

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 Bendyl Development LLC | | | | Policy Number: | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 9614 Winchester QAve. | | | | Company NAIC Number: | |
| City CITY OF MARGATE | | State New Jersey | | ZIP Code 08402 | |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 230 Lot 29 | | | | | |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u> | | | | | |
| A5. Latitude/Longitude: Lat. <u>N 39.3016</u> Long. <u>W 074.5184</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>6</u> | | | | | |
| A8. For a building with a crawlspace or enclosure(s): | | | | | |
| a) Square footage of crawlspace or enclosure(s) <u>1,922</u> sq ft | | | | | |
| b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>10</u> | | | | | |
| c) Total net area of flood openings in A8.b <u>2,500</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 & 345304 | | | B2. County Name ATLANTIC COUNTY | | B3. State New Jersey |
| B4. Map/Panel Number 345304/0001 | B5. Suffix C | B6. FIRM Index Date 10/18/1983 | 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="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 checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA | | | | | |

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. 9614 Winchester Q Ave. | | | Policy Number: |
| City CITY OF MARGATE | State New Jersey | ZIP Code 08402 | Company NAIC Number |

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: 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) | <u>6.4</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor | <u>14.8</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>13.7</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>5.7</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>6.0</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>N/A.</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
Paul M. Koelling, PLS, CFM

License Number
NJ24GS 04328800

Title
Licensed Land Surveyor

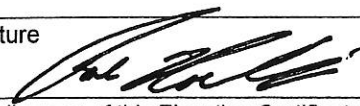
Company Name
Paul Koelling & Associates, LLC NJ C.O.A. No. 24GA28256300

Address
2161 Shore Road

City
Linwood

State
New Jersey

ZIP Code
08221

Signature


Date
10/06/2016

Telephone
(609) 927-0279

Place
Seal
Here

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 Vents Model #FO-316 engineered for 250 square inches of net area each

**B8 & B9.) FEMA Pre-FIRM Zone "AE".....Base Flood Elevation 10 ft. (NAVD88) converted = 11.3 ft. (NGVD29)

***C2a.) enclosure

****C2e.) exterior air unit elev. 13.7, electrical outlet elev. 11.1

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| 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. 9614 Winchester Q Ave. | | | Policy Number: |
| City CITY OF MARGATE | State New Jersey | ZIP Code 08402 | Company NAIC Number |

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.

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. 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 | |

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.
9614 Winchester Ave.

Policy Number

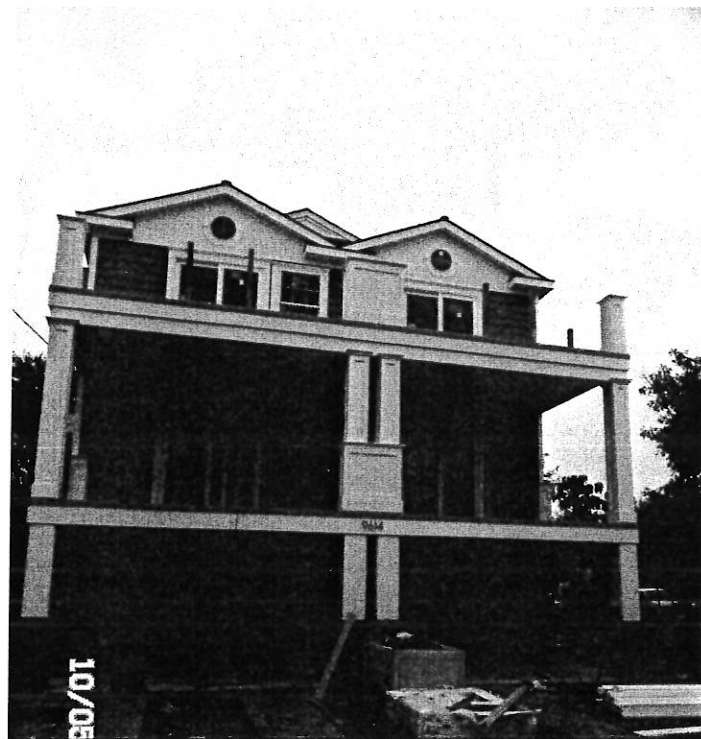
City
Margate

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.



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



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



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

State of New Jersey Certificate of Compliance

Address: 9614 WINCHESTER AVENUE
Town: Margate State: NJ Zip Code 08402

In accordance with Home Land Security~FEMA~NFIP~ Tech Bulletin 1, August 08 requirements for engineered openings in foundation walls, USA FLOOD/AIR FOUNDATION FLOOD VENT will allow for the automatic equalization of hydrostatic flood forces and pressure during flooding as well as for base 100 year flood or 1% chance of flooding in FEMA FIRM (Federal Insurance Rate Map) "A" zone properties. Additional information to meet FEMA/NFIP requirements for flood venting can be found in TB 1, August 08. The international Code Council (ICC) requires a minimum 3" diameter opening to be maintained during flooding to allow passage of debris through a flood vent. USA FLOOD/AIR FOUNDATION FLOOD VENT meets the regulation of Federal Emergency Management Agency's National Flood Insurance Program (44 CFR 60.3 (c)(5)) and Flood Resistant Design and Construction (ASCE 24-98).

I do hereby certify the USA FLOOD/AIR FOUNDATION FLOOD VENT openings are designed for installation in buildings to meet the FEMA, NFIP, and ICC code requirements for the equalizing of hydrostatic flood forces on exterior walls by allowing for the automatic entry and exit of floodwater during floods up to and including the base (100 year) flood.

One USA FLOOD/AIR VENT, with its single door and frame or double door and frame, will provide sufficient hydrostatic pressure equalization during a flood. Each vent will cover 250 square feet of enclosed building area as per FEMA, NFIP, or ICC instructions and calculations.

I further certify that the breakaway door tested releases under less than the required 20 lbs. of hydraulic pressure.

For Models FOPC/FOSS ~ Flood Only Vents
FAPC/FASS ~ Flood Air Vents
SEPC/SRSS ~ Single Door Retrofit Vents

Paul H. Reimer, Jr., P.E.
Reimer Associates, Inc.
PMB #207, 3140B Tilghman Street
Allentown, PA 18104

Paul H. Reimer
New Jersey Professional Engineer
#21670

