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

OMB No. 1660-0008 Expiration Date: November 30, 2022

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					RANCE COMPANY USE
A1. Building Owner's Name GEORGE H. FETTUS, III					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 116 N. SUMNER AVENUE					
City MARGATE		State New Jer	sey	ZIP Code 08402	
A3. Property Description (Lot and Block Nu LOT 16, BLOCK 320	imbers, Tax Parce	el Number, Le	gal Description, et	C.)	
A4. Building Use (e.g., Residential, Non-Re	esidential, Addition	n, Accessory,	etc.) RESIDEN	TIAL	
A5. Latitude/Longitude: Lat. 39.32722	Long	74.51139	Horizonta	Datum: NAD	1927 × NAD 1983
A6. Attach at least 2 photographs of the bu	ilding if the Certifi	cate is being i	used to obtain floo	d insurance.	
A7. Building Diagram Number8					
A8. For a building with a crawlspace or end	losure(s):				
a) Square footage of crawlspace or en	closure(s)		1106.50 sq ft		
b) Number of permanent flood opening	s in the crawlspac	e or enclosur	e(s) within 1.0 foot	above adjacent gra	ade 5
c) Total net area of flood openings in A	8.b	2060.00 sq ir	1		
d) Engineered flood openings?	es No				
A9. For a building with an attached garage:					
a) Square footage of attached garage		N/A sq ff			
b) Number of permanent flood opening	s in the attached	garage within	1.0 foot above adja	acent grade N/A	
c) Total net area of flood openings in A	9.b	N/A sq	in		
d) Engineered flood openings?	es 🗙 No				
SECTION B -	FLOOD INSURA	NCF RATE	MAP (FIRM) INF	ORMATION "7	0-146
B1. NFIP Community Name & Community N		B2. County		OKINATION 2	B3. State
CITY OF MARGATE 345304		ATLANTIC			New Jersey
B4. Map/Panel B5. Suffix B6. FIRM Date	Eff	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, use	levation(s) e Base Flood Depth)
34001C0434 F 08-28-201			AE	8.0	
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: NGVD 1929 X NAVD 1988 Other/Source:					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes 🗵 No					
Designation Date:	CBRS	□ OPA			

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IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPAN				
Building Street Address (including Apt., Unit, Suite, and/or 116 N. SUMNER AVENUE	Bldg. No.) or P.O. Rou	te and Box No.	Policy Nu	mber:
City Stat	e ZIP	Code	Company	NAIC Number
MARGATE New	Jersey 0840	02		
SECTION C – BUILDING ELI	EVATION INFORMAT	ION (SURVEY RE	QUIRED)	
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when construction		ding Under Constru ng is complete.	ction* 🔀	Finished Construction
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the build Benchmark Utilized. LOCAL BENCH		n Item A7. In Puerto		
Indicate elevation datum used for the elevations in it NGVD 1929 NAVD 1988 Other/S		W .		
Datum used for building elevations must be the same		FE.	Check	the measurement used.
a) Top of bottom floor (including basement, crawlsp	ace, or enclosure floor)		8.8 ×	feet meters
b) Top of the next higher floor			12.2 ×] feet
c) Bottom of the lowest horizontal structural membe	r (V Zones only)		N/A	feet meters
d) Attached garage (top of slab)			N/A	feet meters
e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com	icing the building ments)		12.2 ×] feet
f) Lowest adjacent (finished) grade next to building	(LAG)		8.0	feet meters
g) Highest adjacent (finished) grade next to building	(HAG)		9.2 ×	feet meters
 h) Lowest adjacent grade at lowest elevation of dec structural support 	k or stairs, including		, 8.0 ×] feet meters
SECTION D - SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIFIC	CATION	20-146
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	my best efforts to inter	pret the data availal	law to cert ble. I under	ify elevation information
Were latitude and longitude in Section A provided by a lice	ensed land surveyor?	⊠ Yes □ No	Che	eck here if attachments.
Certifier's Name HOWARD A. TRANSUE	License Number GS33451	,		
Title PROFESSIONAL LAND SURVEYOR				G53354/ Place
Company Name SCHAEFFER NASSAR SCHEIDEGG, CE, LLC		ø		Seal
Address 1425 CANTILLON BOULEVARD				Here
City MAYS LANDING	State New Jersey	ZIP Code 08330		11/5/2020
Signature	Date 11-05-2020	Telephone (609) 625-7400	Ext.	
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) ITEM A8b VENTS ARE CRAWL SPACE DOOR SYSTEMS FLOOD VENTS MODEL 816CS (4) AND 2032CS (1), RATED AT 205 SQ. IN. AND 1240 SQ. IN. RESPECTIVELY. ITEM C2e IS THE A.C. PAD. PICTURES TAKEN 11-03-2020.				

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and 116 N. SUMNER AVENUE	d/or 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 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) isb) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet meters			
E2. For Building Diagrams 6–9 with permanent flood o	penings provided in Sectio	n A Items 8 and/or			
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	s above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		feet meters			
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	e, is the top of the bottom f No Unknown. The	loor elevated in acc	cordance with the community's sertify this information in Section G.		
SECTION F - PROPERTY OWN	NER (OR OWNER'S REPR	RESENTATIVE) CE	RTIFICATION 20-146		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	ve who completes Sections Are statements in Sections Are	A, B, and E for Zoi A, B, and E are corr	ne A (without a FEMA-issued or ect to the best of my knowledge.		
Property Owner or Owner's Authorized Representative's	s Name				
Address	City	Sta	te ZIP Code		
Signature	Date	Tel	ephone		
Comments		**			
			X :		
			Check here if attachments.		

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corre	esponding information from	n Section A.	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, State of the Street Address) and the Street Address (including Apt., Unit, State of the Street Address) and the Street Address (including Apt., Unit, Street Address) and the Street Address (including Apt., Unit, Street Address) and the Street Address (including Apt., Unit, Street Address) and the Street Address (including Apt., Unit, Street Address) and the Street Address (including Apt., Unit, Street Address) and the Street Address (including Apt., Unit, Street Address) and the Street Address (including Apt., Unit, Street Address) and the Street Address (including Apt., Unit, Street Address) and the Street Address (including Apt., Unit, Street Address) and the Street Address (including Apt., Unit, Street Address) and the Street Address (including Apt., Unit, Street Address) and the Street Address (including Apt., Unit, Street Address (including A	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		
SECTIO	ON G - COMMUNITY INFOR	MATION (OPTIONAL)	20-146		
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		nagement ordinance can complete		
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 Zone AO.					
G3. The following information (Items G4–	-G10) is provided for commur	ity floodplain manageme	ent purposes.		
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction Subs	tantial 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	the building site:	feet	meters Datum		
G10. Community's design flood elevation:		feet	meters Datum		
Local Official's Name	Title	CE	es		
Community Name MAKC	Tele	phone 607 · 8 7	22.1974		
Signature C/ C	Date	11,	/12/2020		
Comments (including type of equipment and location, per C2(e), if applicable)					
	. John J. Herrings and				
			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Building Street Address (including Apt., Un 116 N. SUMNER AVENUE	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

FRONT VIEW AND RIGHT SIDE VIEW Photo One Caption

20-146

Clear Photo One



Photo Two Caption FRONT VIEW AND LEFT SIDE VIEW

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., L 116 N. SUMNER AVENUE	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.

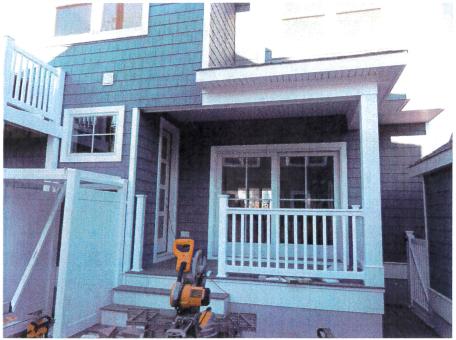


Photo Three Caption REAR VIEW

20-146

Clear Photo Three



Photo Four

Photo Four Caption CRAWL SPACE DOOR SYSTEMS FLOOD VENT MODEL 816CS, TYPICAL OF 4

Clear Photo Four

Certification of Engineered Flood Openings

In accordance with the Code of Federal Regulations for the National Flood Insurance Program

I hereby certify that the Crawl Space Door Systems flood vents 816CS, 1220CS, 1232CS, 1616CS, 1624CS, 1632CS, 2032CS, 2424CS, and 2436CS are designed are designed in accordance with the requirements of the Code of Federal Regulations for the National Flood Insurance Program (NFIP) 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. Vent opening measurements were measured and certified by Mr. Christopher Mark Loney, Virginia P.E. NO. 029000. Detailed calculations were prepared as outlined In "Review of certification of Engineered Flood Openings," prepared by Dr. Georg Reichard, Associate Professor of Building Construction, Virginia Tech (available upon request from Crawl Space Door Systems, Inc. billy@crawlspacedoors.com)

Design Characteristics

Section 2.6.2.2 of ASCE/SEI 24-05 provides an equation to determine the required net area of engineered openings (A_o) for a given enclosed area (Ae). 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 restricted flow rate through the main frame opening in case the louver is blown out during a flood event; 2) the flow rate through the individual openings between louver blades; and 3) the flow rate through projected openings between louver blades following hydraulic short-tube theory. The 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 at a minimum rate of 5 feet/hour;
- The (maximum) difference between the exterior and interior floodwater levels shall not exceed 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.

*)	Model	HXW	A _o	A.
		[in]	[in²]	[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
				1100

Table 1 Maximum total enclosed area (A_e) that can be serviced by each individual model based on the given net area of engineered openings (Ao)

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 subject to flooding;
- The bottom of all openings shall be no higher than one foot above the higher of the interior or exterior grade that is immediately under each opening;
- 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 data or analyses indicate more rapid rates of rise and fall, the required number of openings shall be increased to account for those different conditions. The number or size of the openings may be decreased if data or analyses indicate rates of rise

Certifying Design Professional		
		20-146
Name WILLIAM S. SWIDERSKI, P.E.	Title ENGINEER	
Company SWIDERSKI ASSSOCIATES		VALUE .
Address 599 SHORE ROAD SOMERS POINT, NJ	7	
License PROFESSIONAL ENGINEER	License No. 24GE02048200	
Signature: 1 1		and the state of the
// X(\) /// //////	Date:	
///m// 1/1/	11-10-17	11.5%
dentification of the Building and Installed Flo	and Vents (D. O.)	
he flood vent models marked in Table 1*) are being installed	(By Others)	

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

Building Address

16 N. SUMNER AVENUE, MARCATE

5pring 2012