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

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

FEB 23 2017

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 a	agent/company, and (3) building owner.
SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name	Policy Number:

SAMUEL & MELIS	er's Name SA WOLF				Policy Numb	per.
A2. Building Stree Box No.	t Address (inc	cluding Apt., Unit, Suite	e, and/or Bldg. No.) or P.O	. Route and	Company N	AIC Number:
30 N. IROQUOIS A	VENUE					
City			State Now Jorsey		ZIP Code 08402	
MARGATE A3. Property Desc	ription (Lot a	nd Block Numbers, Tax	New Jersey x Parcel Number, Legal De		J04UZ	
LOT 15, BLOCK 2		, , , , , , , , , , , , , , , , , , , ,		,		
A4. Building Use (e.g., Residen	tial, Non-Residential, A	Addition, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longit	ude: Lat. 39	9.32972	Long. <u>-74.50389</u>	Horizontal Datum:	□ NAD 1	927 × NAD 1983
A6. Attach at least	2 photograpl	hs of the building if the	Certificate is being used t	o obtain flood insura	nce.	
A7. Building Diagra	am Number	8				
A8. For a building	with a crawls	pace or enclosure(s):				
a) Square foot	age of crawls	space or enclosure(s)	1,035 sq ft			
			wlspace or enclosure(s) w	ithin 1.0 foot above a	adjacent gra	de
		penings in A8.b1,67	70 sq in			Í
d) Engineered	flood opening	gs? ⊠ Yes ☐ No				
A9. For a building v	vith an attach	ed garage:				
a) Square foot	age of attach	ed garage0	sq ft			
b) Number of p	ermanent flo	ood openings in the atta	ached garage within 1.0 fo	ot above adjacent gr	ade	0
		ood openings in the atta		ot above adjacent gr	ade	0
	a of flood op	enings in A9.b	0 sq in	ot above adjacent gr	ade	0
c) Total net are	ea of flood op	enings in A9.b	0 sq in			0 14-282
c) Total net are d) Engineered B1. NFIP Community	ea of flood op flood opening SE ty Name & Co	enings in A9.b gs? Yes X No CTION B - FLOOD IN community Number	o sq in SURANCE RATE MAP B2. County Name	(FIRM) INFORMAT		ノ リー2を 2_ B3. State
c) Total net are d) Engineered	ea of flood op flood opening SE ty Name & Co	enings in A9.b gs? Yes X No CTION B - FLOOD IN community Number	o sq in	(FIRM) INFORMAT	TION	バイ・2を2 B3. State New Jersey
c) Total net are d) Engineered B1. NFIP Community	ea of flood op flood opening SE ty Name & Co	enings in A9.b gs? Yes X No CTION B - FLOOD IN community Number	o sq in SURANCE RATE MAP B2. County Name	(FIRM) INFORMAT	B9. Base (Zon	バリー2を2 B3. State New Jersey e Flood Elevation(s) e AO, use Base
c) Total net are d) Engineered B1. NFIP Communit CITY OF MARGATE B4. Map/Panel Number	sea of flood op flood opening SE sy Name & Co E CITY 3453	enings in A9.b gs? Yes X No CTION B - FLOOD IN community Number 1004 B6. FIRM Index	o sq in BSURANCE RATE MAP B2. County Name ATLANTIC B7. FIRM Panel	(FIRM) INFORMAT	B9. Base (Zon	バイ・2を2 B3. State New Jersey
c) Total net are d) Engineered B1. NFIP Communit CITY OF MARGATE B4. Map/Panel	SEIN SUFFIX B5. Suffix	enings in A9.b gs? Yes X No CTION B - FLOOD IN community Number 104 B6. FIRM Index Date	sq in SURANCE RATE MAP B2. County Name ATLANTIC B7. FIRM Panel Effective/ Revised Date	(FIRM) INFORMAT B8. Flood Zone(s)	B9. Base (Zon- Floor	バリー2を2 B3. State New Jersey e Flood Elevation(s) e AO, use Base
c) Total net are d) Engineered B1. NFIP Communit CITY OF MARGATE B4. Map/Panel Number 345304–0001	SEIN SUFFIX B5. Suffix	enings in A9.b gs? Yes × No CTION B - FLOOD IN community Number 104 B6. FIRM Index Date 01/30/2015	sq in SURANCE RATE MAP B2. County Name ATLANTIC B7. FIRM Panel Effective/ Revised Date	(FIRM) INFORMAT B8. Flood Zone(s) AE	B9. Base (Zon- Flood 9.0	バリー2を2 B3. State New Jersey e Flood Elevation(s) e AO, use Base
c) Total net are d) Engineered B1. NFIP Communit CITY OF MARGATE B4. Map/Panel Number 345304–0001 B10. Indicate the so	sea of flood opening SE Ty Name & Co CITY 3453 B5. Suffix F	gs? Yes X No CTION B ~ FLOOD IN community Number 104 B6. FIRM Index Date 01/30/2015 Base Flood Elevation (E	sq in SURANCE RATE MAP B2. County Name ATLANTIC B7. FIRM Panel Effective/ Revised Date 01/30/2015	(FIRM) INFORMAT B8. Flood Zone(s) AE epth entered in Item 8	B9. Base (Zone Flood) 9.0	バリー2を2 B3. State New Jersey e Flood Elevation(s) e AO, use Base
c) Total net are d) Engineered B1. NFIP Communit CITY OF MARGATE B4. Map/Panel Number 345304–0001 B10. Indicate the so	sea of flood operating SE Ty Name & Co CITY 3453 B5. Suffix F Durce of the E	enings in A9.b gs? Yes X No CTION B - FLOOD IN community Number 104 B6. FIRM Index Date 01/30/2015 Base Flood Elevation (E) Community Determine	sq in BSURANCE RATE MAP B2. County Name ATLANTIC B7. FIRM Panel Effective/ Revised Date 01/30/2015 BFE) data or base flood de	(FIRM) INFORMAT B8. Flood Zone(s) AE pth entered in Item 6	B9. Base (Zone Flood) 9.0	JY-2&2_ B3. State New Jersey e Flood Elevation(s) e AO, use Base d Depth)
c) Total net are d) Engineered B1. NFIP Communit CITY OF MARGATE B4. Map/Panel Number 345304–0001 B10. Indicate the so ☐ FIS Profile B11. Indicate elevate	SEA OF FIRM	enings in A9.b gs? Yes No CTION B - FLOOD IN ommunity Number 104 B6. FIRM Index Date 01/30/2015 Base Flood Elevation (E) Community Determined	sq in BSURANCE RATE MAP B2. County Name ATLANTIC B7. FIRM Panel Effective/ Revised Date 01/30/2015 BFE) data or base flood defined Other/Source:	B8. Flood Zone(s) AE Poth entered in Item B	B9. Base (Zon-Flood 9.0	リビー2を2 B3. State New Jersey e Flood Elevation(s) e AO, use Base d Depth)
c) Total net are d) Engineered B1. NFIP Communit CITY OF MARGATE B4. Map/Panel Number 345304–0001 B10. Indicate the so ☐ FIS Profile B11. Indicate elevate	SERVING SERVIN	enings in A9.b gs? Yes × No CTION B - FLOOD IN community Number 104 B6. FIRM Index Date 01/30/2015 Base Flood Elevation (E) Community Determined Sed for BFE in Item B9:	Sq in BSURANCE RATE MAP B2. County Name ATLANTIC B7. FIRM Panel Effective/ Revised Date 01/30/2015 BFE) data or base flood defined Other/Source:	B8. Flood Zone(s) AE Poth entered in Item B	B9. Base (Zon-Flood 9.0	リビー2を2 B3. State New Jersey e Flood Elevation(s) e AO, use Base d Depth)

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding	g information from Se	ection A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/o 30 N. IROQUOIS AVENUE	r Bldg. No.) or P.O. Ro	ute and Box No.	Policy Number:
City Sta MARGATE Ne	ate ZIF w Jersey 084	Code 102	Company NAIC Number
SECTION C – BUILDING EL	EVATION INFORMA	TION (SURVEY RI	EQUIRED)
C1. Building elevations are based on: Constructing *A new Elevation Certificate will be required when concentration of the Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a—h below according to the build Benchmark Utilized: LOCAL BENCH Indicate elevation datum used for the elevations in improved in the Elevation of the Elevations must be the same as an analysis of the next higher floor concentration of the Iowest horizontal structural members of the Elevation of machinery or equipment serious (Describe type of equipment and location in Comfound in Elevation of the Iowest adjacent (finished) grade next to building gour Highest adjacent (finished) grade next to building	on Drawings* Bu construction of the build VE, V1–V30, V (with E ding diagram specified Vertical Datum tems a) through h) belo Source: ne as that used for the B pace, or enclosure floor er (V Zones only) vicing the building ments) (LAG)	ilding Under Construing is complete. BFE), AR, AR/A, AR/ in Item A7. In Puert : NAVD 1988 bw. BFE.	uction* Finished Construction /AE, AR/A1–A30, AR/AH, AR/AO.
h) Lowest adjacent grade at lowest elevation of dec structural support	ck or stairs, including	<u>5</u> . <u>0</u>	X feet ☐ meters
SECTION D SURVEYOR,	ENGINEER, OR ARC	CHITECT CERTIFI	CATION 14-282
This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment un. Were latitude and longitude in Section A provided by a lice. Certifier's Name	veyor, engineer, or arc my best efforts to intel der 18 U.S. Code, Sec	hitect authorized by pret the data availa tion 1001.	law to certify elevation information.
HOWARD A. TRANSUE	GS33541		
Title PROFESSIONAL LAND SURVEYOR Company Name SCHAEFFER NASSAR SCHEIDEGG, CE, LLC			GS 3354/ Place Seal
Address 1425 CANTILLON BOULEVARD			Na.C.
City MAYS LANDING	State New Jersey	ZIP Code 08330	2/22/2017
Signature	Date 02/22/2017	Telephone (609) 625-7400	
Copy all pages of this Elevation Certificate and all attachmen	nts for (1) community of	ficial, (2) insurance a	gent/company, and (3) building owner.
Comments (including type of equipment and location, per ITEM A8b VENTS ARE CRAWL SPACE DOOR SYSTEM ITEM C2e IS THE A.C. PAD.		DEL 1632CS RATE	D AT 835 SQ. IN. EACH.

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the correspondi	ing information from Sec	tion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and 30 N. IROQUOIS AVENUE	Vor Bldg. No.) or P.O. Rou	te and Box No.	Policy Number:
	State ZIP New Jersey 0840	Code 02	Company NAIC Number
SECTION E – BUILDING ELE FOR ZONE	EVATION INFORMATIO AO AND ZONE A (WIT		REQUIRED)
For Zones AO and A (without BFE), complete Items E1-complete Sections A, B,and C. For Items E1–E4, use na enter meters.	–E5. If the Certificate is intatural grade, if available. C	ended to support a Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,
E1. Provide elevation information for the following and of the highest adjacent grade (HAG) and the lowest at a) Top of bottom floor (including basement,		es to show whethe	r the elevation is above or below
crawlspace, or enclosure) is		feet meter	s above or below the HAG.
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet meter	s above or below the LAG.
E2. For Building Diagrams 6–9 with permanent flood op	penings provided in Sectio	n 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	
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 floodplain management ordinance? Yes			cordance with the community's ertify this information in Section G.
SECTION F - PROPERTY OWN	ER (OR OWNER'S REPR	ESENTATIVE) CE	RTIFICATION 14-282
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	e who completes Sections e statements in Sections A	A, B, and E for Zor A, B, and E are corr	ne A (without a FEMA-issued or
Property Owner or Owner's Authorized Representative's	Name		
Address	City	Sta	te ZIP Code
Signature	Date /	Tele	ephone
Comments		· · · · · · · · · · · · · · · · · · ·	
Comments			

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IMPORTANT: in these spaces, copy the corr	esponding information from	n Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, St 30 N IROQUOIS AVENUE	uite, and/or Bldg. No.) or P.O	, Route and Box No.	Policy Number:
City MARGATE	State New Jersey	ZIP Code 08402	Company NAIC Number
SECTION	ON G - COMMUNITY INFOR	MATION (OPTIONAL)	
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete the ap	mmunity's floodplain mar oplicable item(s) and sign	nagement ordinance can complete below. Check the measurement
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)			
G2. A community official completed Section or Zone AO.	ion E for a building located in	Zone A (without a FEMA	x-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for commu	nity floodplain manageme	ent purposes.
G4. Permit Number	G5. Date Permit Issued		ate Certificate of ompliance/Occupancy Issued
G7. This permit has been issued for;	New Construction Subs	stantial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	basement)	feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding at t	the building site:	feet	meters Datum
G10. Community's design flood elevation:		feet	meters Datum
Local Official's Name	Title		
Community Name MARGATE		phone 609-822-	1918
Signature 27ck	Date	3/21/18	8
Comments (including type of equipment and loc	cation, per C2(e), if applicable	e) 7 7	
		MARGATE CI 900	TY BUILDING DEPARTMENT 11 Winches Ave. pate City, NJ 08402
			Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including Apr 30 N. IROQUOIS AVENUE	, Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City MARGATE	State New Jersey	ZIP Code 08402	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.

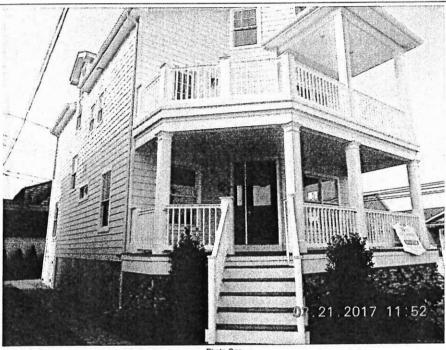


Photo One

Photo One Caption FRONT VIEW & LEFT SIDE VIEW

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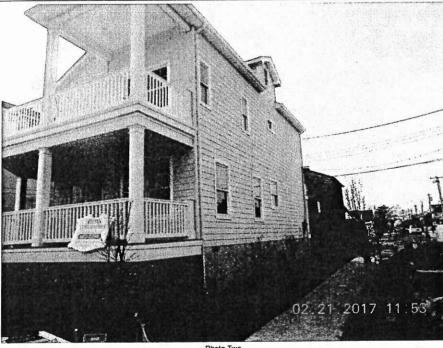


Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, o	opy the corresponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including 30 N. IROQUOIS AVENUE	a Apt., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
MARGATE	New Jersey	08402	

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.

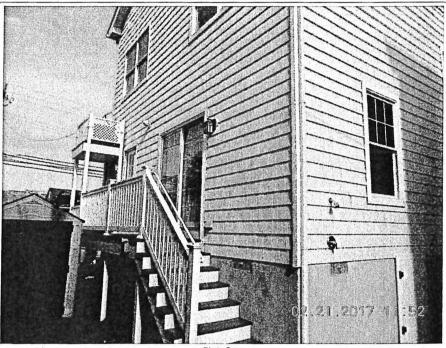


Photo One

Photo One Caption REAR VIEW

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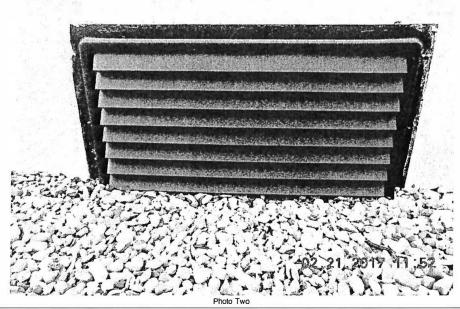


Photo Two Caption CRAWL SPACE DOOR SYSTEMS FLOOD VENT MODEL 1632CS TYPICAL OF 2

Certification of Engineered Flood Openings

In accordance with NFIP, FEMA TB 1-08, and ASCE/SEI 24-05

I hereby certify that the Crawl Space Door Systems flood vents 816CS, 1220CS, 1232CS, 1616CS, 1624CS, 1632CS, 2032CS, 2424CS, and 2436CS are designed in accordance with the requirements of the NFIP "Flood Insurance Manual" (2011) to provide automatic equalization of hydrostatic flood forces by allowing for the entry and exit of floodwaters, when properly installed and sized as set forth below. This certification follows the design requirements and specifications established in FEMA Technical Bulletin 1-08, "Openings in Foundation Walls and Walls of Enclosures Below Elevated Buildings in Special Flood Hazard Areas", and the ASCE Standard for "Flood Resistant Design and Construction" (ASCE/SEI 24-05).

Design Characteristics

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Section 2.6.2.2 of ASCE 24 provides an equation to determine the required <u>net area</u> of engineered openings (A_o) for a given <u>enclosed area</u> (A_e). This equation is based on the hydraulic formula for the flow rate across sharp edged orifices. I have utilized this equation to calculate 1) the respected flow rate through the individual openings between louvers; 2) the flow rate through the main frame opening in case the louver is blown out during a flood event; and 3) the flow rate of water flowing through louver blades following hydraulic short tube theory. The ultimate maximum total enclosed area (A_e) that can be serviced by a single vent has then been determined by utilizing the lowest flow rate of the three assessed scenarios for each vent and is listed in Table 1.

These values are based on the following assumptions:

- In absence of reliable data, the rates of rise and fall have been assumed with 5 feet/hour;
- The (maximum) difference between the exterior and interior floodwater levels has been assumed with 1 foot during base flood conditions;
- A factor of safety of 5 has been assumed, which is consistent with design practices related to protection of life and property;
- The net area of openings (A_o) as provided by the manufacturer.

Installation Requirements and Limitations

This certification will be voided if the following installation requirements and limitations are not enforced:

- There shall be a minimum of two openings on different sides of each enclosed area;
- The bottom of each required opening shall be no more than 1ft above the adjacent ground level;
- No temporary (e.g. during cold weather) or permanent solid cover may be placed into or over the flood vent that would block the automatic entry or exit of floodwaters at any time;
- Where analysis indicates rates of rise and fall greater than 5 ft/hr, the total enclosed area as given in Table 1 shall be reduced
 accordingly to account for the higher rates of rise and fall.

*}	Model	HxW [in]	A _o [in ²]	A _e [ft ²]
	816CS	8 x 16	105	205
	1220CS	12 x 20	235	500
	1232CS	12 x 32	305	645
	1616CS	16 x 16	180	395
	1624CS	16 x 24	310	670
∇	1632CS	16 x 32	405	835
	2032CS	20 x 32	630	1240
	2424CS	24 x 24	570	1230
	2436CS	24 x 36	850	1765

Table 1 Maximal total <u>enclosed area</u> (A_e) that can be served by each individual model based on the given <u>net area</u> of engineered openings (A_o)

Identification of the Building and Installed Flood Vents

The flood vent models marked in Table 1*) are being installed at the following building:

Building Address

30 N. IROQUOIS AVENUE, MARGATE, NJ

Certifying Design Professional

Name WILLIAM S. SWIDERSKI, P.E.

Title ENGINEER

Address 599 SHORE ROAD, SOMERS POINT, NJ 08244

Type of License PROFESSIONAL ENGINEER

License # 20482 Signature

Issuing State NEW JERSEY

