

MAR 28 2017

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.

SECTION A - PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name Howard M. Friedman and Hollace B. Friedman				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. No. 215 North Belmont Avenue				Company NAIC Number:	
City Margate City		State New Jersey		ZIP Code 08042	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 56 * Block 502.02 * Plate 9					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>39° 20' 13.3" N</u> Long. <u>074° 29' 52.7" W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>8</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>995</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>5</u>					
c) Total net area of flood openings in A8.b <u>1,250</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>0</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A9.b <u>0</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number City of Margate City, Community No. 345304			B2. County Name Atlantic County		B3. State New Jersey
B4. Map/Panel Number 345304 0001 C	B5. Suffix C	B6. FIRM Index Date 07/01/1974	B7. FIRM Panel Effective/Revised Date 10/18/1983	B8. Flood Zone(s) Zone A8	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) EL 10 (NGVD1929)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

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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: NGS CORS Sta. NJGT (DL1896) Vertical Datum: NAVD 1988

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>8.10</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor | <u>11.15</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 checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | <u>n/a.</u> | <input checked="" 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>11.0</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>7.40</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>7.70</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>7.40</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.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No ☒ Check here if attachments.Certifier's Name
Bruce R. McKenna, PE, PLSLicense Number
NJ GB-042562Title
Project ManagerCompany Name
Monarch Surveying & Engineering, LLCAddress
P.O. Box 177City
PitmanState
New JerseyZIP Code
08071Place
Seal
Here

Signature

Date
02/20/2017Telephone
(856) 582-8200

Copy all pages of this Elevation Certificate and 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)
Building elev. info. based upon field survey observations in February 2017;
Elev. info. C.2.e for external A/C Unit; Elev. info for C.2.h is for entrance deck
landing; Five (5) USA Foundation Flood Air Vents, [rated one (1) AFFV per
252 sf of enclosed area]

Preliminary Flood Map Data:
FIRM Panel No. 453 of 457
Map Number: 34001C0453F
Zone AE: Elev 9 (NAVD 1988)
Preliminary Date: May 30, 2014

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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 1–2 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.

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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	Title
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Community Name	Telephone
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Signature	Date
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Comments (including type of equipment and location, per C2(e), if applicable)

☐ Check here if attachments.

BUILDING PHOTOGRAPHS**ELEVATION CERTIFICATE**

See Instructions for Item A6.

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No. 215 North Belmont Avenue

Policy Number:

City
Margate CityState
New JerseyZIP Code
08042

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.



Photo One

Photo One Caption View of Front/Left Side of Residential Dwelling



Photo Two

Photo Two Caption View of Front/Right Side of Residential Dwelling

ELEVATION CERTIFICATE**BUILDING PHOTOGRAPHS**

Continuation Page

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No. 215 North Belmont Avenue

Policy Number:

City
Margate CityState
New JerseyZIP Code
08042

Company NAIC Number

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. 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.



Photo One

Photo One Caption View of Rear/Left Side of Residential Dwelling



Photo Two

Photo Two Caption View of Right Side of Residential Dwelling



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

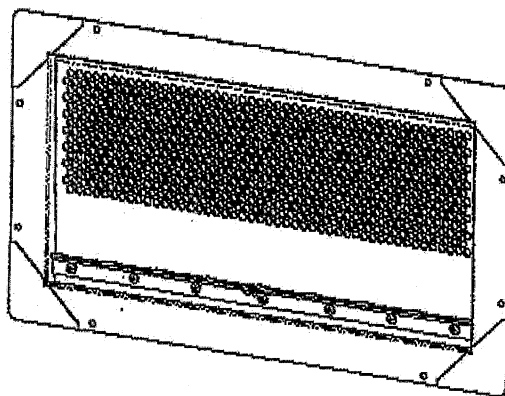
The USA Flood Air Vents models recognized in this report are identified by a label bearing the manufacturer's name, the model designation, and the evaluation report number (ESR-3907).

TABLE 1—USA FLOOD AIR VENTS

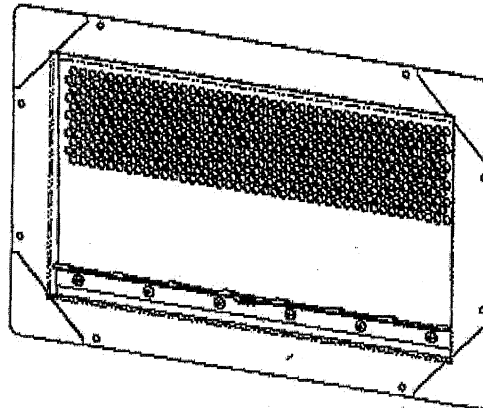
MODEL DESIGNATION	VENT SIZE (Width x Height) (in)	ROUGH OPENING SIZE (Width x Height) (in)	ENCLOSED AREA COVERAGE (ft ²)	FLAP NET FREE AREA ¹ (in ²)
FOSS	18 x 10	15 1/2 x 7 1/2	252	None
FASS	18 x 10	15 1/2 x 7 1/2	252	28
FOAL	18 x 10	15 1/2 x 7 1/2	252	None
FAAL	18 x 10	15 1/2 x 7 1/2	252	87
ROAL	16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

For SI: 1 inch = 25.4 mm

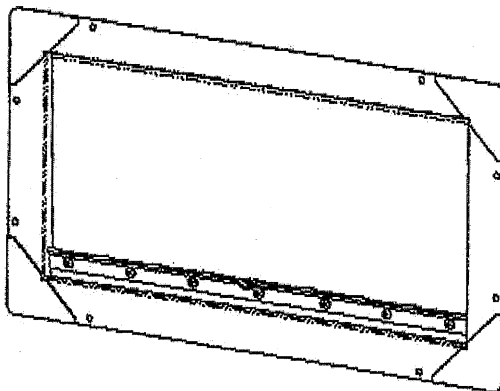
¹Net free area in the vent flap for under-floor space ventilation.



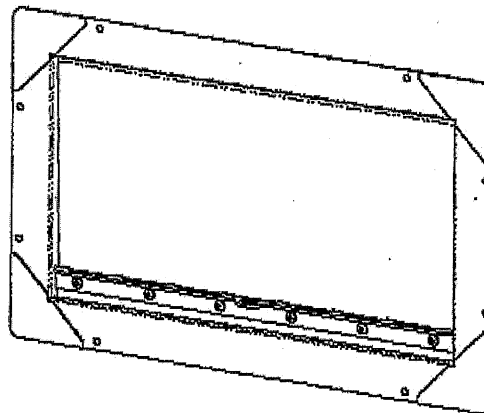
FAAL



FASS



FOSS & FOAL



ROAL

FIGURE 1—USA FLOOD AIR VENTS