flood openings? ☒ Yes ☐ No
A9. For a building with an attached garage:
a) Square footage of attached garage N/A sq ft
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? ☐ Yes ☒ No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number CITY OF MARGATE 345304		B2. County Name ATLANTIC		B3. State NJ	
B4. Map/Panel Number 345304 / 0001	B5. Suffix C	B6. FIRM Index Date OCT. 18, 1983	B7. FIRM Panel Effective/Revised Date OCT. 18, 1983	B8. Flood Zone(s) A-8	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10

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: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other/Source: _____

F Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
Designation Date: _____ ☐ CBRS ☐ OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. 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.
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-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.
Benchmark Utilized: RM # 1 Vertical Datum: 1929
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 BFE.

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>6.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>12.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>12.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>5.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>6.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>5.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

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. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No
☐ Check here if attachments.

Surveyor's Name STEVEN GLASSER PLS License Number GS34853
Title PRESIDENT Company Name PRICE GLASSER ASSOCIATES INC.
Address 331 TILTON ROAD City NORTHFIELD State NJ ZIP Code 08225
Signature _____ Date 07.28.2016 Telephone 609 646 8757

GS34853
07.28.2016

ELEVATION CERTIFICATE, page 2

IMPORTANT: In these spaces, copy the corresponding information from Section A.		FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 17 N. DOUGLAS AVENUE		Policy Number:
City MARGATE	State NJ ZIP Code 08402	Company NAIC Number:

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

Comments THIS PROPERTY HAS BEEN DESIGNATED TO BE IN FLOOD ZONE AE9 AS SHOWN ON FEMA PRELIMINARY FIRM MAP 34001CO453F, BASED ON NAVD 1988 DATUM



Signature

Date 07.28.2016

SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

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 _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ ☐ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- 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 REPRESENTATIVE) CERTIFICATION

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's or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

☐ Check here if attachments.

SECTION G – COMMUNITY INFORMATION (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 taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ ☐ feet ☐ meters Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ ☐ feet ☐ meters Datum _____

G10. Community's design flood elevation: _____ ☐ feet ☐ meters Datum _____

Local Official's Name JIM GALANTINO

Title CFM

Community Name CITY OF MARGATE

Telephone 609-822-1974

Signature

Date

Comments

☐ Check here if attachments.

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

FOR INSURANCE COMPANY USE

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
17 N. DOUGLAS AVENUE

Policy Number:

City MARGATE

State NJ

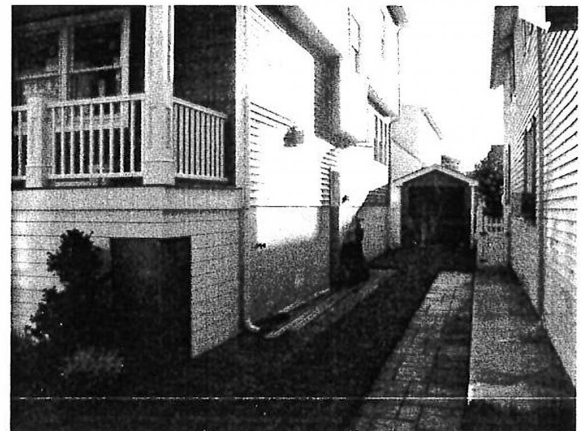
ZIP Code 08402

Company NAIC Number:

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.



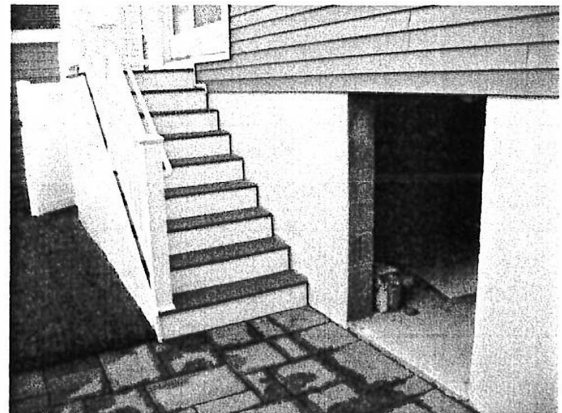
FRONT VIEW
07.28.2016



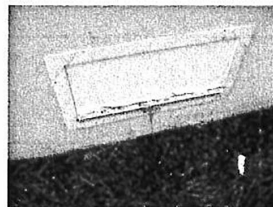
RIGHT SIDE VIEW FROM FRONT
07.28.2016



LEFT SIDE FROM FRONT VIEW
07.28.2016



REAR VIEW
07.28.2016



**USA FOUNDATION FLOOD AIR VENT
MODEL FOAL
RATED AT 250 SQ. IN**



Most Widely Accepted and Trusted

ICC-ES Report

ESR-3907

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Issued 10/2016

This report is subject to renewal 10/2017.

DIVISION: 08 00 00—OPENINGS

SECTION: 08 95 43—VENTS/FOUNDATION FLOOD VENTS

REPORT HOLDER:

USA FLOOD AIR VENTS, LTD.

**63 PUTNAM STREET, SUITE 202
SARATOGA SPRINGS, NEW YORK 12866**

EVALUATION SUBJECT:

USA FLOOD AIR VENTS: MODELS FOSS; FASS; FOAL; FAAL; ROAL



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5.0 CONDITIONS OF USE

The USA Flood Air Vents described in this report complies with, or is a suitable alternative to what is specified in, those codes listed in Section 1.0 of this report, subject to the following conditions:

- 5.1 The USA Flood Air Vents flood vents must be installed in accordance with this report, the applicable code and the manufacturer's installation instructions. In the event of a conflict, the instructions in this report govern.
- 5.2 The USA Flood Air Vents flood vents must not be used in place of "breakaway walls" in coastal high hazard areas, but are permitted for use in conjunction with breakaway walls in other areas.

6.0 EVIDENCE SUBMITTED

Data in accordance with the ICC-ES Acceptance Criteria for Mechanically Operated Flood Vents (AC3084), dated August 2016.

7.0 IDENTIFICATION

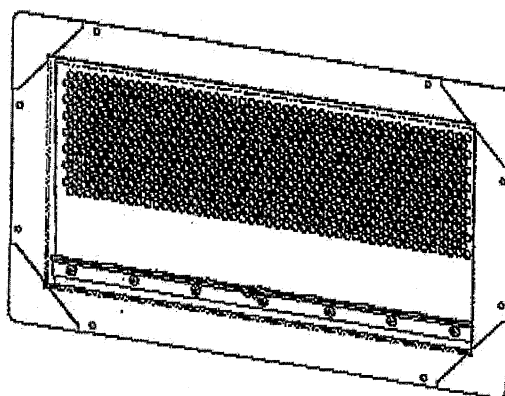
The USA Flood Air Vents models recognized in this report are identified by a label bearing the manufacturer's name, the model designation, and the evaluation report number (ESR-3907).

TABLE 1—USA FLOOD AIR VENTS

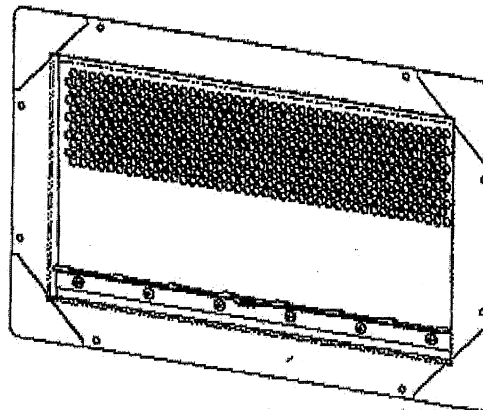
MODEL DESIGNATION	VENT SIZE (Width x Height) (in)	ROUGH OPENING SIZE (Width x Height) (in)	ENCLOSED AREA COVERAGE (ft ²)	FLAP NET FREE AREA ¹ (in ²)
FOSS	18 x 10	15 1/2 x 7 1/2	252	None
FASS	18 x 10	15 1/2 x 7 1/2	252	28
FOAL	18 x 10	15 1/2 x 7 1/2	252	None
FAAL	18 x 10	15 1/2 x 7 1/2	252	87
ROAL	16 7/8 x 10	13 1/8 x 7 1/2	224	None

For SI: 1 inch = 25.4 mm

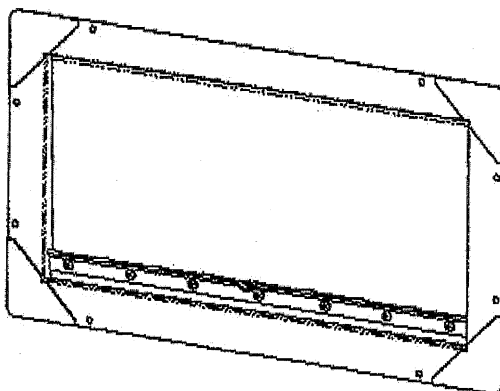
¹Net free area in the vent flap for under-floor space ventilation.



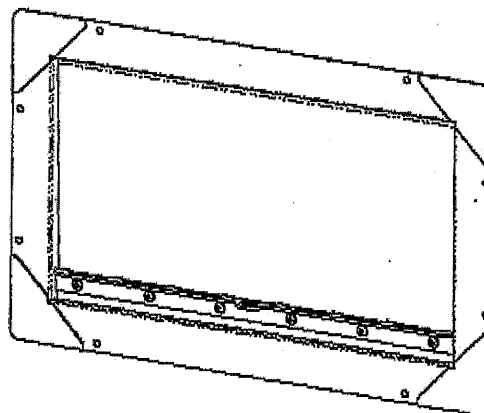
FAAL



FASS



FOSS & FOAL



ROAL

FIGURE 1—USA FLOOD AIR VENTS