DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expires March 31, 2012

Federal Emergency Management Agency
National Flood Insurance Program Important: Read the instructions on pages 1-9

1					
SECTION A - PRO	OPERTY INFORMATION	For Insurance Company Use:			
A1. Building Owner's Name KAVKY DEVELOPMENT LLC		Policy Number			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P #29 N. CLARENDON AVENUE	O. Route and Box No.	Company NAIC Number			
City MARGATE State NJ ZIP Code 08402	in the second se				
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal BLOCK 203 LOT 2	Description, etc.)	3			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc. A5. Latitude/Longitude: Lat. 39.333 Long74.496 A6. Attach at least 2 photographs of the building if the Certificate is being used A7. Building Diagram Number 8 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) 1335 sq ft b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 6* c) Total net area of flood openings in A8.b 1500* sq in d) Engineered flood openings? Yes □ No	Horizontal Datum: It to obtain flood insurance. A9. For a building with an attac a) Square footage of attac	ned garage: hed garage ** sq ft openings in the attached garage jacent grade ** penings in A9.b ** sq in			
SECTION B - FLOOD INSURANCE	RATE MAP (FIRM) INFORMATION				
B1. NFIP Community Name & Community Number B2. County Na City of Margate 345304 Atlantic		33. State NJ			
2014 - 1986 - 19	FIRM Panel B8. Flood ze/Revised Date A8	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10.0			
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe) B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) B12. 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 REQUIRE	ED)			
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. Use the same datum as the BFE. Benchmark Utilized PRIVATE Vertical Datum NGVD29 Conversion/Comments					
	Check the measurem	ent used.			
 a) Top of bottom floor (including basement, crawlspace, or enclosure floor b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) 	11.0 ⊠ feet ☐ meters (Puerte N/A. ⊠ feet ☐ meters (Puerte	P Rico only) P Rico only) eters (Puerto Rico only) P Rico only)			
g) Highest adjacent (finished) grade next to building (HAG)	7.6 ⊠ feet ☐ meters (Puerto				
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 	N/A.	Rico only)			
SECTION D - SURVEYOR, ENGINEE	R, OR ARCHITECT CERTIFICATION	4			
This certification is to be signed and sealed by a land surveyor, engineer, or are information. I certify that the information on this Certificate represents my best of understand that any false statement may be punishable by fine or imprisonment. Check here if comments are provided on back of form. Were latitude a licensed land strength of the comments are provided on back of form. Certifier's Name Paul M. Koelling, PLS Title Licensed Land Surveyor Company Name PAUL M. KOEL	efforts to interpret the data available. Int under 18 U.S. Code, Section 1001. Interpret the data available. Interpret the da	- Carlotty			
Address P.O. BOX 491 City Northfield	State NJ ZIP Code 08225	-1, V			
Signature Date 1913	Telephone (609)568-5762	-N543288			

RTANT: In these space	s, copy the correspon	ding information from Section A		For Insurance Company Use:
#29 N. CLARENDON AVENUE	Apt., Unit, Suite, and/or Bld	g. No.) or P.O. Route and Box No.		Policy Number
City Margate State NJ ZIP Code	e 08402			Company NAIC Number
SECTION	ON D - SURVEYOR, EN	IGINEER, OR ARCHITECT CERT	IFICATION (CONT	(INUED)
Copy both sides of this Elevation Co	ertificate for (1) community	official, (2) insurance agent/company,	and (3) building owner	er
Comments	eered for 250 square inche	s of net free area cook (one attack in	200	Ý
Signature	-	Deta		· 1
	EVATION INCORMATI	Date 6-19-	12	☐ Check here if attachment
		ON (SURVEY NOT REQUIRED) F		
E1. Provide elevation information of grade (HAG) and the lowest at a) Top of bottom floor (including b) and the diagrams 6-9 with (elevation C2.b in the diagrams 6-9 with (elevation C2.b	for the following and check dijacent grade (LAG). In grade (LAG). In grade (LAG) and basement, crawispace, or a permanent flood openings is of the building is fee ind/or equipment servicing the number is available, is the Unknown. The local of the NF-PROPERTY OWN prized representative who concerned to the servicing of the properties o	s provided in Section A Items 8 and/or state of the building is feet below the building is feet be top of the bottom floor elevated in actificial must certify this information in Section 14 (COR) The building is feet beto find the bottom floor elevated in actificial must certify this information in Section 15 (COR) The building is feet beto for John for E are correct to the best of my known the correct to the correc	et	ve or below the highest adjacent ove or below the HAG. ove or below the LAG. ove or below the LAG. ostructions), the next higher floor AG. or below the HAG. mmunity's floodplain management
Comments		Date	Telephone	
	· ·			Check here if attachment
l- 1 1 cc	SECTION G - CO	OMMUNITY INFORMATION (OPT	IONAL)	
A community official complete The following information (Item	was taken from other docur elevation information. (Ind d Section E for a building le	er the community's floodplain manager and sign below. Check the measurer mentation that has been signed and se icate the source and date of the elevat ocated in Zone A (without a FEMA-issu community floodplain management pur	ment used in Items G aled by a licensed su ion data in the Comm led or community-iss	8 and G9.
G4. Permit Number	G5. Date Permit Issued	G6. Date Ce	tificate Of Compliand	ce/Occupancy Issued
 7. This permit has been issued for. 8. Elevation of as-built lowest floor (in 9. BFE or (in Zone AO) depth of flood 10. Community's design flood elevation 	ing at the building site:	feet	eters (PR) Datum eters (PR) Datum eters (PR) Datum	
_ocal Official's Name		Title		*
Community Name	/ .	Telephone		
Signature	et	Date (S)		
Comments		6/17/1		
	10			Понали
				Check here if attachments



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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)	ENCLOSED AREA COVERAGE (ft²)	FLAP NET FREE AREA ¹ (in ²)
FO\$\$	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	15 ¹ / ₂ × 7 ¹ / ₂	252	37
ROAL	16³/ ₈ x 10	13'/ ₈ × 7'/ ₂	224	None

For SI: 1 inch = 25.4 mm

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

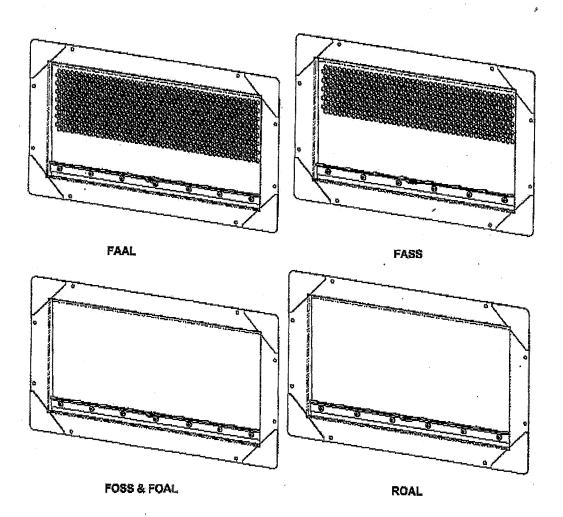


FIGURE 1-USA FLOOD AIR VENTS