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

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

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.

	SEC	TION A – PROPERTY	INFO	RMATION			RANCE COMPANY USE
A1. Building Owner's Name BENDYL, LLC						Policy Num	
		ncluding Apt., Unit, Suite	, and/∂	or Bldg. No.) or P.O	. Route and	Company N	NAIC Number:
City CITY OF MAR				State New Jersey		ZIP Code 08402	
A3. Property Desc Block 228 LOT 312		and Block Numbers, Tax	k Parce	əl Number, Legal De	escription, etc.)		
A4. Building Use (e.g., Resider	ntial, Non-Residential, A	Additior	n, Accessory, etc.)	RESIDENTIAL CO	ONDOMINI	UM
A5. Latitude/Longi	tude: Lat. 39	9.3223	Long	74.5155	Horizontal Datum	: NAD	1927 × NAD 1983
A6. Attach at least	: 2 photograp	hs of the building if the	Certifi	cate is being used t	o obtain flood insura	nce.	
A7. Building Diagra	am Number	7					
A8. For a building	with a crawls	space or enclosure(s):					
a) Square foo	tage of crawl	Ispace or enclosure(s)	2	1,505 sq ft			
b) Number of p	permanent flo	ood openings in the cra	ıwlspac	ce or enclosure(s) w	vithin 1.0 foot above a	adjacent gr	rade6
c) Total net are	ea of flood or	penings in A8.b1,5	78 :	sq in	*0		
d) Engineered	flood openin	ngs? 🗵 Yes 🗌 No)				
A9. For a building v	A9. For a building with an attached garage:						
a) Square footage of attached garage 0 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?						
		CTION B – FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMAT	ION	
B1. NFIP Communit		1070		B2. County Name			B3. State
			I		и т		New Jersey
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Ef	IRM Panel ffective/	B8. Flood Zone(s)		se Flood Elevation(s) ne AO, use Base
345304/0001	С	10/18/1983	1 2002000000000000000000000000000000000	evised Date 1/1983	A8**	Floo 10**	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							
Decimation Detail							
5—0.0000000 V 3000000000000000000000000000000000000		⊔ ៴	DNO	☐ OPA			
							B.

OMB No. 1660-0008 **ELEVATION CERTIFICATE** 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. Policy Number: 16 NORTH ADAMS AVENUE City State ZIP Code Company NAIC Number CITY OF MARGATE New Jersey 08402 SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* X 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: private Vertical Datum: NGVD29 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) 6.1 X feet meters b) Top of the next higher floor 16 5 x feet meters c) Bottom of the lowest horizontal structural member (V Zones only) N/A x feet meters N/A d) Attached garage (top of slab) x feet ☐ meters e) Lowest elevation of machinery or equipment servicing the building 14 5 x feet meters (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) 5 5 x feet meters g) Highest adjacent (finished) grade next to building (HAG) 6.5 x feet meters Lowest adjacent grade at lowest elevation of deck or stairs, including 5.6 x feet ☐ meters structural support 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? Yes □ No. X Check here if attachments. Certifier's Name License Number Paul M. Koelling, PLS, CFM NJ24GS 04328800 Title Licensed Land Surveyor Company Name Place Paul Koelling & Associates, LLC NJ C.O.A. No. 24GA28256300 Seal Here Address 2161 Shore Road City State ZIP Code Linwood New Jersey 08221 Signature Date Telephone 2-8-17 (609) 927-0279 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) *A8b.) USA foundation flood air vents Model #FAAL engineered for 263 sq. inches of area each (see attached) installed on exterior walls **B8 & B9.) FEMA Pre-FIRM Zone "AE".....Base Flood Elevation 10 ft. (NAVD88) converted = 11.3 ft. (NGVD29) ***C2a & b.) ground floor (elev 6.1) with interior walls....elevator pit (elev 5.6) ****C2e.) ductwork

ELEVATION CERTIFICATE

OMB 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. 16 NORTH ADAMS AVENUE	Policy Number:					
City State ZIP Code CITY OF MARGATE New Jersey 08402	Company NAIC Number					
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NO FOR ZONE AO AND ZONE A (WITHOUT BFE)	OT REQUIRED)					
For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to suppor complete Sections A, B,and C. For Items E1–E4, use natural grade, if available. Check the measurenter meters.	t a LOMA or LOMR-F request, rement used. In Puerto Rico only,					
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, 	ters above or below the HAG.					
crawlspace, or enclosure) is feet met						
E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/ the next higher floor (elevation C2.b in the diagrams) of the building is	2000 AND 100 A					
E3. Attached garage (top of slab) is feet met						
E4. Top of platform of machinery and/or equipment servicing the building is feet met	ers 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 a floodplain management ordinance? Yes No Unknown. The local official must	Control of the Contro					
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 a community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are community-issued BFE.	Zone A (without a FEMA-issued or prect to the best of my knowledge					
Property Owner or Owner's Authorized Representative's Name	included in a second in the model of the second in the sec					
Address City S	State ZIP Code					
Signature Date T	elephone					
Comments						
	-					
	2					
	d.					
	Check here if attachments					

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corr	FOR INSURANCE COMPANY USE							
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16 NORTH ADAMS AVENUE				Policy Number:				
City CITY OF MARGATE	State New Jersey	ZIP Code 08402		Company NAIC Number				
SECTI	ON G - COMMUNIT	Y INFORMATION (OPTI	ONAL)					
The local official who is authorized by law or o Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	n Certificate. Comple	er the community's floodpete the applicable item(s)	olain mar and sign	nagement ordinance can complete below. Check the measurement				
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 Sector Zone AO.	ion E for a building lo	ocated in Zone A (without	t a FEMA	N-issued or community-issued BFE)				
G3. The following information (Items G4-	G3. The following information (Items G4–G10) is provided for community floodplain management purposes.							
G4. Permit Number	G5. Date Permit Is	ssued	G6. D	Pate Certificate of compliance/Occupancy Issued				
G7. This permit has been issued for:	G7. This permit has been issued for: New Construction Substantial Improvement							
G8. Elevation of as-built lowest floor (including of the building:	g basement) —		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		Title						
JIM GALANTINO Community Name		CFM						
CITY OF MARGATE		Telephone 609-822-1974						
Signature		Date						
Comments (including type of equipment and loc	ation, per C2(e), if a	pplicable)						
1	21							
		u u						
				2 "				
				1				
				Check here if attachments.				

Building Photographs

	See Instructions fo	or Item A6.	For Insurance Company Use:
Building Street Address (inclu 16 North Adams Ave	ding Apt., Unit, Suite, and/or Bldg.) No. c nue	or P.O. Route and Box No.	Policy Number
City	State	ZIP Code	Company NAIC Number
Margate	NJ	08402	

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.





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)



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ESR-3907

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:

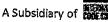
USA FLOOD AIR VENTS: MODELS FOSS; FASS; FOAL; FAAL; ROAL



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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 (AC364), dated August 2015.

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)	ENGLOSED AREA COVERAGE (ft²)	FLAP NET FREE AREA ¹ (in ²)
FQ\$\$	18 x 10	15 ¹ / ₂ x 7 ¹ / ₂	252	None
FASS	18 x 10	151/2 × 71/2	252	28
FOAL	18 x 10	15 /2 x 7 /2	252	None
FAAL	18 x 10	151/2 × 71/2	252	37
ROAL	16 ⁴ / ₈ x 10	13'/8×7'/2	224	None

For SI: 1 inch = 25.4 mm

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

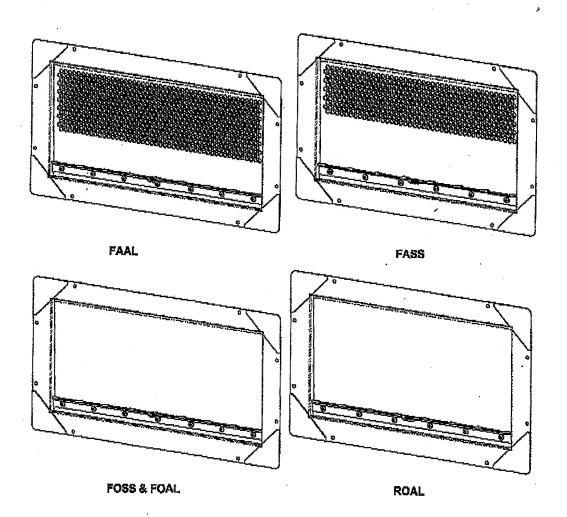


FIGURE 1-USA FLOOD AIR VENTS