

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number: 1660-0008
Expiration: 11/30/2018

| | | | | | |
|--|-----------------|---|---|---------------------------|---|
| 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 | | | | | FORM INSURANCE COMPANY USE |
| A1. Building Owner's Name BRET FISHER | | | | | Policy Number: |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9315 Monmouth Ave. | | | | | Company NAIC Number: |
| City CITY OF MARGATE | | | State NJ | Zip Code 08402 | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 90 and Block 427.02 | | | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL | | | | | |
| A5. Latitude/Longitude: Lat. N 39.3243 Long. W 074.5170 Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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 | | | | | |
| A8. For a building with a crawlspace or enclosure(s): | | | A9. For a building with an attached garage: | | |
| a) Square footage of crawlspace or enclosure(s) 1258* sq. ft. | | | a) Square footage of attached garage N/A sq ft | | |
| b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 8* | | | b) Number of permanent flood openings in the attached garage within 1.0 foot N/A above adjacent grade | | |
| c) Total net area of flood openings in A8.b 2104* sq in | | | c) Total net area of flood openings in A9.b N/A sq in | | |
| d) Engineered flood openings? <input checked="" type="radio"/> Yes <input type="radio"/> No | | | d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No | | |
| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION | | | | | |
| B1. NFIP Community Name & Community Number CITY OF MARGATE & 345304 | | | B2. County Name ATLANTIC COUNTY | | B3. State NJ |
| B4. Map/Panel Number 345304 / 0001 | B5. Suffix C | B6. FIRM Index Date No index printed | B7. FIRM Panel Effective/ Revised Date 10/18/1983 | B8. Flood Zone(s) A8** | 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: <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____ | | | | | |
| B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____ | | | | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA | | | | | |
| SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) | | | | | |
| C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> Finished Construction | | | | | |
| 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. * A new Elevation Certificate will be required when construction of the building is complete. | | | | | |
| Benchmark Utilized: private Vertical Datum: NGVD29 | | | | | |
| Indicate elevation datum used for the elevations in items a) through h) below. <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> 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) | 5.9*** | - | <input checked="" type="radio"/> feet <input type="radio"/> meters | | |
| b) Top of the next higher floor | 14.7 | - | <input checked="" type="radio"/> feet <input type="radio"/> meters | | |
| c) Bottom of the lowest horizontal structural member (V Zones only) | N/A | - | <input checked="" type="radio"/> feet <input type="radio"/> meters | | |
| d) Attached garage (top of slab) | N/A | - | <input checked="" type="radio"/> feet <input type="radio"/> meters | | |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) | 14.4**** | - | <input checked="" type="radio"/> feet <input type="radio"/> meters | | |
| f) Lowest adjacent (finished) grade next to building (LAG) | 4.5 | - | <input checked="" type="radio"/> feet <input type="radio"/> meters | | |
| g) Highest adjacent (finished) grade next to building (HAG) | 5.5 | - | <input checked="" type="radio"/> feet <input type="radio"/> meters | | |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | N/A | - | <input checked="" type="radio"/> feet <input type="radio"/> meters | | |

ELEVATION CERTIFICATE

OMB Control Number: 1660-0008

Expiration: 11/30/2018

9315 Monmouth Ave.

CITY OF MARGATE


NJ

08402

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.

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

| | | | |
|--|--|-----------------------------------|-------------------|
| Certifier's Name Paul M. Koelling, PLS, CFM | | License Number NJ24GS 04328800 | |
| Title Licensed Land Surveyor | Company Name Paul Koelling&AssocLLC-COA24GA28256300 | | |
| Address 2161 Shore Road | City Linwood | State NJ | Zip Code 08221 |
| Signature  | Date 6/30/2016 | Telephone +1 (609) 927-0279 | |

PLACE
SEAL
HERE

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

Comments (including type of equipment and location, per C2(e), if applicable)
 *A8.) 843 sq. ft. front room.....199 sq ft rear left room.....189 sq. ft. rear right room.....27 sq. ft. elevator shaft.....ground floor enclosure has 8 USA Flood Vents model #FO-316 engineered for 263 sq. inches of net area each...
 **B8 & B9.) FEMA Pre-FIRM Zone "AE".....Base Flood Elevation 9 ft. (NAVD88) converted = 10.3 ft. (NGVD29)
 ***C2a.) main ground floor enclosure
 ***C2a.) electrical outlet (elev. 7.2).... air unit (elev. 14.4)

Signature  Date 6/30/2016

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 or Owner's Authorized Representative's Name:

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments

☐ Check here if attachments.

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

| | | | |
|---|---------------------|-------------------|----------------------------------|
| 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. 9315 MONMOUTH AVENUE | | | Policy Number: |
| City MARGATE | State New Jersey | ZIP Code 08402 | Company NAIC Number |

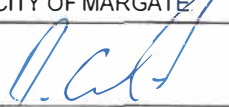
SECTION G – COMMUNITY INFORMATION (OPTIONAL)

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 |
|-------------------|------------------------|---|

- 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 8/16/2016 |

Comments (including type of equipment and location, per C2(e), if applicable)

☐ Check here if attachments.

Building Photographs

See Instructions for Item A6.

For Insurance Company Use:

Building Street Address (including Apt., Unit, Suite, and/or Bldg.) No. or P.O. Route and Box No.
9315 Monmouth Ave.

Policy Number

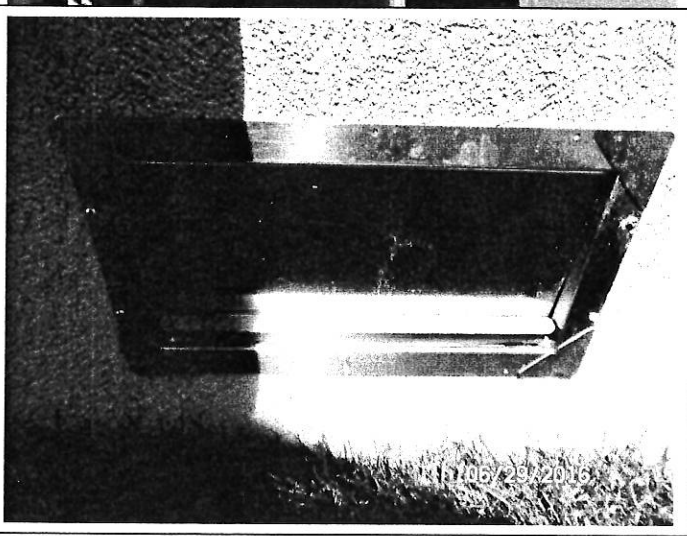
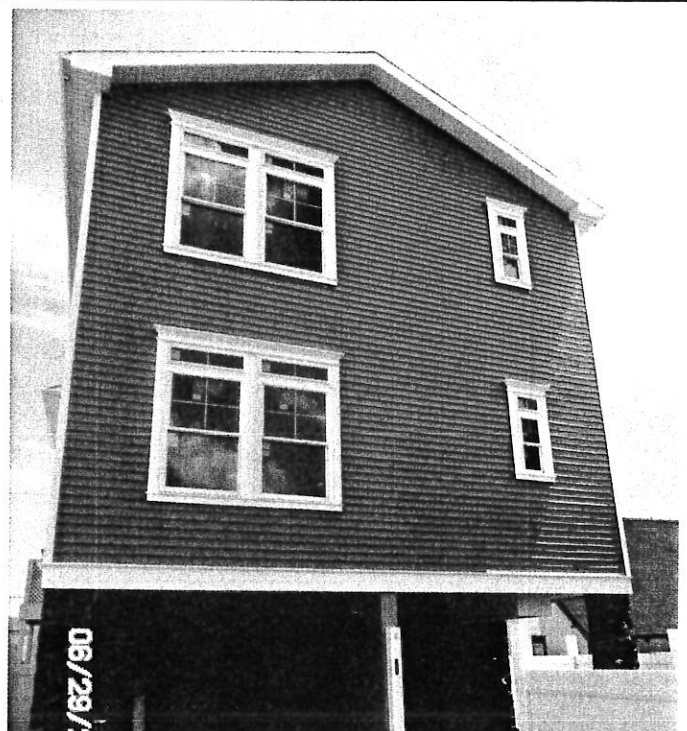
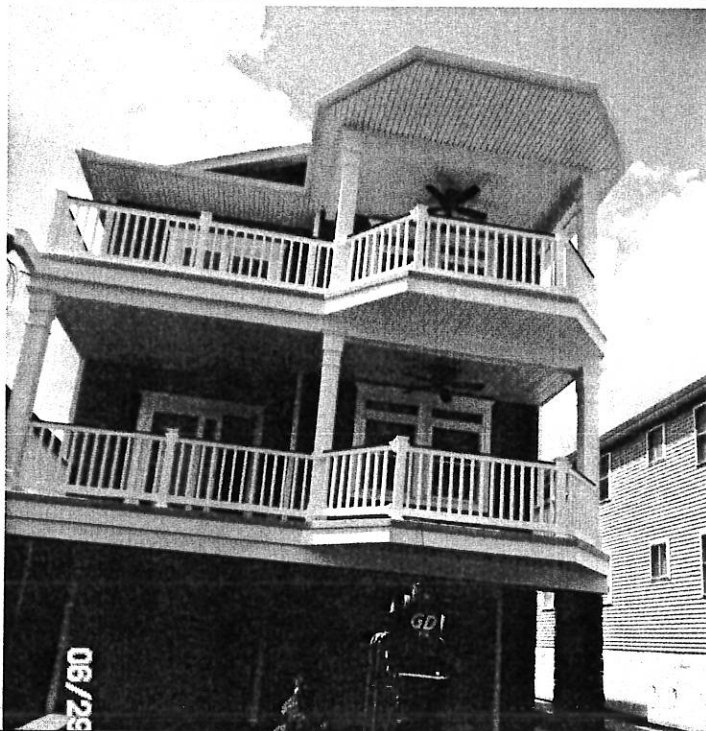
City
Margate

State
NJ

ZIP Code
08402

Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 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 on the reverse.



Right Side View – Date of Photograph: (See Photo Stamp)

Vent View – Date of Photograph: (See Photo Stamp)



Most Widely Accepted and Trusted

ICC-ES Report

ESR-3907

ICC-ES | (800) 423-6587 | (562) 699-0543 | www.icc-es.org

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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(WSSPC) Award in Excellence"*



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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

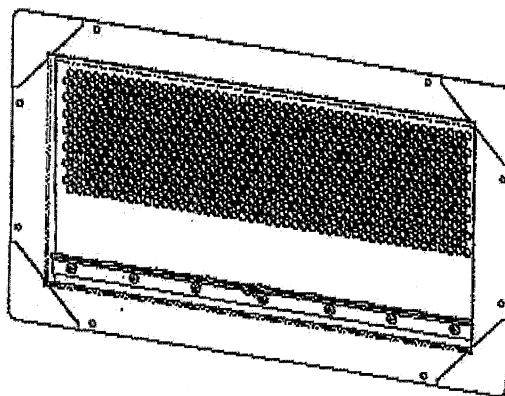
The USA Flood Air Vents models recognized in this report are identified by a label bearing the manufacturer's name, the model designation, and the evaluation report number (ESR-3907).

TABLE 1—USA FLOOD AIR VENTS

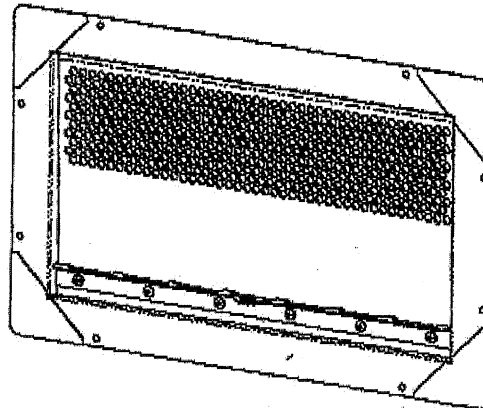
| MODEL DESIGNATION | VENT SIZE (Width x Height) (in) | ROUGH OPENING SIZE (Width x Height) (in) | ENCLOSED AREA COVERAGE (ft ²) | FLAP NET FREE AREA ¹ (in ²) |
|-------------------|---------------------------------------|--|---|--|
| FOSS | 18 x 10 | 15 1/2 x 7 1/2 | 252 | None |
| FASS | 18 x 10 | 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

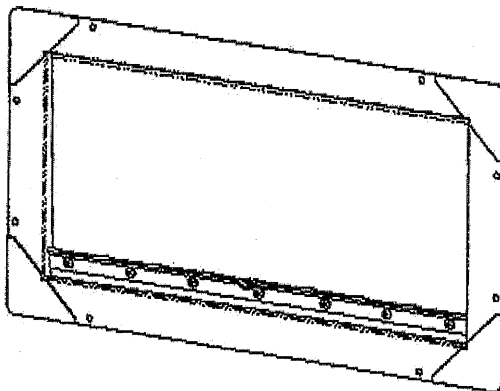
¹Net free area in the vent flap for under-floor space ventilation.



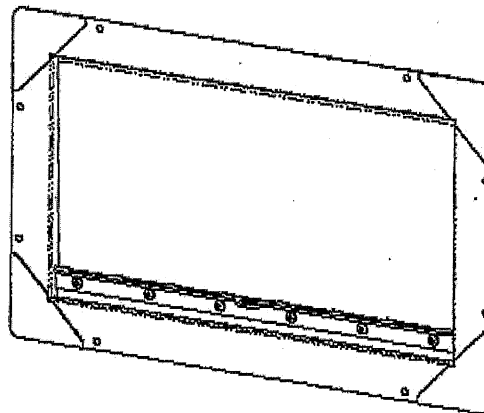
FAAL



FASS



FOSS & FOAL



ROAL

FIGURE 1—USA FLOOD AIR VENTS