

**ELEVATION CERTIFICATE**  
FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

Expires May 31, 1996

ATTENTION: Use of this certificate does not provide a waiver of the flood insurance purchase requirement. This form is used only to provide elevation information necessary to ensure compliance with applicable community floodplain management ordinances, to determine the proper insurance premium rate, and/or to support a request for a Letter of Map Amendment or Revision (LOMA or LOMR). Instructions for completing this form can be found on the following pages.

**SECTION A PROPERTY INFORMATION**

<b>BUILDING OWNER'S NAME</b> ROBBIN J. GILBERT	<b>FOR INSURANCE COMPANY USE</b>
<b>STREET ADDRESS (Including Apt., Unit, Suite and/or Bldg. Number) OR P.O. ROUTE AND BOX NUMBER</b> 103 WILSON ROAD NEPTUNE NJ.	<b>POLICY NUMBER</b>
<b>OTHER DESCRIPTION (Lot and Block Numbers, etc.)</b> Block 500 Lot 996 NEPTUNE TWP TAX MAP	<b>COMPANY NAIC NUMBER</b>
<b>CITY</b> NEPTUNE	<b>STATE</b> N.J.
	<b>ZIP CODE</b> 07753

**SECTION B FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

Provide the following from the proper FIRM (See Instructions):

<b>1. COMMUNITY NUMBER</b> 340317	<b>2. PANEL NUMBER</b> 0603	<b>3. SUFFIX</b> C	<b>4. DATE OF FIRM INDEX</b> 3/1/84	<b>5. FIRM ZONE</b> A-7	<b>6. BASE FLOOD ELEVATION</b> (in AO Zones, use depth) 9.0
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7. Indicate the elevation datum system used on the FIRM for Base Flood Elevations (BFE): ☒ NGVD '29 ☐ Other (describe on back)
8. For Zones A or V, where no BFE is provided on the FIRM, and the community has established a BFE for this building site, indicate the community's BFE:  feet NGVD (or other FIRM datum—see Section B, Item 7).

**SECTION C BUILDING ELEVATION INFORMATION**

1. Using the Elevation Certificate Instructions, indicate the diagram number from the diagrams found on Pages 5 and 6 that best describes the subject building's reference level: 8
- 2(a). FIRM Zones A1-A30, AE, AH, and A (with BFE). The top of the reference level floor from the selected diagram is at an elevation of  feet NGVD (or other FIRM datum—see Section B, Item 7).
- (b). FIRM Zones V1-V30, VE, and V (with BFE). The bottom of the lowest horizontal structural member of the reference level from the selected diagram, is at an elevation of  feet NGVD (or other FIRM datum—see Section B, Item 7).
- (c). FIRM Zone A (without BFE). The floor used as the reference level from the selected diagram is  feet above ☐ or below ☐ (check one) the highest grade adjacent to the building.
- (d). FIRM Zone AO. The floor used as the reference level from the selected diagram is  feet above ☐ or below ☐ (check one) the highest grade adjacent to the building. If no flood depth number is available, is the building's lowest floor (reference level) elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown
3. Indicate the elevation datum system used in determining the above reference level elevations: ☐ NGVD '29 ☐ Other (describe under Comments on Page 2). (NOTE: If the elevation datum used in measuring the elevations is different than that used on the FIRM [see Section B, Item 7], then convert the elevations to the datum system used on the FIRM and show the conversion equation under Comments on Page 2.)
4. Elevation reference mark used appears on FIRM: ☒ Yes ☐ No (See Instructions on Page 4)
5. The reference level elevation is based on: ☒ actual construction ☐ construction drawings  
(NOTE: Use of construction drawings is only valid if the building does not yet have the reference level floor in place, in which case this certificate will only be valid for the building during the course of construction. A post-construction Elevation Certificate will be required once construction is complete.)
6. The elevation of the lowest grade immediately adjacent to the building is:  feet NGVD (or other FIRM datum—see Section B, Item 7).

**SECTION D COMMUNITY INFORMATION**

1. If the community official responsible for verifying building elevations specifies that the reference level indicated in Section C, Item 1 is not the "lowest floor" as defined in the community's floodplain management ordinance, the elevation of the building's "lowest floor" as defined by the ordinance is:  feet NGVD (or other FIRM datum—see Section B, Item 7).
2. Date of the start of construction or substantial improvement \_\_\_\_\_

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

### FOR INSURANCE COMPANY USE

A1. Building Owner's Name Township of Neptune

Pump station

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

127 North Riverside Drive

Company NAIC Number:

City Neptune

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

Tax Map Sheet 43.04, Block 501, Lot 1362

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Non-Residential (sewage pumping station)

A5. Latitude/Longitude: Lat. N 40-11-55.4 Long. W 74-02-39.4

Horizontal Datum: ☐ NAD 1927 ☒ 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 2

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) \_\_\_\_\_ sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade \_\_\_\_\_  
c) Total net area of flood openings in A8.b \_\_\_\_\_ sq in  
d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage \_\_\_\_\_ sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade \_\_\_\_\_  
c) Total net area of flood openings in A9.b \_\_\_\_\_ sq in  
d) Engineered flood openings? ☐ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
Township of Neptune - 340317

B2. County Name  
Monmouth

B3. State  
NJ

B4. Map/Panel Number  
0333

B5. Suffix  
F

B6. FIRM Index Date  
September 25, 2009

B7. FIRM Panel  
Effective/Revised Date  
September 25, 2009

B8. Flood  
Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
9

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: DK7749

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>-10.6</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>-1.7</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)   | _____        | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  | _____        | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | <u>4.0</u>   | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>6.3</u>   | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>8.2</u>   | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | _____        | <input 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.

- ☐ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a  
☐ Check here if attachments. licensed land surveyor? ☒ Yes ☐ No

Certifier's Name Peter R. Avakian, PE & PLS

License Number 28142

Signature Peter R. Avakian

Company Name Leon S. Avakian, Inc

Address 788 Wayside Road

City Neptune

State NJ ZIP Code 07753

Signature Peter R. Avakian

Date 4/14/14

Telephone (732) 922-9229

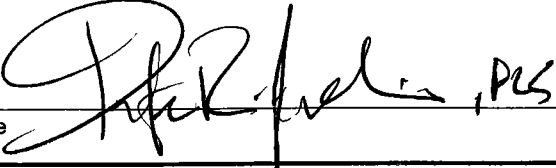
**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 127 North Riverside Drive		Policy Number:
City Neptune	State NJ ZIP Code 07753	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments See attached sheet

Signature 

Date 4/14/12

**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 8–9 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's or Owner's Authorized Representative's Name \_\_\_\_\_

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments.**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
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments.

ATTACHEMENT TO FLOOD ELEVATION CERTIFICATE  
127 North Riverside Drive, Neptune Township, NJ  
Block 501, Lot 1362

Comments:

C2a: The bottom floor (elevation -10.6) is the sub-basement containing only valves and piping appurtenant to the sewage pumps.

C2b: The next higher floor (elevation -1.7) is the basement containing valves and piping appurtenant to the sewage pumps and one electric space heater. The main floor, containing offices, bathrooms and mechanical equipment is at elevation 8.0.

C2e: Machinery & Equipment:

Generator fuel tank is outside at elevation = 10.1.

Generator is outside at elevation = 12.3.

Electric space heaters are in the first basement at 4.0 and the main floor at 12.2

Hot water heater is on the main floor at 14.3

Lowest electrical panel is outside at 11.6

**Building Photographs**

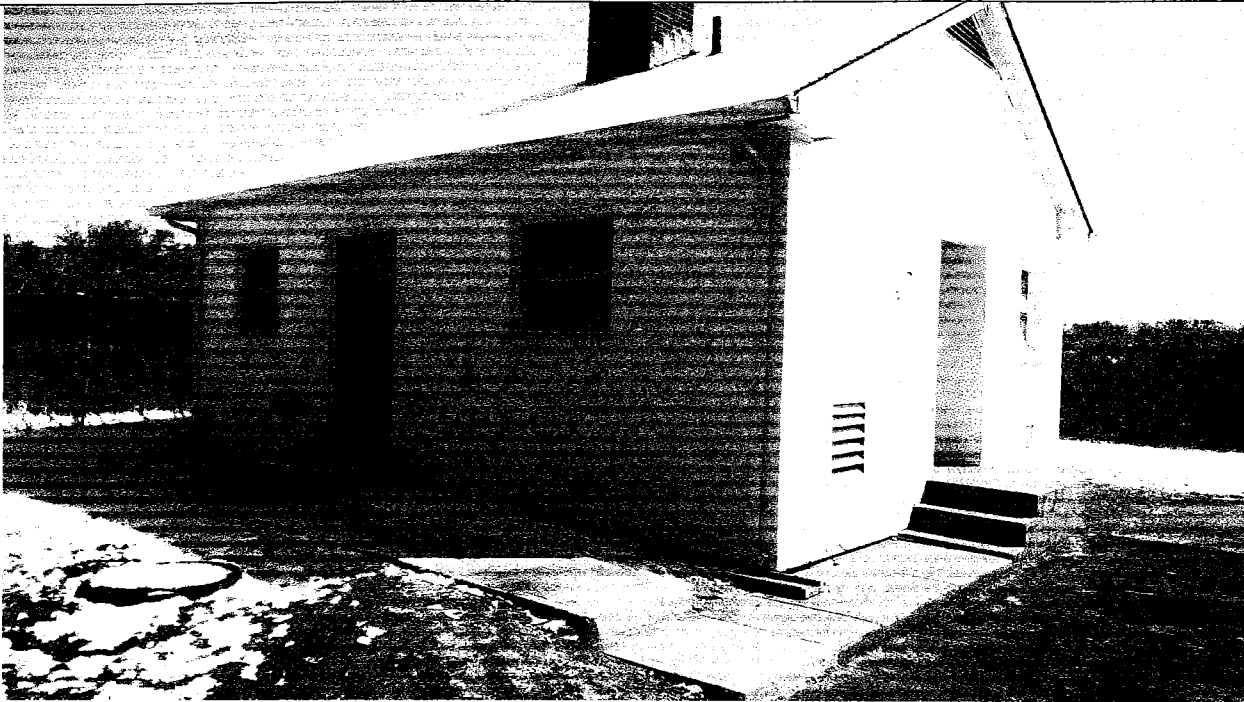
See Instructions for Item A6.

**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.  
27 North Riverside Drive

Policy Number:



Front View



Rear View

City Neptune

State NJ

ZIP Code 07753

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.

**Building Photographs**

Continuation Page

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
127 North Riverside Drive

City Neptune

State NJ

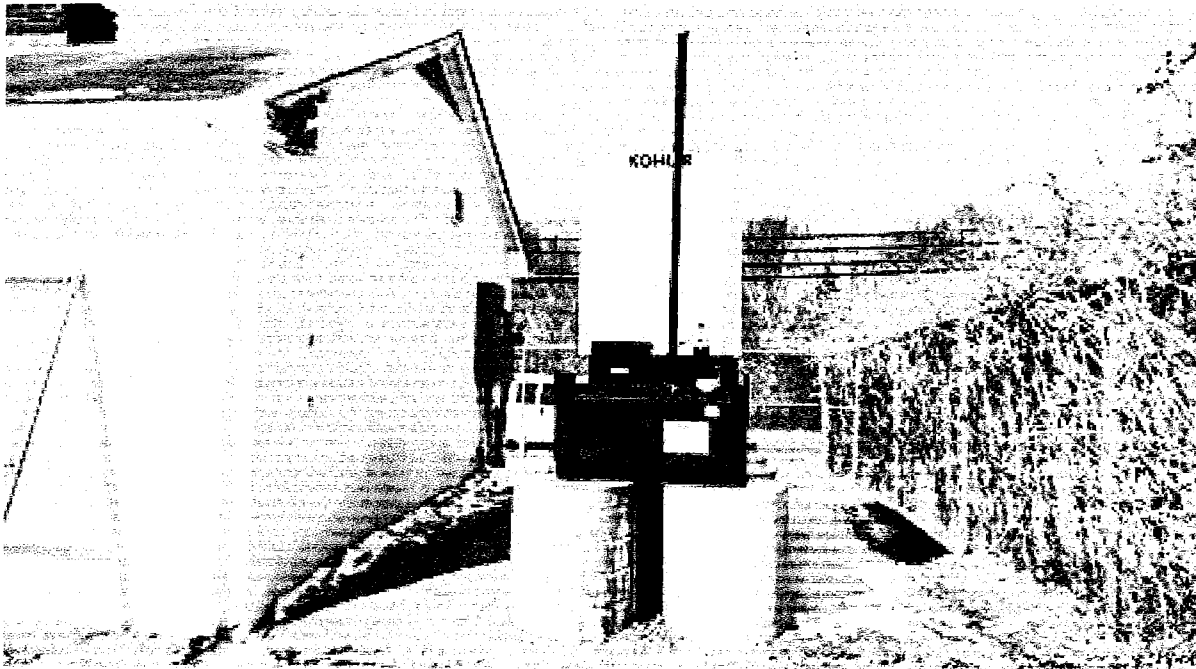
ZIP Code 07753

FOR INSURANCE COMPANY USE

Policy Number:

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.



Left Side View

# ELEVATION CERTIFICATE

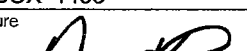
IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>KELLY ARMADA</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>207 NORTH RIVERSIDE DRIVE</b>		Company NAIC Number:
City <b>NEPTUNE TOWNSHIP</b>	State <b>NJ</b>	ZIP Code <b>07753</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>TAX MAP LOT 1386 BLOCK 502.01</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>RESIDENTIAL</b>		
A5. Latitude/Longitude: Lat. <b>N 40 11 59.28</b> Long. <b>W 74 02 39.50</b> 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 <b>5</b>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft		a) Square footage of attached garage <b>N/A</b> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade
c) Total net area of flood openings in A8.b		c) Total net area of flood openings in A9.b
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>NEPTUNE TOWNSHIP 340317</b>		B2. County Name <b>MONMOUTH</b>		B3. State <b>NJ</b>	
B4. Map/Panel Number <b>34025C0333</b>	B5. Suffix <b>G</b>	B6. FIRM Index Date <b>01/31/2014</b>	B7. FIRM Panel Effective/Revised Date <b>01/31/2014</b>	B8. Flood Zone(s) <b>AE</b>	B9. Base Flood Elevation(s) (Zone A0, use base flood depth) <b>11</b>
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 type="checkbox"/> NGVD 1929 <input checked="" 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					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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: <b>R.M. # 28, R.M. # 29 OLD FIRM</b> Vertical Datum: <b>NAVD 1988</b>	
Indicate elevation datum used for the elevations in items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> 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)	<b>15 . 15</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<b>24 . 5 +/-</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<b>N/A</b> <input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<b>N/A</b> <input 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)	<b>15 . 15</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>5 . 0</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>5 . 6</b> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<b>5 . 0</b> <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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Check here if attachments.			
Certifier's Name <b>PAUL K. LYNCH LS</b>		License Number <b>GS 35855</b>	
Title <b>LAND SURVEYOR</b>		Company Name <b>PAUL K. LYNCH LS</b>	
Address <b>P.O. BOX 1453</b>		City <b>WALL</b>	State <b>NJ</b>
Signature 		ZIP Code <b>07719</b>	Telephone <b>(732) 681-4035</b>

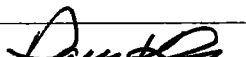
**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 207 NORTH RIVERSIDE DRIVE			Policy Number:
City NEPTUNE TOWNSHIP	State NJ	ZIP Code 07753	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments A8a AREA OF HOUSE FRAMING IS APPROX. 1100 s.f.  
C2e ELEVATION SHOWN IS BOTTOM OF FURNACE ON FIRST FLOOR

Signature  Date 06/06/2014

**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 8–9 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.**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–G9) 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 ImprovementG8. 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 \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

☐ Check here if attachments.

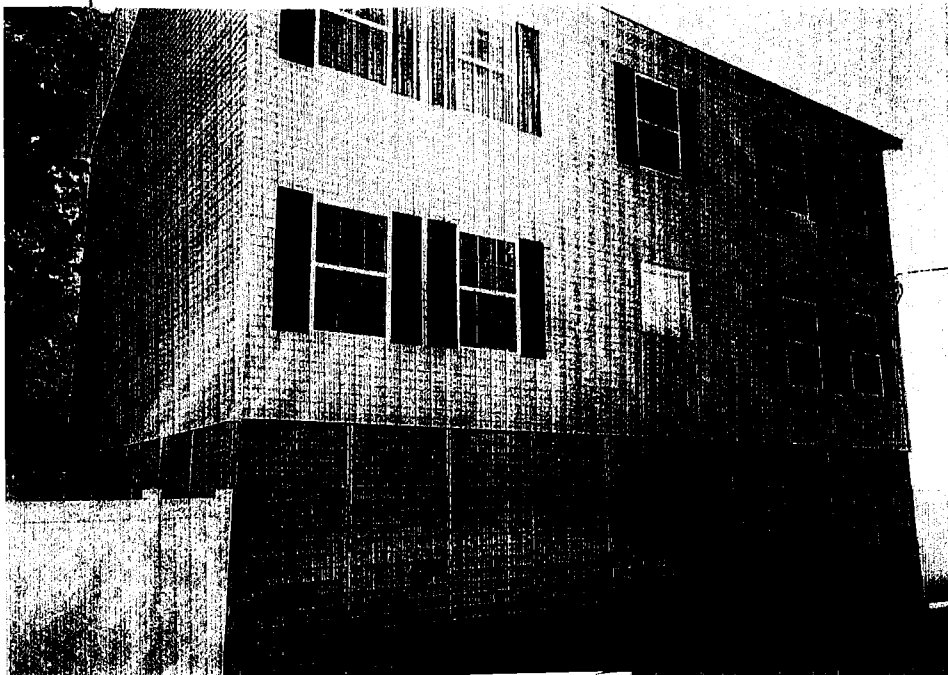
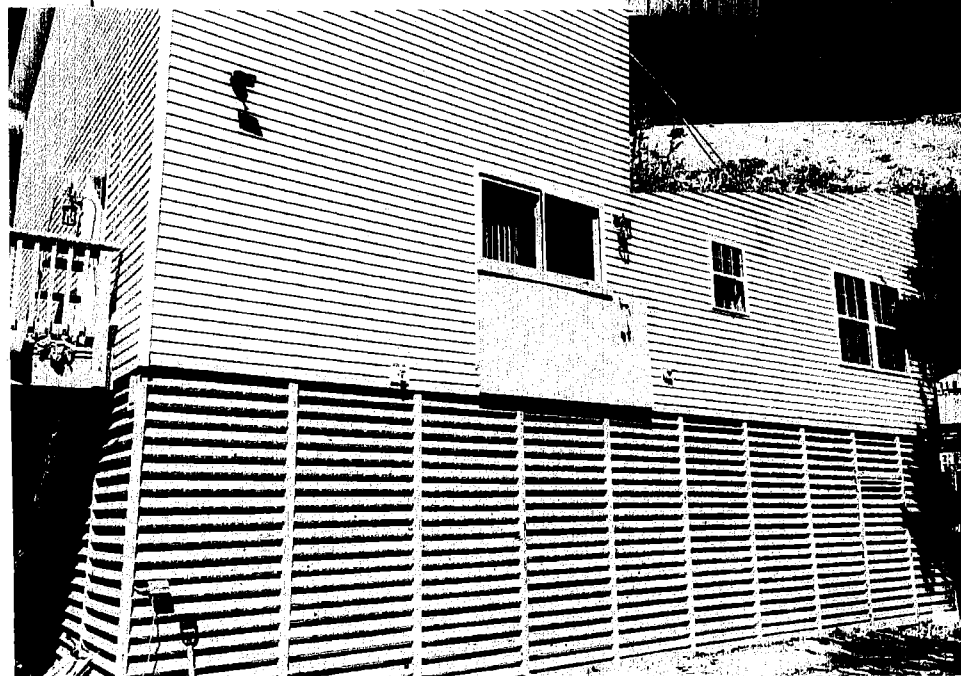
## BUILDING PHOTOGRAPHS

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 207 NORTH RIVERSIDE DRIVE			Policy Number:
City NEPTUNE TOWNSHIP	State NJ	ZIP Code 07753	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.

6-06-14

LEFT  
FRONTRIGHT  
FRONT

REAR

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

### FOR INSURANCE COMPANY USE

A1. Building Owner's Name **KELLY ARMADA**

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
**207 NORTH RIVERSIDE DRIVE**

Company NAIC Number:

City **NEPTUNE TOWNSHIP**

State **NJ**

ZIP Code **07753**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
**TAX MAP LOT 1386 BLOCK 502.01**

*Pilings only*

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **RESIDENTIAL**

A5. Latitude/Longitude: Lat. **N 40 11 59.28**

Long. **W 74 02 39.50**

Horizontal Datum: ☐ NAD 1927 ☒ 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 **5**

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) **COMMEN** sq ft

b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade **N/A**

c) Total net area of flood openings in A8.b \_\_\_\_\_ sq in

d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

a) Square footage of attached garage **N/A** sq ft

b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade \_\_\_\_\_

c) Total net area of flood openings in A9.b \_\_\_\_\_ sq in

d) Engineered flood openings? ☐ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
**NEPTUNE TOWNSHIP 340317**

B2. County Name  
**MONMOUTH**

B3. State  
**NJ**

B4. Map/Panel Number

B5. Suffix

B6. FIRM Index Date

B7. FIRM Panel Effective/ Revised Date

B8. Flood Zone(s)

B9. Base Flood Elevation(s) (Zone AO, use base flood depth)

**34025C0333**

**F**

**09/25/2009**

**09/25/2009**

**AE**

**9**

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

☒ NAVD 1988

☐ Other/Source: \_\_\_\_\_

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 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: **R.M. # 28, R.M. # 29 OLD FIRM**

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) **COM . MENT**

☐ feet ☐ meters

b) Top of the next higher floor **N/A**

☐ feet ☐ meters

c) Bottom of the lowest horizontal structural member (V Zones only) **N/A**

☐ feet ☐ meters

d) Attached garage (top of slab) **N/A**

☐ feet ☐ meters

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) **COM . MENT**

☐ feet ☐ meters

f) Lowest adjacent (finished) grade next to building (LAG) **4 . 9**

☒ feet ☐ meters

g) Highest adjacent (finished) grade next to building (HAG) **5 . 7**

☒ feet ☐ meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **N/A**

☐ feet ☐ meters

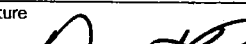
## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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.

☒ Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

☒ Check here if attachments.

Certifier's Name <b>PAUL K. LYNCH LS</b>		License Number <b>GS 35855</b>	
Title <b>LAND SURVEYOR</b>		Company Name <b>PAUL K. LYNCH LS</b>	
Address <b>P.O. BOX 1453</b>		City <b>WALL</b>	State <b>NJ</b>
Signature 		Date <b>12/16/2013</b>	ZIP Code <b>07719</b>
		Telephone <b>(732) 681-4035</b>	

PLACE  
SEAL  
HERE

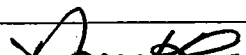
**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>207 NORTH RIVERSIDE DRIVE</b>			Policy Number:	
City <b>NEPTUNE TOWNSHIP</b>	State <b>NJ</b>	ZIP Code <b>07753</b>	Company NAIC Number:	

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments A8a FLOOR "BOX" IS CONSTRUCTED ON PILES PRESENTLY, PROPOSED DWELLING IS 27.42' x 40.0'  
C2a ELEVATION OF TOP OF "BOX" IS 14.34, ELEVATION OF BOTTOM OF JOISTS IS 13.38  
C2e THERE ARE NO UTILITIES SERVICING "STRUCTURE" AT TIME OF FIELD SURVEY

Signature  Date **12/16/2013**

**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 8–9 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.**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–G9) 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 \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

☐ Check here if attachments.

## BUILDING PHOTOGRAPHS

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>207 NORTH RIVERSIDE DRIVE</b>			Policy Number:
City <b>NEPTUNE TOWNSHIP</b>	State <b>NJ</b>	ZIP Code <b>07753</b>	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.

12-13-13

LEFT  
FRONTRIGHT  
FRONTRIGHT  
REAR

PAUL K. LYNCH  
LAND SURVEYORS  
P.O. BOX 1453  
WALL, NEW JERSEY 07719  
PHONE (732) 681-4035  
EMAIL- pklynchls@optimum.net

RECEIVED  
JAN 09 2014

**\* SURVEYORS REPORT 381113502.01-1386 \***

December 16, 2013

Reference:

Kelly Armada  
207 North Riverside Drive  
Tax map Lot 1386 Block 502.01  
Neptune Township, N.J.

The following flood elevation certificate has been completed using the official FIRM on record as of this date.

It should be noted that FEMA has put together advisory flood maps which apparently will be officially adopted next year.

According to the map labeled "Best Available Flood Hazard Data" the property in question will be considered to be in flood zone AE with an ABFE = 11 ( 1% )

If you have questions or clarifications please feel free to call our office.

Sincerely yours,

  
Paul K. Lynch LS



**Neptune**  
Township - NJ

*Where Community, Business & Tourism Prosper*

**William J. Doolittle**  
**Director of Code Enforcement**  
**Construction Official**  
**Building Inspector**  
**Fire Inspector**  
**Floodplain Administrator**

**25 Neptune Blvd**  
**Neptune, NJ 07753**  
**732-988-5200 ext. 268**  
**Fax 732-988-0062**

**[bdoolittle@Neptunetownship.org](mailto:bdoolittle@Neptunetownship.org)**

January 15, 2014

Kelly Armada  
207 North Riverside Drive  
Neptune, NJ 07753

Re: 207 North Riverside Drive, Neptune, NJ 07753  
Block 502.01 Lot 1386

Dear Ms. Armada,

I am in receipt of an Elevation Certificate and have conducted a site inspection of the above referenced location. The pilings and timber perimeter ("floor box") have been installed. The elevation to the top of the "box" is 14.34 feet. The proposed first floor of the new single family house as shown on the construction documents is 15 feet.

The General Ordinances of the Township of Neptune, Chapter XIX entitled Flood Damage Prevention requires the first floor to be at or above the base flood elevation. The base flood elevation for this location is 10 feet, but the structure is required to be elevated to 12 feet according to the regulations. The construction documents show the structure located above the timber perimeter. This would comply with the requirement to have the first floor at or above the base flood elevation.

Please do not hesitate to contact me should you have any questions or need further assistance.

Sincerely,

William J. Doolittle  
Floodplain Manager

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name: PAMELA CALLENDER  
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
209 NORTH RIVERSIDE DRIVE  
City NEPTUNE TOWNSHIP State NJ ZIP Code 07753

### FOR INSURANCE COMPANY USE

Policy Number:  
Company NAIC Number:

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
BLOCK 502.01 LOT 1368

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL  
A5. Latitude/Longitude: Lat. 40 11 59 Long. -74 02 40 Horizontal Datum: ☐ NAD 1927 ☒ 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 5  
A8. For a building with a crawlspace or enclosure(s):  
a) Square footage of crawlspace or enclosure(s) N/A sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade N/A  
c) Total net area of flood openings in A8.b N/A sq in  
d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:  
a) Square footage of attached garage N/A sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  
c) Total net area of flood openings in A9.b N/A sq in  
d) Engineered flood openings? ☐ Yes ☐ No

No Photos Received Photos From owner

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
NEPTUNE 340317

B2. County Name  
MONMOUTH

B3. State  
NJ

B4. Map/Panel Number 34025C0333	B5. Suffix F	B6. FIRM Index Date 9-25-2009	B7. FIRM Panel Effective/Revised Date 9-25-2009	B8. Flood Zone(s) "AE"	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) "9"
------------------------------------	-----------------	----------------------------------	--	---------------------------	--

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: KV0806

Vertical Datum: NAVD 88

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>5.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>16.0</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 type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input 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>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>5.4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>6.4</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 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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No  
☒ Check here if attachments.

Certifier's Name WILLIAM J. FIORE

License Number GS-35362

Title PRESIDENT

Company Name WILLIAM J. FIORE, INC.

Address 263 BRICK BOULEVARD, UNIT 5 City BRICK

State NJ ZIP Code 08723

Signature [Signature] Date 6-25-2014

Telephone 732-920-5100

<b>IMPORTANT:</b> 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. 209 NORTH RIVERSIDE DRIVE		Policy Number:
City NEPTUNE TOWNSHIP	State NJ ZIP Code 077523	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments **\*\*REFERENCE: PRELIMINARY FLOOD INSURANCE RATE MAP, DATED JANUARY 31, 2014: SUFFIX G, MAP PANEL 0333, ZONE: AE, ELEVATION 10.**

Signature

Date 6-25-2014

**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 8–9 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's or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments.**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	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**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.

9 NORTH RIVERSIDE DRIVE

Policy Number:

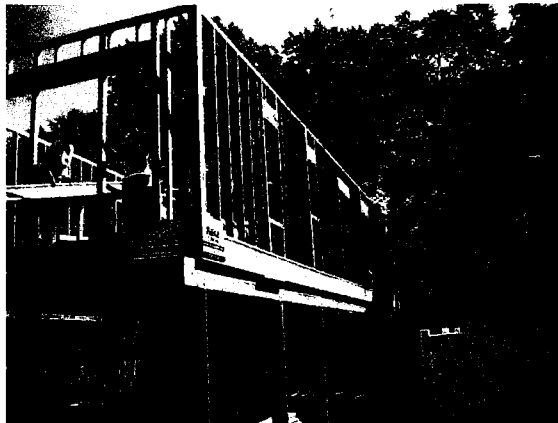
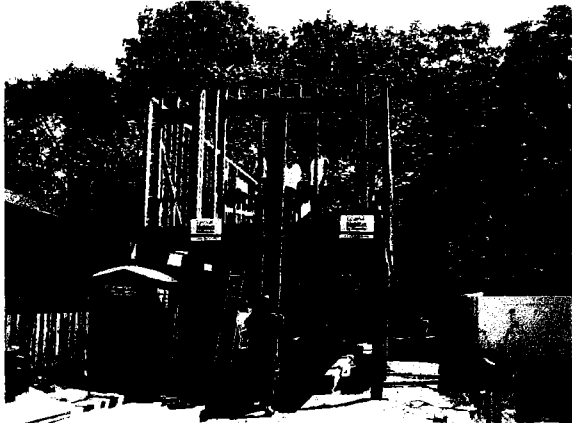
City NEPTUNE TOWNSHIP

State NJ

ZIP Code 07753

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.



ALL PICTURES TAKEN 6-24-2014.



# Neptune

*Township - NJ*

*Where Community, Business & Tourism Prosper*

**William J. Doolittle**  
**Director of Code Enforcement**  
**Construction Official**  
**Building Inspector**  
**Fire Inspector**  
**Floodplain Administrator**

**25 Neptune Blvd**  
**Neptune, NJ 07753**  
**732-988-5200 ext. 268**  
**Fax 732-988-0062**

**[bdoolittle@Neptunetownship.org](mailto:bdoolittle@Neptunetownship.org)**

July 9, 2014

Pamela Callender  
209 North Riverside Drive  
Neptune, NJ 07753

Re: 209 North Riverside Drive, Neptune, NJ 07753  
Block 502.01 Lot 1388

Dear Ms. Callender,

This is to certify that the principle structure (excluding machinery or equipment servicing the building) at the above referenced location complies with the requirements of the General Ordinances of the Township of Neptune, Chapter XIX entitled Flood Damage Prevention and other related requirements.

- An Elevation Certificate indicating the building is under construction has been completed and submitted.
- The bottom floor is at or above adjacent grade on at least one side.
- The top of the next higher floor is at or above the required elevation.
- The structure is on pilings with no enclosure.
- The elevation of machinery and equipment servicing the building is not included on the Elevation Certificate

This certification is for compliance with the requirements for structures in a Special Flood Hazard Area only and is not a certificate of occupancy. An Elevation Certificate indicating Finished Construction that includes photographs and the elevation of machinery or equipment servicing the building will be required.

Please do not hesitate to contact me should you have any questions or need further assistance.

Sincerely,

William J. Doolittle  
Floodplain Manager

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

### FOR INSURANCE COMPANY USE

A1. Building Owner's Name PAMELA CALLENDER

Policy Number

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
209 NORTH RIVERSIDE DRIVE

Company NAIC Number

City NEPTUNE TOWNSHIP

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
BLOCK 502.01 LOT 1388

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 40 11 59 Long. -74 02 40 Horizontal Datum: ☐ NAD 1927 ☒ 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 5 & 6

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) 448 sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0  
c) Total net area of flood openings in A8.b 0 sq in  
d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage OVER sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 3  
c) Total net area of flood openings in A9.b 171 sq in  
d) Engineered flood openings? ☒ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
NEPTUNE 340317

B2. County Name  
MONMOUTH

B3. State  
NJ

B4. Map/Panel Number  
34025C0333

B5. Suffix  
F

B6. FIRM Index Date  
9-25-2009

B7. FIRM Panel  
Effective/Revised Date  
9-25-2009

B8. Flood  
Zone(s)  
\*\*AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
\*\*g

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: KV0806 Vertical Datum: NAVD 88

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) 6.28 ☒ feet ☐ meters  
b) Top of the next higher floor 16.04 ☒ feet ☐ meters  
c) Bottom of the lowest horizontal structural member (V Zones only) N/A - ☐ feet ☐ meters  
d) Attached garage (top of slab) 6.28 ☒ feet ☐ meters  
e) Lowest elevation of machinery or equipment servicing the building AC11.49 ☒ feet ☐ meters  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) 6.0 ☒ feet ☐ meters  
g) Highest adjacent (finished) grade next to building (HAG) 6.6 ☒ feet ☐ meters  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 6.4 ☒ feet ☐ 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.

- ☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No  
☒ Check here if attachments.

Certifier's Name WILLIAM J. FIORE

License Number GS-35362

Title PRESIDENT

Company Name WILLIAM J. FIORE, INC.

Address 263 BRICK BOULEVARD, UNIT 5 City BRICK

State NJ ZIP Code 08723

Signature

Date 10-8-2015

Telephone 732-920-5100

PLACE  
SEAL  
HERE

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A:</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 209 NORTH RIVERSIDE DRIVE		Policy Number:
City NEPTUNE TOWNSHIP	State NJ ZIP Code 07753	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments \*\*REFERENCE: PRELIMINARY FLOOD-INSURANCE RATE MAP, DATED JANUARY 30, 2015: SUFFIX G, MAP PANEL 0333, ZONE: AE, ELEVATION 10.  
GARAGE AREA IS INCLUDED IN TOTAL ENCLOSED AREA IN A8a. THERE ARE TWO (2) "MASTER VENT" FLOOD VENTS IN GARAGE WALLS. EACH VENT IS MARKED 57 SQ. IN.

Signature

Date 10-8-2015

**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 8–9 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's or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments.**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	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments.

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name **EDWARD FARRELL**  
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
**215 N. RIVERSIDE DRIVE**  
City **NEPTUNE** State **NJ** ZIP Code **07753**

## FOR INSURANCE COMPANY USE

Policy Number:  
Company NAIC Number:

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
**LOT 1393, BLOCK 502.01**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **RESIDENTIAL**

A5. Latitude/Longitude: Lat. **N 40deg12.032min** Long. **W74deg02.674min**

Horizontal Datum: ☐ NAD 1927 ☐ 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 **8**

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) **1386** sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade **0**  
c) Total net area of flood openings in A8.b **0** sq in  
d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

- a) Square footage of attached garage **216** sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade **0**  
c) Total net area of flood openings in A9.b **0** sq in  
d) Engineered flood openings? ☐ Yes ☒ No

*Existing Structure*

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
**NEPTUNE TWP.**

B2. County Name  
**MONMOUTH**

B3. State  
**NJ**

B4. Map/Panel Number  
**34025C0333**

B5. Suffix  
**F**

B6. FIRM Index Date  
**9/25/09**

B7. FIRM Panel Effective/Revised Date  
**9/25/09**

B8. Flood Zone(s)  
**X SHADED**

B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 1' MAX. DEPTH

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: **see comments**

B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: **LOCAL**

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)  | <b>9.1</b>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor  | <b>12.1</b> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)  | <b>N.A.</b> | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)   | <b>10.6</b> | <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) | <b>10.0</b> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)   | <b>8.6</b>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)  | <b>11.1</b> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                               | <b>N.A.</b> | <input 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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No  
☐ Check here if attachments.

Certifier's Name **MICHAEL T. CANNON**

License Number **NJ PE LS 34691**

Title **PRESIDENT**

Company Name **THE CANNON GROUP, PC**

Address **100 JACK MARTIN BLVD.**

City **BRICK**

State **NJ**

ZIP Code **08724**

Signature *Michael T. Cannon*

Date **6/27/13**

Telephone **732-458-0003**

*10/30/13 spoke to owner in office about adding Flood Vents to lower Insurance. He will check it out.*

In these spaces, copy the corresponding information from Section A.

FOR INSURANCE COMPANY USE

Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

Policy Number:

OVERSIDE DRIVE

Company NAIC Number:

NEPTUNE

State NJ

ZIP Code 07753

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments ABFE MAPS PLACE THE PROPERTY IN ZONE A 1% ELEVATION 10

Signature

Date 6/27/13

## 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 8–9 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's or Owner's Authorized Representative's Name

Address

City

State

ZIP Code

Signature

Date

Telephone

Comments

☐ Check here if attachments.

## 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 ImprovementG8. 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

Community Name

Telephone

Signature

Date

Comments

☐ Check here if attachments.

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name **Adeline A. Napolitano**

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No.  
**404 Concourse West**

Company NAIC Number:

City **Township of Neptune**

State **NJ**

ZIP Code **07753**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
**Tax Lot 3 in Block 552**

**Existing Structure**

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **Residential**

A5. Latitude/Longitude: Lat. **40d 11m 28.40s N** Long. **74d 01m 41.86s W** Horizontal Datum: ☐ NAD 1927 ☒ 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 **2**

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) **n/a** sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade \_\_\_\_\_ sq in  
c) Total net area of flood openings in A8.b \_\_\_\_\_ sq in  
d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage **n/a** sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade \_\_\_\_\_ sq in  
c) Total net area of flood openings in A9.b \_\_\_\_\_ sq in  
d) Engineered flood openings? ☐ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
**Township Of / 340317**

B2. County Name  
**Monmouth**

B3. State  
**NJ**

B4. Map/Panel Number  
**34025C / 0334**

B5. Suffix  
**F**

B6. FIRM Index Date  
**09/25/2009**

B7. FIRM Panel Effective/  
Revised Date  
**09/25/2009**

B8. Flood Zone(s)  
**AE**

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
**9**

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: **GPS** Vertical Datum: **NAVD1988**

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) **3.1** ☒ feet ☐ meters  
b) Top of the next higher floor **10.7** ☒ feet ☐ meters  
c) Bottom of the lowest horizontal structural member (V Zones only) **n/a** ☐ feet ☐ meters  
d) Attached garage (top of slab) **n/a** ☐ feet ☐ meters  
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) **3.8** ☒ feet ☐ meters  
f) Lowest adjacent (finished) grade next to building (LAG) **8.0** ☒ feet ☐ meters  
g) Highest adjacent (finished) grade next to building (HAG) **8.5** ☒ feet ☐ meters  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support **8.0** ☒ feet ☐ 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.

☒ Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

☐ Check here if attachments.

Certifier's Name <b>Michael J. Williams</b>	License Number <b>NJ GS25800</b>		
Title <b>Land Surveyor</b>	Company Name <b>Michael J. Williams Land Surveying, LLC</b>		
Address <b>56 Main Avenue</b>	City <b>Ocean Grove</b>	State <b>NJ</b>	ZIP Code <b>07756</b>
Signature <i>Michael J. Williams</i>	Date <b>12/17/2013</b>	Telephone <b>(732) 988-6440</b>	

PLACE  
SEAL  
HERE

**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. 404 Concourse West			Policy Number:	
City Township of Neptune	State NJ	ZIP Code 07753	Company NAIC Number:	

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments Mechanical equipment servicing building are a furnace and hot water heater located in the basement raised to an elevation of 3.8 feet NAVD 1988. There is an unheated enclosed porch on the front of the building with a finished floor elevation of 10.3 feet. The latest FEMA Flood Advisory Information indicates that the dwelling will be situated in the AE 10 Zone on future maps.

Signature *Michael J. Williams* Date 12/17/2013**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 8–9 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.**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 ImprovementG8. 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 \_\_\_\_\_


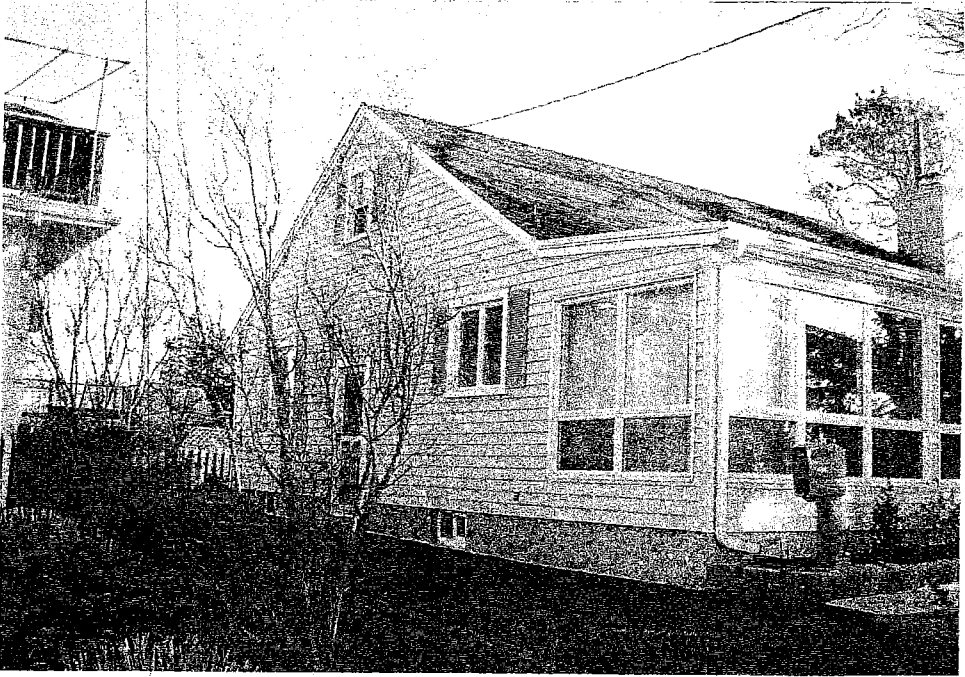
Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

☐ Check here if attachments.

See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 404 Concourse West			Policy Number:	
City Township of Neptune	State NJ	ZIP Code 07753	Company NAIC Number:	
<p>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.</p>				
			<p>FRONT SIDE VIEW 12/17/13</p>	
			<p>LEFT SIDE VIEW 12/17/13</p>	

**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.  
404 Concourse West

Policy Number:

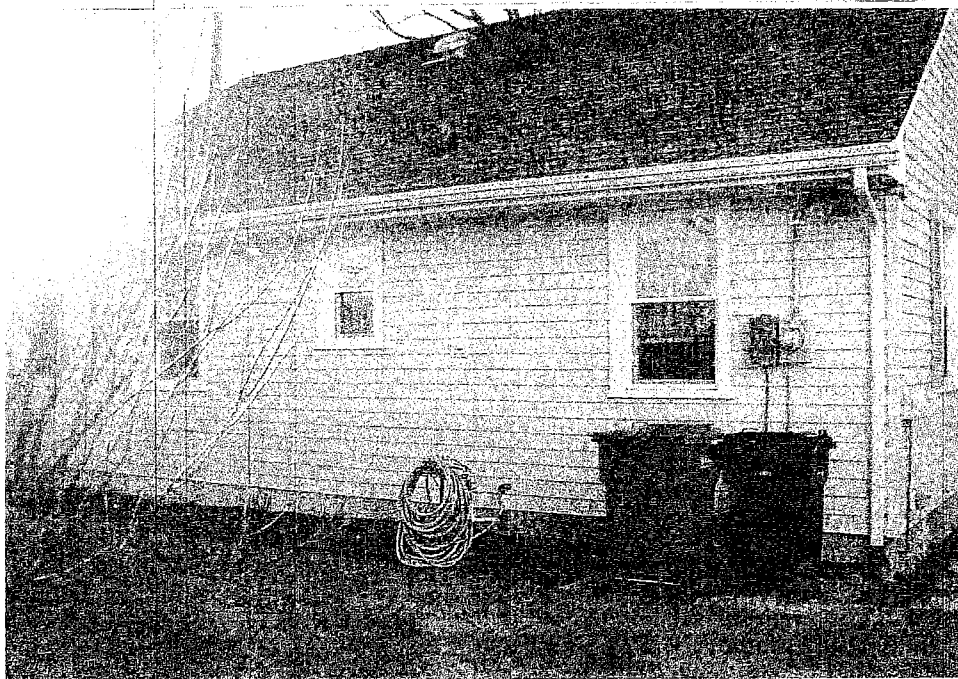
City  
Township of NeptuneState  
NJZIP Code  
07753

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.



RIGHT SIDE  
VIEW  
12/17/13



REAR VIEW  
12/17/13

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name James A. & Terrilyn Stowe		FOR INSURANCE COMPANY USE	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 36 Waterview Court		Policy Number:	
City Neptune	State NJ	Company NAIC Number:	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 8 Block 552		<i>Existing structure</i>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>			
A5. Latitude/Longitude: Lat. <u>N 40° 11' 26.34"</u> Long. <u>W 74° 01' 39.78"</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>9</u>			
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:	
a) Square footage of crawlspace or enclosure(s) <u>732</u> sq ft	a) Square footage of attached garage <u>565</u> sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>16</u>	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 A8.b <u>2048</u> sq in	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	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 Township of Neptune / 340317		B2. County Name Monmouth County		B3. State NJ	
B4. Map/Panel Number 34025C0334	B5. Suffix F	B6. FIRM Index Date 9/29/2006	B7. FIRM Panel Effective/Revised Date 9/29/2006	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9.0'
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 type="checkbox"/> NGVD 1929 <input checked="" 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					

## 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: Smart Net Vertical Datum: NAVD 88  
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>CS5.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor:	<u>FF9.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>GF6.7</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>9.6</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>6.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>6.6</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>6.3</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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No  
☒ Check here if attachments.

Certifier's Name Robert Vallee PLS License Number 43276  
Title Land Surveyor Company Name Vallee Surveying, LLC  
Address 1010 Commons Way City Toms River State NJ ZIP Code 08755  
Signature *Robert Vallee* Date 1/7/15 Telephone 732-244-2373

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name James A. & Terrilyn Stowe		FOR INSURANCE COMPANY USE	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 36 Waterview Court		Policy Number:	
City Neptune	State NJ	Company NAIC Number:	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 8 Block 552		<i>Existing structure</i>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>			
A5. Latitude/Longitude: Lat. <u>N 40° 11' 26.34"</u> Long. <u>W 74° 01' 39.78"</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>9</u>			
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:	
a) Square footage of crawlspace or enclosure(s) <u>732</u> sq ft	a) Square footage of attached garage <u>565</u> sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>16</u>	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 A8.b <u>2048</u> sq in	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	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 Township of Neptune / 340317		B2. County Name Monmouth County		B3. State NJ	
B4. Map/Panel Number 34025C0334	B5. Suffix F	B6. FIRM Index Date 9/29/2006	B7. FIRM Panel Effective/Revised Date 9/29/2006	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9.0'
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 type="checkbox"/> NGVD 1929 <input checked="" 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					

## 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: Smart Net Vertical Datum: NAVD 88  
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>CS5.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor:	<u>FF9.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>GF6.7</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>9.6</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>6.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>6.6</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>6.3</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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No  
☒ Check here if attachments.

Certifier's Name Robert Vallee PLS License Number 43276  
Title Land Surveyor Company Name Vallee Surveying, LLC  
Address 1010 Commons Way City Toms River State NJ ZIP Code 08755  
Signature *Robert Vallee* Date 1/7/15 Telephone 732-244-2373

# ELEVATION CERTIFICATE, page 2

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 36 Waterview Court		Policy Number:
City Neptune	State NJ ZIP Code 07753	Company NAIC Number:

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments: The hot water heater is located at elev. =9.6'. \*\*\*Preliminary Updated FEMA Flood Hazard Data BFE=AE10. Release date 3/28/14\*\*\* This information is to be used for insurance purposes only.

*Robert Hill*

Signature

Date 1/7/15

## 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 8–9 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's or Owner's Authorized Representative's Name

Address

City

State

ZIP Code

Signature

Date

Telephone

Comments

☐ Check here if attachments

## 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
<p>G7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement</p> <p>G8. Elevation of as-built lowest floor (including basement) of the building: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p> <p>G9. BFE or (in Zone AO) depth of flooding at the building site: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p> <p>G10. Community's design flood elevation: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p>		

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments

**Building Photographs**

See Instructions for Item A6.

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
36 Waterview Court

City Neptune

State NJ

ZIP Code 07753

FOR INSURANCE COMPANY USE

Policy Number:

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.

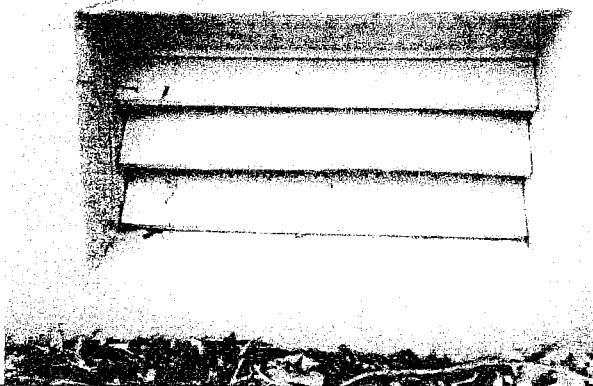
Front View (12/19/14)



Rear View (12/19/14)

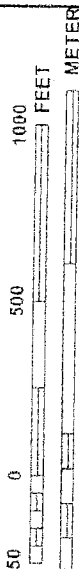


Flood Opening (12/19/14)





MAP SCALE 1" = 500'



NFIP

**FIRM**

FLOOD INSURANCE RATE MAP

MONMOUTH COUNTY,  
NEW JERSEY  
(ALL JURISDICTIONS)

PANEL 334 OF 457

(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

LEGEND

SYMBOL	DESCRIPTION	SYMBOL	DESCRIPTION
(Symbol)	WATER	(Symbol)	SEWER
(Symbol)	RAILROAD	(Symbol)	WATER
(Symbol)	RAILROAD	(Symbol)	WATER
(Symbol)	RAILROAD	(Symbol)	WATER
(Symbol)	RAILROAD	(Symbol)	WATER
(Symbol)	RAILROAD	(Symbol)	WATER
(Symbol)	RAILROAD	(Symbol)	WATER
(Symbol)	RAILROAD	(Symbol)	WATER
(Symbol)	RAILROAD	(Symbol)	WATER

Subject to User: The Map Number shown below should be used when purchasing map copies. The Community Number shown above should be used on separate applications to the subject community.



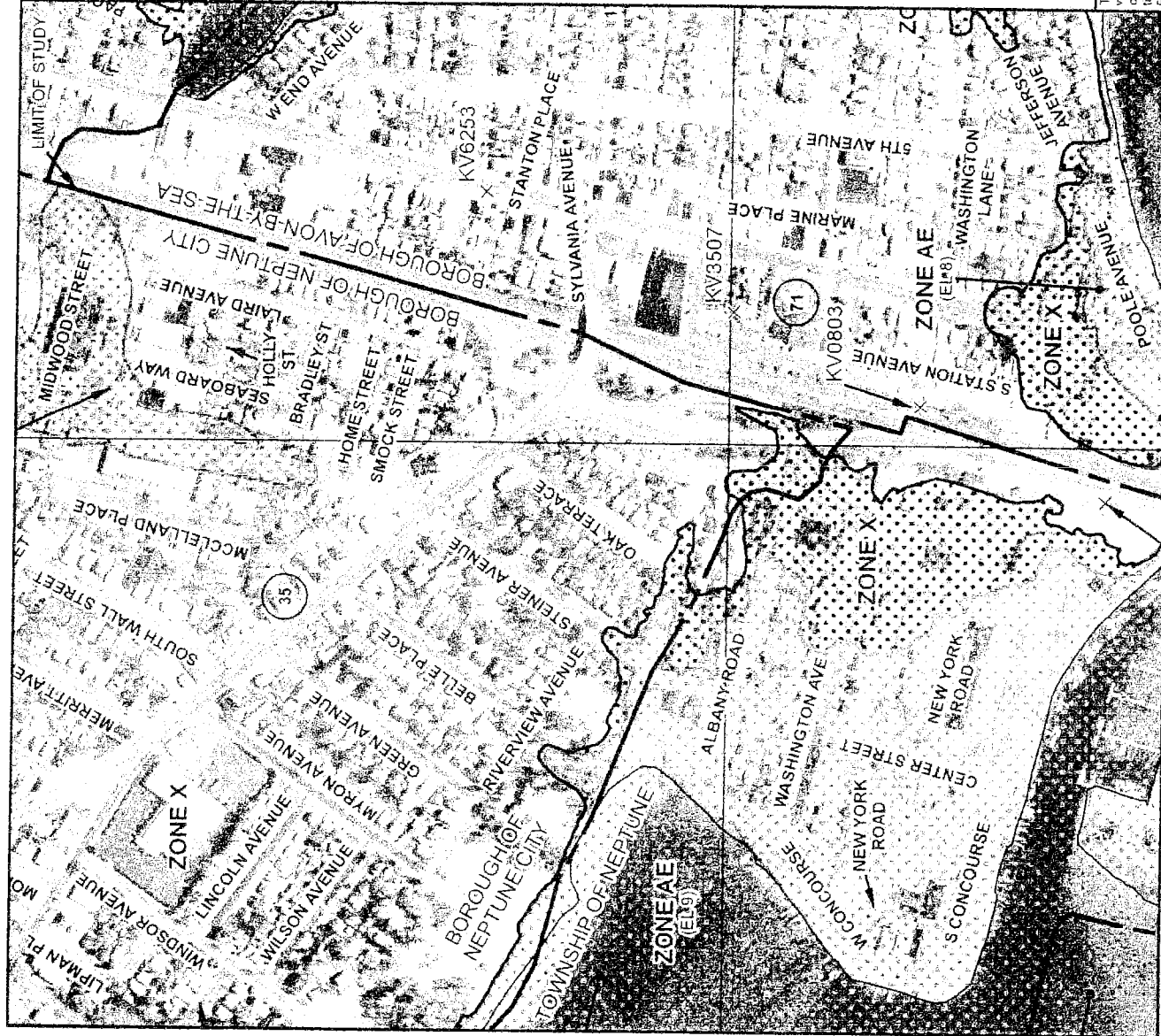
MAP NUMBER  
34025C0334F

EFFECTIVE DATE  
SEPTEMBER 25, 2009

Federal Emergency Management Agency

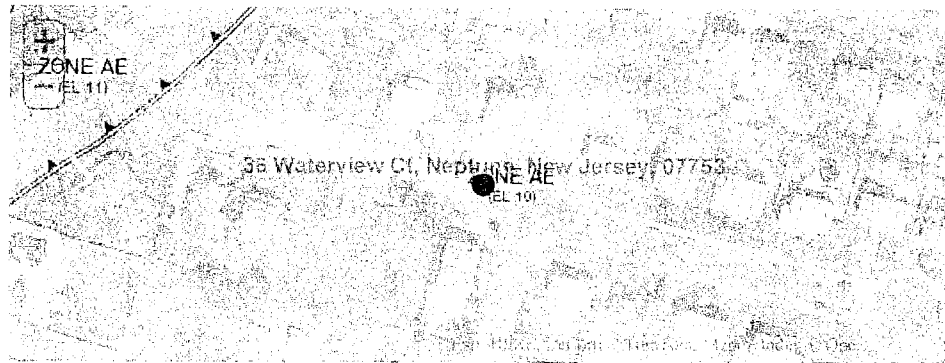
NATIONAL FLOOD INSURANCE PROGRAM

This is an official copy of a portion of the above referenced flood map. It was extracted using FIRM On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps, check the FEMA Flood Map Store at [www.fema.gov](http://www.fema.gov).



36 WATERVIEW COURT, NEPTUNE [Get Details](#) [Clear Details](#)

Approximate Address Identified: 34 Watervien Ct, Neptune, New Jersey, 07753



## Updated FEMA Flood Hazard Data



*FEMA flood hazard data currently available for coastal areas of New York and New Jersey is provided below to help you understand the current flood risk to your property and to guide Sandy recovery and rebuilding efforts.*

*Note: This tool provides flood zone and Base Flood Elevation (BFE) information for areas affected by coastal flood risk. However, riverine flood zone information will also be returned by the tool in communities where preliminary FIRMs have been released.*

[illegible]

### Effective Flood Insurance Data

*This information is from the effective Flood Insurance Rate Map for your community. It is used to determine who must buy flood insurance and how much it costs. It may also be used by your community to regulate development in flood prone areas.*

Attribute Name	Attribute Value
What is my property's current effective date? 	12/1/2014
What is my property's current effective date for  ?	12/1/2014

SHEET 55

SEAVIEW CIR (formerly Trenton Rd)

NEPTUNE CITY BORO

AVON BY THE SEA BORO

(CONNECTION TO MEMORIAL DR)

7120 CONCORSE<sup>®</sup> CONDOMINIUM  
BLOCK #607 LOT 1

BLOCK 5607 LOT 3

Case No.	Flower	Size
C-102	5.05	1.70
C-103	5.05	1.70
C-104	5.05	1.70
C-105	5.05	1.70
C-106	5.05	1.70
C-107	5.05	1.70
C-108	5.05	1.70
C-109	5.05	1.70
C-110	5.05	1.70
C-111	5.05	1.70
C-112	5.05	1.70

ROBERT R. HEGGAN

TAX MAP  
TOWNSHIP OF NEPTUNE

Dei. De. s. 1101  
Dei. De. s. 1102

95

# ELEVATION CERTIFICATE, page 2

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 36 Waterview Court		Policy Number:
City Neptune	State NJ ZIP Code 07753	Company NAIC Number:

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments: The hot water heater is located at elev. =9.6'. \*\*\*Preliminary Updated FEMA Flood Hazard Data BFE=AE10. Release date 3/28/14\*\*\* This information is to be used for insurance purposes only.

*Robert Hill*

Signature

Date 1/7/15

## 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 8–9 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's or Owner's Authorized Representative's Name

Address

City

State

ZIP Code

Signature

Date

Telephone

Comments

☐ Check here if attachments

## 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	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments

**Building Photographs**

See Instructions for Item A6.

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
36 Waterview Court

City Neptune

State NJ

ZIP Code 07753

FOR INSURANCE COMPANY USE

Policy Number:

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.

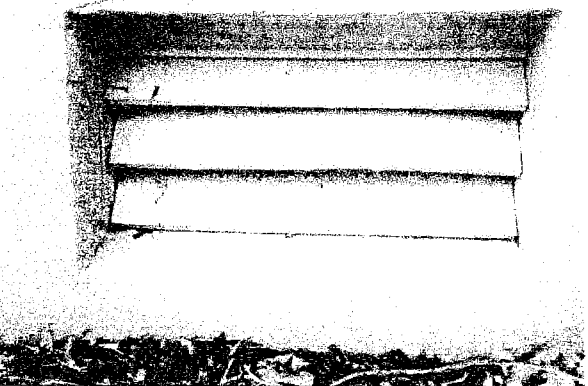
Front View (12/19/14)



Rear View (12/19/14)



Flood Opening (12/19/14)





PANEL 0334F

**FIRM**

FLOOD INSURANCE RATE MAP  
MONMOUTH COUNTY,  
NEW JERSEY  
(ALL JURISDICTIONS)

PANEL 334 OF 457

(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

# 5th Edition

Run	Time	Temp	Pressure	Flow	Conc	Yield	Notes
1	10.0	100	1.0	1.0	1.0	1.0	Initial run
2	10.0	100	1.0	1.0	1.0	1.0	Stable
3	10.0	100	1.0	1.0	1.0	1.0	Stable
4	10.0	100	1.0	1.0	1.0	1.0	Stable
5	10.0	100	1.0	1.0	1.0	1.0	Stable
6	10.0	100	1.0	1.0	1.0	1.0	Stable
7	10.0	100	1.0	1.0	1.0	1.0	Stable
8	10.0	100	1.0	1.0	1.0	1.0	Stable
9	10.0	100	1.0	1.0	1.0	1.0	Stable
10	10.0	100	1.0	1.0	1.0	1.0	Stable

Notice to User: The Map Number shown below should be used when placing map orders. The Community Number shown above should be used on insurance applications in the West Community.



MAP NUMBER  
34025C0334F

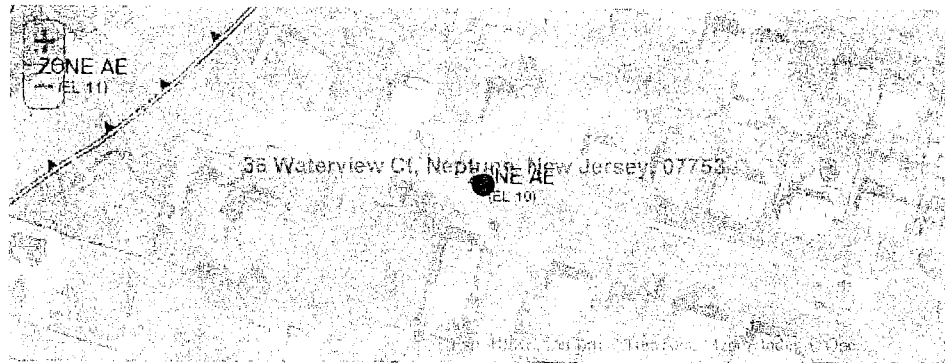
EFFECTIVE DATE  
SEPTEMBER 25, 2009

**Federal Emergency Management Agency**

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at [www.fema.gov](http://www.fema.gov).

36 WATERVIEW COURT, NEPTUNE [Get Details](#) [Clear Details](#)

Approximate Address Identified: 34 Watervien Ct, Neptune, New Jersey, 07753



## Updated FEMA Flood Hazard Data



*FEMA flood hazard data currently available for coastal areas of New York and New Jersey is provided below to help you understand the current flood risk to your property and to guide Sandy recovery and rebuilding efforts.*

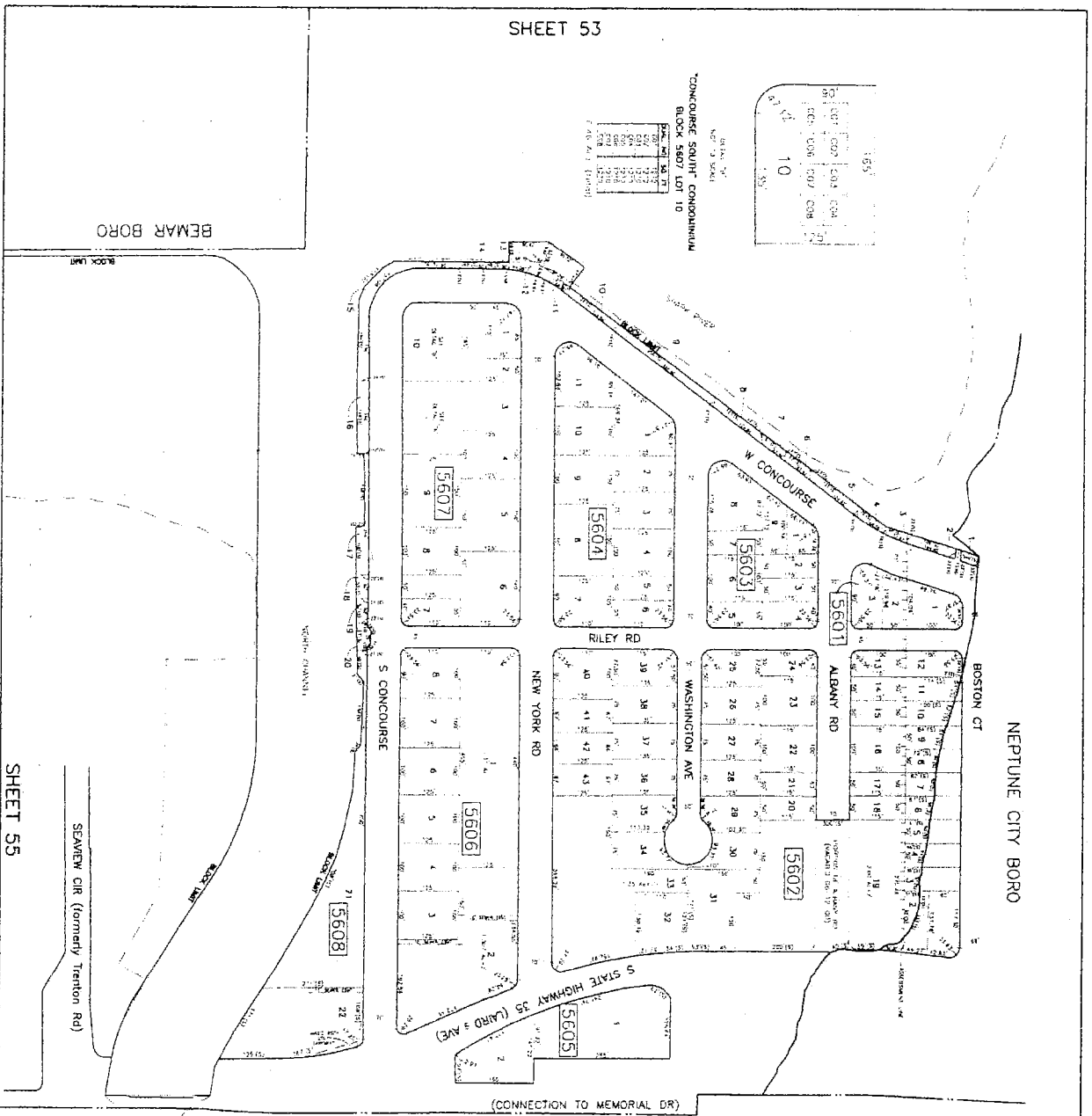
*Note: This tool provides flood zone and Base Flood Elevation (BFE) information for areas affected by coastal flood risk. However, riverine flood zone information will also be returned by the tool in communities where preliminary FIRMs have been released.*

[illegible]

### Effective Flood Insurance Data

*This information is from the effective Flood Insurance Rate Map for your community. It is used to determine who must buy flood insurance and how much it costs. It may also be used by your community to regulate development in flood prone areas.*

Attribute Name	Attribute Value
What is my property's current effective date? 	12/1/2014
What is my property's current effective date for  ?	12/1/2014



CONCOURSE SOUTH CONDOMINIUM  
BLOCK 5607 LOT 10

Lot	Area	Owner
10	1.15	...
11	1.15	...
12	1.15	...
13	1.15	...
14	1.15	...
15	1.15	...
16	1.15	...
17	1.15	...
18	1.15	...
19	1.15	...
20	1.15	...

CONCOURSE SOUTH CONDOMINIUM  
BLOCK 5607 LOT 10

Lot	Area	Owner
10	1.15	...
11	1.15	...
12	1.15	...
13	1.15	...
14	1.15	...
15	1.15	...
16	1.15	...
17	1.15	...
18	1.15	...
19	1.15	...
20	1.15	...

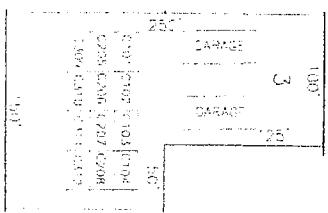
SHEET 55

SEAVIEW CIR (formerly Trenton Rd)

AVON BY THE SEA BORO

CONCOURSE SOUTH CONDOMINIUM  
BLOCK 5607 LOT 3

Lot	Area	Owner
3	1.15	...
4	1.15	...
5	1.15	...
6	1.15	...
7	1.15	...
8	1.15	...
9	1.15	...
10	1.15	...
11	1.15	...
12	1.15	...
13	1.15	...
14	1.15	...
15	1.15	...
16	1.15	...
17	1.15	...
18	1.15	...
19	1.15	...
20	1.15	...



APPROVED BY THE TOWNSHIP OF NEPTUNE  
TOWNSHIP ENGINEER  
DATE: 10/1/00

TAX MAP  
TOWNSHIP OF NEPTUNE  
ROBERT R. HEGGAN  
TOWNSHIP ENGINEER  
DATE: 10/1/00

REVISIONS

NO.	DATE	DESCRIPTION
1	10/1/00	...
2	...	...
3	...	...
4	...	...
5	...	...
6	...	...
7	...	...
8	...	...
9	...	...
10	...	...

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name Township of Neptune

Pump Station

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

18 New York Road

Company NAIC Number:

City Neptune

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

Tax Map Sheet 51, Block 555, Lot 1

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Non-Residential (sewage pumping station)

A5. Latitude/Longitude: Lat. N 40-11-23.9 Long. W 74-01-39.8

Horizontal Datum: ☐ NAD 1927 ☒ 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 1B

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) \_\_\_\_\_ sq ft

b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade \_\_\_\_\_

c) Total net area of flood openings in A8.b \_\_\_\_\_ sq in

d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

a) Square footage of attached garage \_\_\_\_\_ sq ft

b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade \_\_\_\_\_

c) Total net area of flood openings in A9.b \_\_\_\_\_ sq in

d) Engineered flood openings? ☐ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
Township of Neptune - 340317

B2. County Name  
Monmouth

B3. State  
NJ

B4. Map/Panel Number  
0334

B5. Suffix  
F

B6. FIRM Index Date  
September 25, 2009

B7. FIRM Panel  
Effective/Revised Date  
September 25, 2009

B8. Flood  
Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
9

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: DK7749

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) 8.8 ☒ feet ☐ meters

b) Top of the next higher floor \_\_\_\_\_ ☐ feet ☐ meters

c) Bottom of the lowest horizontal structural member (V Zones only) \_\_\_\_\_ ☐ feet ☐ meters

d) Attached garage (top of slab) \_\_\_\_\_ ☐ feet ☐ meters

e) Lowest elevation of machinery or equipment servicing the building 8.8 ☒ feet ☐ meters  
(Describe type of equipment and location in Comments)

f) Lowest adjacent (finished) grade next to building (LAG) 7.7 ☒ feet ☐ meters

g) Highest adjacent (finished) grade next to building (HAG) 7.9 ☒ feet ☐ meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support \_\_\_\_\_ ☐ feet ☐ 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.

☐ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a  
☐ Check here if attachments. licensed land surveyor? ☒ Yes ☐ No

Certifier's Name Peter R. Avakian, PE & PLS

License Number 28142

Signature

Company Name Leon S. Avakian, Inc

Address 788 Wayside Road

City Neptune

State NJ

ZIP Code 07753

Signature

Date

4/8/12

Telephone (732) 922-9229

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name James A. & Terrilyn Stowe

### FOR INSURANCE COMPANY USE

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
36 Waterview Court

Company NAIC Number:

City Neptune

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
Lot 8 Block 552

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. N 40° 11' 26.34" Long. W 74° 01' 39.78"

Horizontal Datum: ☐ NAD 1927 ☒ 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 7

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) 732 sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 4  
c) Total net area of flood openings in A8.b 800 sq in  
d) Engineered flood openings? ☒ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage 565 sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 3  
c) Total net area of flood openings in A9.b 600 sq in  
d) Engineered flood openings? ☒ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
Township of Neptune / 340317

B2. County Name  
Monmouth County

B3. State  
NJ

B4. Map/Panel Number  
34025C0334

B5. Suffix  
F

B6. FIRM Index Date  
9/29/2006

B7. FIRM Panel  
Effective/Revised Date  
9/29/2006

B8. Flood  
Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
9.0'

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: Smart Net

Vertical Datum: NAVD 88

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>CS7.2</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>FF13.8</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>GF6.7</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | <u>13.6</u>   | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>5.9</u>    | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>6.6</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>5.9</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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a  
☒ Check here if attachments. licensed land surveyor? ☒ Yes ☐ No

Certifier's Name Robert Vallee PLS

License Number 43276

Title Land Surveyor

Company Name Vallee Surveying, LLC

Address 1010 Commons Way

City Toms River

State NJ

ZIP Code 08755

Signature 

Date 08/12/15

Telephone 732-244-2373

**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 36 Waterview Court		Policy Number
City Neptune	State NJ ZIP Code 07753	Company NAIC Number

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments The A/C is located at elev.=13.6'. Smart vent model number 1540-510 (200sq. in) \*\*\*Preliminary Updated FEMA Flood Hazard Data BFE=AE10. Release date 01/31/14\*\*\* This information is to be used for insurance purposes only.

Signature

Date 8/12/15

**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 8–9 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's or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

☐ Check here if attachments.**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 ImprovementG8. 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

Community Name Telephone

Signature Date

Comments

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**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.  
36 Waterview Court

Policy Number:

City Neptune

State NJ

ZIP Code 07753

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.

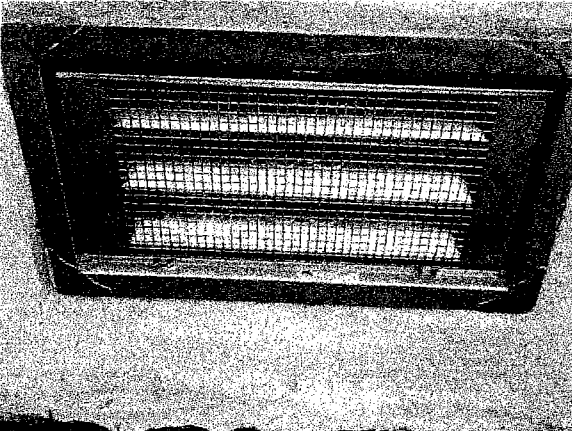
Front View (08/05/15)

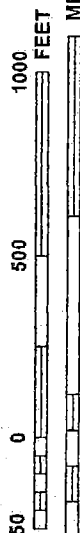


Rear View (08/05/15)



Flood Opening (08/05/15)





**Federal Emergency Management Agency**

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at [www.sc.fema.gov](http://www.sc.fema.gov)



Enter an address to view effective and updated flood risk information for that location:

36 Waterview Court, Neptune NJ

Get Details

Clear Details

Approximate Address Identified: 36 Waterview Ct, Neptune, New Jersey, 07753



### Updated FEMA Flood Hazard Data

FEMA flood hazard data currently available for coastal areas of New York and New Jersey is provided below to help you understand the current flood risk to your property and to guide Sandy recovery and rebuilding efforts.

Note: This tool provides flood zone and Base Flood Elevation (BFE) information for areas affected by coastal flood risk. However, riverine flood zone information will also be returned by the tool in communities where preliminary FIRMs have been released.

Attribute Name	Attribute Value
What is the most recent FEMA flood hazard data source available for this location?	<a href="#">Preliminary Flood Insurance Rate Map (FIRM)</a>
<a href="#">What is my property's Base Flood Elevation (BFE)?</a> (For AO Zones, the flood depth will be shown instead of an elevation; For N/A results, please contact your local floodplain administrator for more information.)	10 ft (NAVD88)
<a href="#">What is my property's Flood Zone?</a> (For N/A results, please contact your local floodplain administrator for more information.)	AE
<a href="#">What is the estimated ground elevation at this location? (See licensed surveyor for actual elevation of your building)</a>	N/A
What does my FEMA Flood Hazard Map Panel Look Like?	<a href="#">Link to Preliminary FIRM PDF</a>
View your property on our Interactive Web Tool	<a href="#">Link to Web Tool (Note: You will need to enter your address again to zoom to your location in the Web Tool.)</a>
Where can I get the GIS data for my property area?	<a href="#">Link to Preliminary FIRM GIS files</a>

### Effective Flood Insurance Data

This information is from the effective Flood Insurance Rate Map for your community. It is used to determine who must buy flood insurance and how much it costs. It may also be used by your community to regulate development in flood prone areas.

Attribute Name	Attribute Value
<a href="#">What is my property's current effective Base Flood Elevation?</a>	9 ft (NAVD88)
<a href="#">What is my property's current effective Flood Zone?</a>	AE

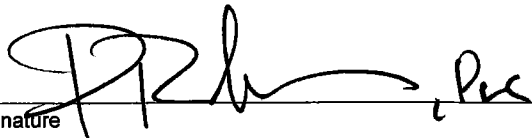
**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 118 New York Road		Policy Number:
City Neptune	State NJ ZIP Code 07753	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments C2 e - Lowest mechanical equipment is the generator located outside at elevation 8.8

  
Signature4/8/14  
Date**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 HAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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's or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

☐ Check here if attachments.**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 Title

Community Name Telephone

Signature Date

Comments

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

8 New York Road

City Neptune

State NJ

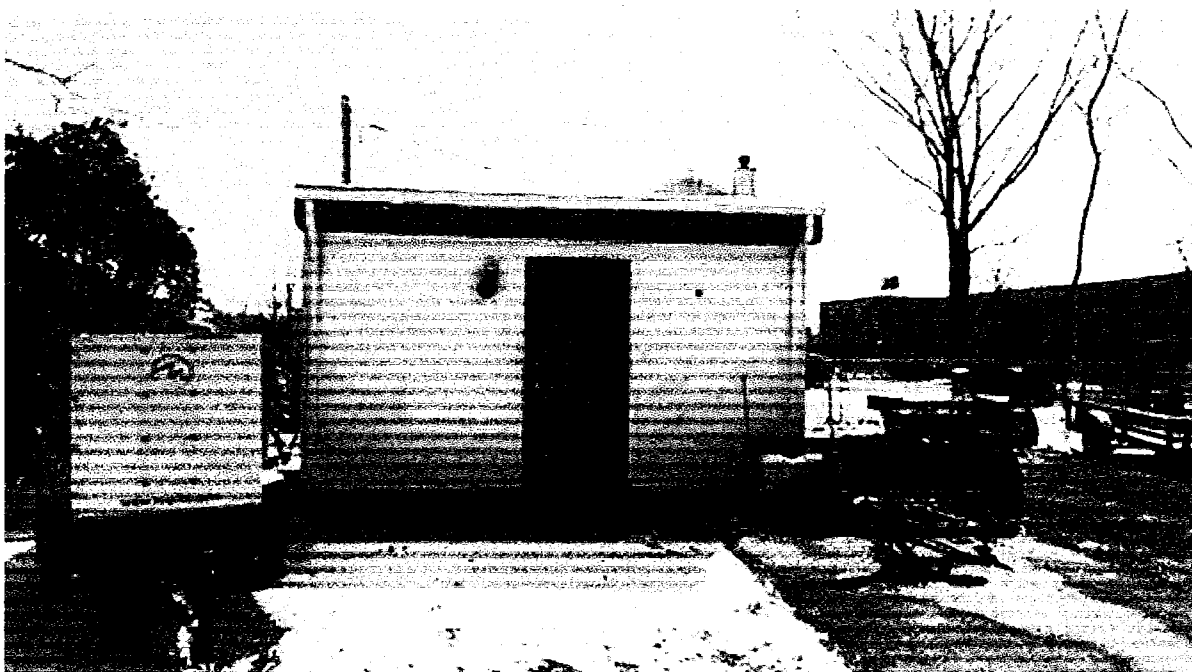
ZIP Code 07753

FOR INSURANCE COMPANY USE

Policy Number:

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.



Front View



Rear View

**Building Photographs**

Continuation Page

**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.  
118 New York Road

Policy Number:

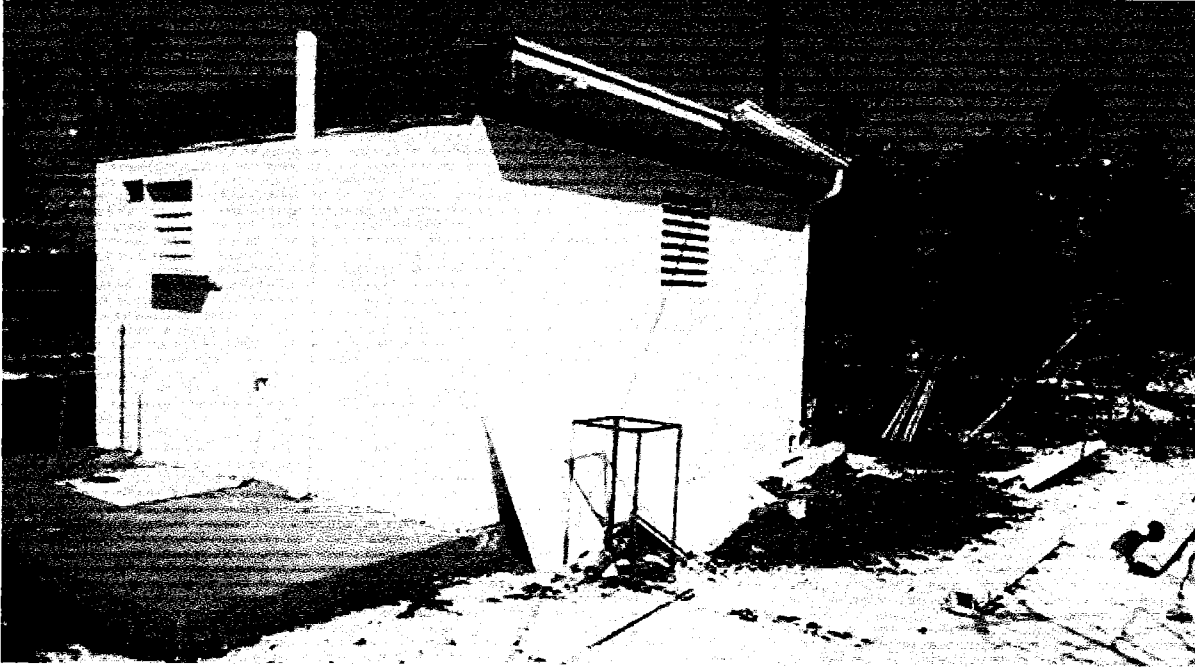
City Neptune

State NJ

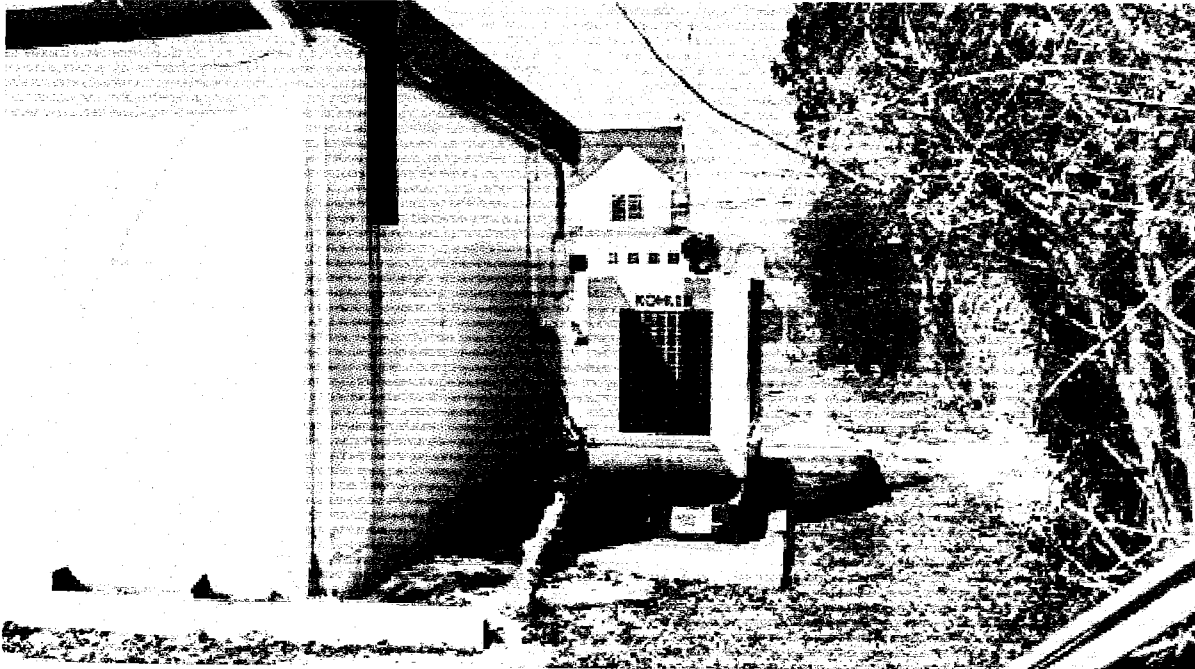
ZIP Code 07753

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.



Left Side View



Right Side View

Pre Elevation

R

AUG 02 2013

D

U.S. DEPARTMENT OF HOMELAND SECURITY  
FEDERAL EMERGENCY MANAGEMENT AGENCY  
National Flood Insurance Program

**ELEVATION CERTIFICATE**

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

**SECTION A - PROPERTY INFORMATION**

FOR INSURANCE COMPANY USE

A1. Building Owner's Name **EVELYN STUMPF & SANDRA SCHWEICHARDT**

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

Company NAIC Number:

City **NEPTUNE**State **NJ**ZIP Code **07753**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

**BLOCK 556, LOT 18**A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **RESIDENTIAL**A5. Latitude/Longitude: Lat. **40-11-27.37694**Long. **74-01-34.10860**Horizontal Datum: ☐ NAD 1927 ☒ 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 **9**

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) **1,047** sq ftb) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade **4**c) Total net area of flood openings in A8.b **198** sq ind) Engineered flood openings? ☒ Yes ☐ No

A9. For a building with an attached garage:

a) Square footage of attached garage **N/A** sq ft

b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade

c) Total net area of flood openings in A9.b sq in

d) Engineered flood openings? ☐ Yes ☐ No**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP Community Name &amp; Community Number

**TOWNSHIP OF NEPTUNE / 340317**

B2. County Name

**MONMOUTH**

B3. State

**NEW JERSEY**

B4. Map/Panel Number

**0334**

B5. Suffix

**F**

B6. FIRM Index Date

**09/25/2009**B7. FIRM Panel Effective/  
Revised Date**09/25/2009**

B8. Flood Zone(s)

**AE**B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)**9**

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☒ NAVD 1988☐ Other/Source:B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ NoDesignation Date: / / ☐ CBRS ☐ OPA**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: **CORS (LEICA SMARTNET)**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)

**5.3**☒ feet ☐ meters

b) Top of the next higher floor

**9.3**☐ feet ☐ meters

c) Bottom of the lowest horizontal structural member (V-Zones only)

☐ feet ☐ meters

d) Attached garage (top of slab)

☐ feet ☐ meterse) Lowest elevation of machinery or equipment servicing the building  
(Describe type of equipment and location in Comments)**6.2**☒ feet ☐ meters

f) Lowest adjacent (finished) grade next to building (LAG)

**7.0**☒ feet ☐ meters

g) Highest adjacent (finished) grade next to building (HAG)

**8.2**☒ feet ☐ meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support

☐ feet ☐ 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.

☐ Check here if comments are provided on back of form.☐ Check here if attachments.Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ NoCertifier's Name  
**GEORGE W. EDWARDS, PLS**License Number  
**24GS01900200**Title  
**PROFESSIONAL LAND SURVEYOR**Company Name  
**EDWARDS SURVEYING**Address  
**1335 SUNSET AVENUE**City  
**POINT PLEASANT**State  
**NJ**ZIP Code  
**08742**Signature  
*George W. Edwards*Date  
**12/29/2012**Telephone  
**732-892-4010**

**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>1 ALBANY ROAD</b>			Policy Number: _____	
City <b>NEPTUNE</b>	State <b>NJ</b>	ZIP Code <b>07753</b>	Company NAIC Number: _____	

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**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 8–9 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.

**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–G9) 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 \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

☐ Check here if attachments.

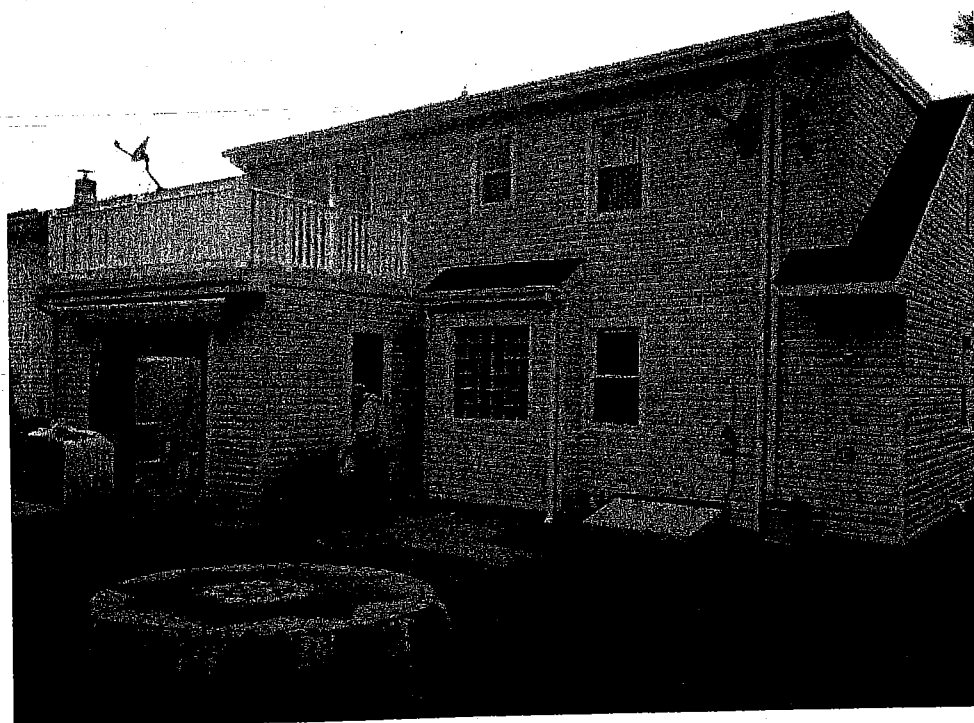
<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 21 ALBANY ROAD		Policy Number:	
City NEPTUNE	State NJ	ZIP Code 07753	Company NAIC Number:

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.

RECEIVED  
AUG 02 2013



**FRONT VIEW  
21 ALBANY ROAD  
NEPTUNE, NJ  
DECEMBER 29, 2012**



**REAR VIEW  
21 ALBANY ROAD  
NEPTUNE, NJ  
DECEMBER 29, 2012**

**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.  
21 ALBANY ROAD

Policy Number:

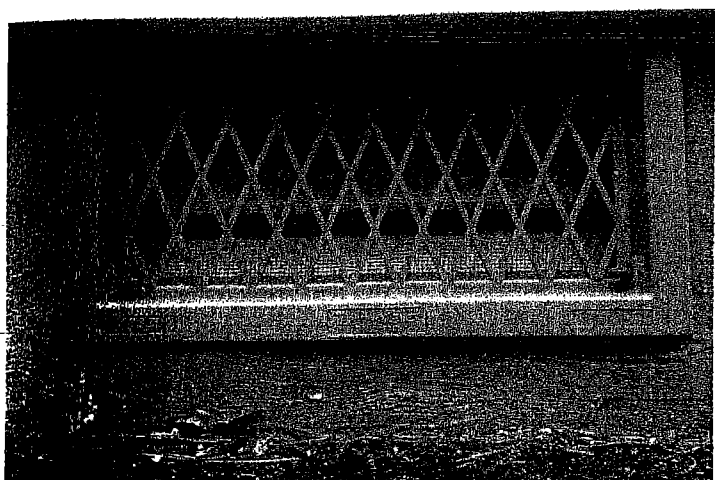
City  
NEPTUNEState  
NJZIP Code  
07753

Company NAIC Number:

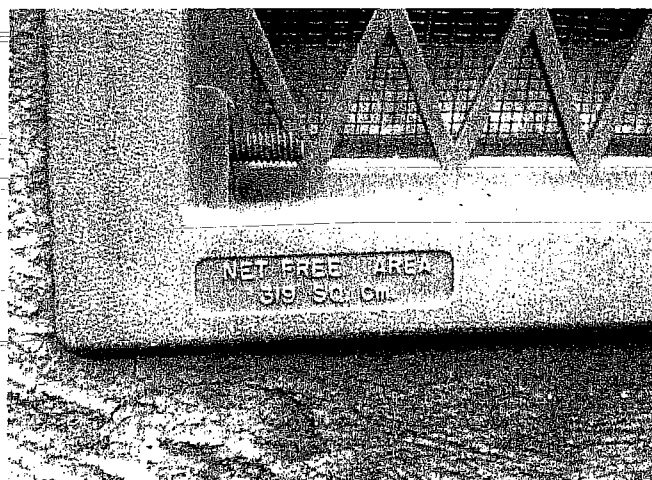
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



**R E C E I V E D**  
AUG 02 2013

**CRAWL SPACE ENTRANCE****21 ALBANY ROAD****NEPTUNE, NJ****DECEMBER 29, 2012**

**VENT VIEW**  
**21 ALBANY ROAD**  
**NEPTUNE, NJ**  
**DECEMBER 29, 2012**



**VENT DETAILS**  
**21 ALBANY ROAD**  
**NEPTUNE, NJ**  
**DECEMBER 29, 2012**

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Charles Johnson & Jayne Probert  
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
29 Albany Road  
City Neptune State NJ ZIP Code 07753

For Insurance Company Use  
Policy Number  
Company NAIC Number

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
Lots 22 & 23 / Block 556

*Existing structure*

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. N40-11-28 Long. W74-01-36

Horizontal Datum: ☐ NAD 1927 ☒ 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 2

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) 1,127 sq ft  
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0  
c) Total net area of flood openings in A8.b 0 sq in  
d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

- a) Square footage of attached garage N/A sq ft  
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  
c) Total net area of flood openings in A9.b 0 sq in  
d) Engineered flood openings? ☐ Yes ☒ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
Neptune, Township of 3400317

B2. County Name  
Monmouth

B3. State  
NJ

B4. Map/Panel Number  
0334

B5. Suffix  
F

B6. FIRM Index  
Date  
9/25/2009

B7. FIRM Panel  
Effective/Revised Date  
9/25/2009

B8. Flood  
Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
9

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 (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 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. Use the same datum as the BFE.

Benchmark Utilized KV0806 Vertical Datum NAVD '88

Conversion/Comments none

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 4.00 ☒ feet ☐ meters (Puerto Rico only)  
b) Top of the next higher floor 11.15 ☒ feet ☐ meters (Puerto Rico only)  
c) Bottom of the lowest horizontal structural member (V Zones only) 0.0 ☒ feet ☐ meters (Puerto Rico only)  
d) Attached garage (top of slab) 0.0 ☒ feet ☐ meters (Puerto Rico only)  
e) Lowest elevation of machinery or equipment servicing the building 4.40 ☒ feet ☐ meters (Puerto Rico only)  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) 5.75 ☒ feet ☐ meters (Puerto Rico only)  
g) Highest adjacent (finished) grade next to building (HAG) 7.56 ☒ feet ☐ meters (Puerto Rico only)  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 6.55 ☒ feet ☐ meters (Puerto Rico only)

## 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.

☒ Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

Certifier's Name Zenon T. Grybowski

License Number 23918

Title Vice President

Company Name Landmark Surveying & Engineering, Inc.

Address 813 Main Street

City Avon-by-the-Sea

State NJ

ZIP Code 07717

Signature Zenon T. Grybowski

Date 8/2/10

Telephone 732-775-8558

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

29 Albany Road

City Neptune State NJ ZIP Code 07753

For Insurance Company Use:

Policy Number

Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments The lowest utilities serving the building are the furnace and hot water heater located in the basement.

There is a detached garage in the rear of the property. The detached garage finished floor elevation is 6.82. The square footage of the detached garage is 360 square feet.

Signature

*James T. Gagliardi*

Date 8/2/10

☐ Check here if attachments

**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 8-9 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's or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

☐ Check here if attachments

**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 and G9.

1. ☐ 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.)
2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number

G5. Date Permit Issued

G6. Date Certificate Of Compliance/Occupancy Issued

7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_
9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_
10. Community's design flood elevation \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_

Local Official's Name Title

Community Name Telephone

Signature Date

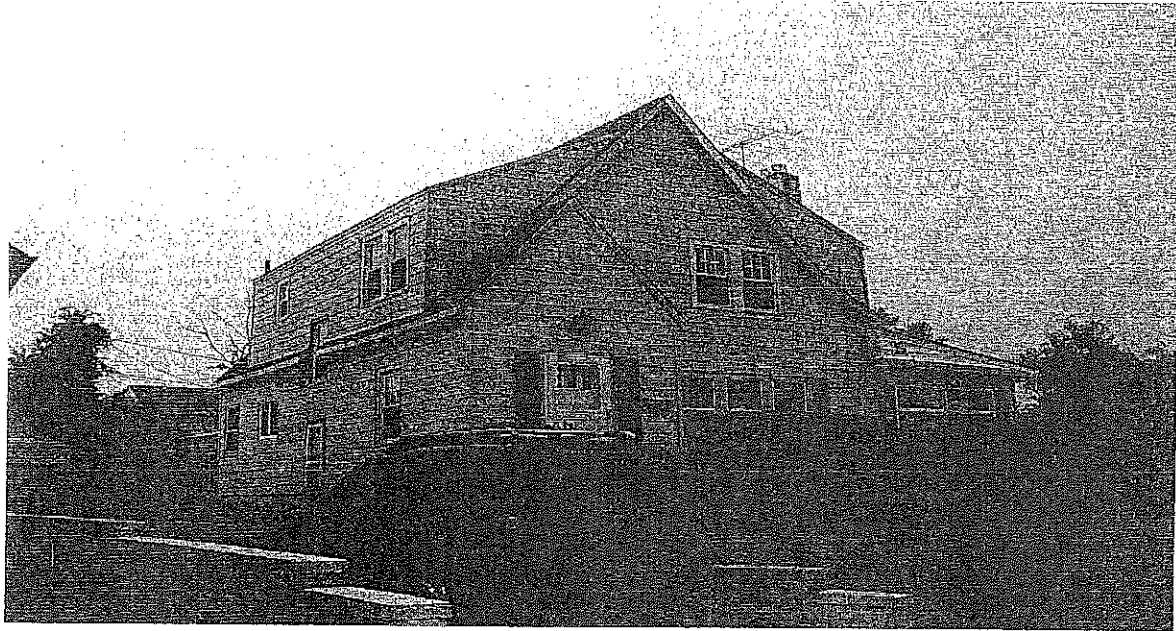
Comments

☐ Check here if attachments

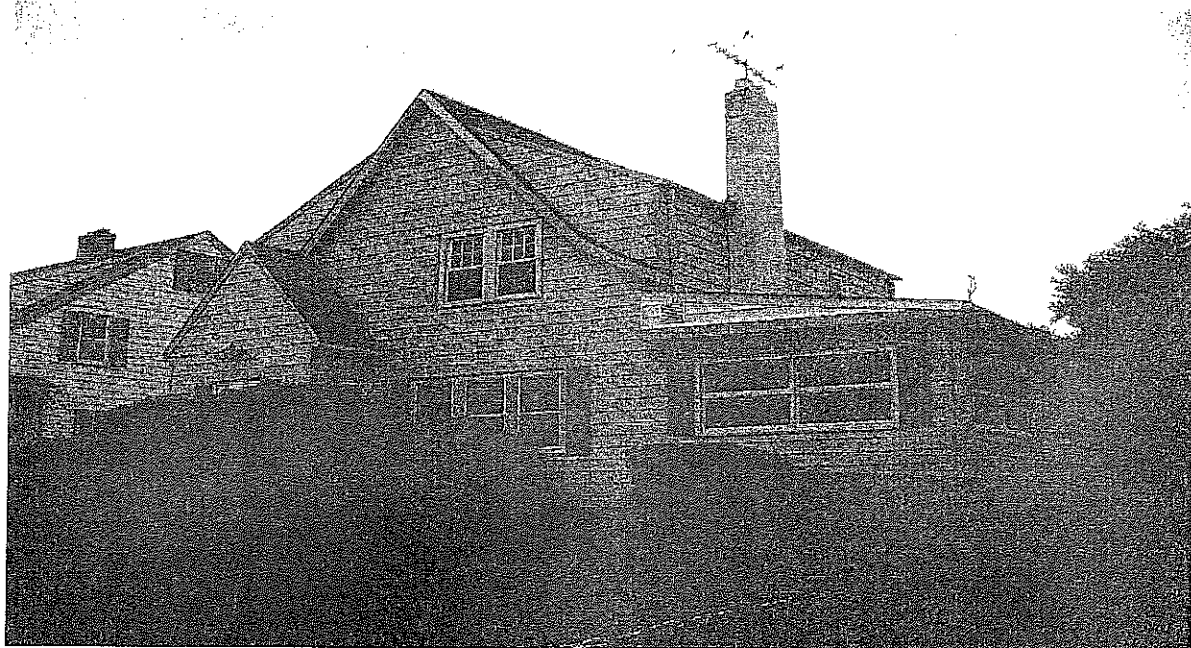
# Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29 Albany Road	For Insurance Company Use
City Neptune State NJ ZIP Code 07753	Policy 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.	



Front Left View – Taken 7/29/2010



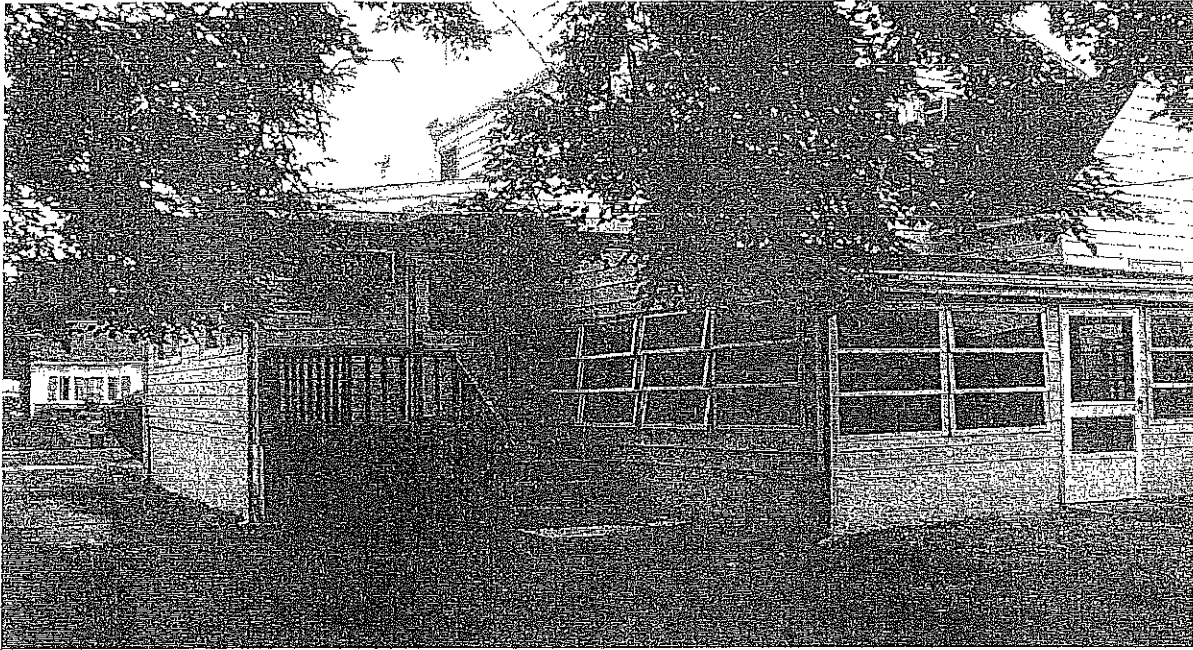
Front Right View – Taken 7/29/2010

# Building Photographs

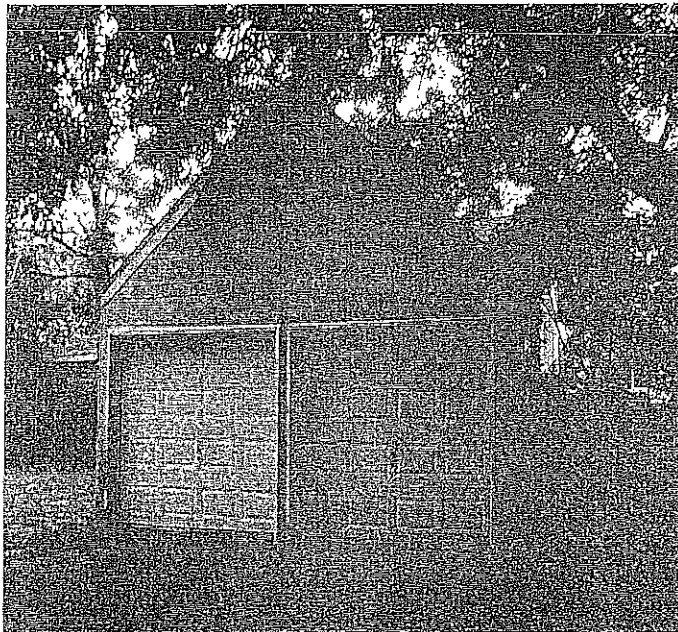
Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29 Albany Road	For Insurance Company Use: Policy Number
City Neptune State NJ ZIP Code 07753	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."



Rear Left View – Taken 7/29/2010



Rear Detached Garage – Taken 7/29/2010



Rear Right View – Taken 7/29/2010

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

### FOR INSURANCE COMPANY USE

A1. Building Owner's Name James Dowling

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
32 Albany Road

Company NAIC Number:

City Neptune

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
Lot 1 Block 557

Existing structure

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. 40.1915 Long. -74.0270 Horizontal Datum: ☐ NAD 1927 ☒ 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 2

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) N/A sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade \_\_\_\_\_ sq in  
c) Total net area of flood openings in A8.b \_\_\_\_\_ sq in  
d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage N/A sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade \_\_\_\_\_ sq in  
c) Total net area of flood openings in A9.b \_\_\_\_\_ sq in  
d) Engineered flood openings? ☐ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
Township of Neptune/340317

B2. County Name  
Monmouth

B3. State  
NJ

B4. Map/Panel Number  
34025C0334/0334

B5. Suffix  
F

B6. FIRM Index Date  
09/25/2009

B7. FIRM Panel  
Effective/Revised Date  
09/25/2009

B8. Flood  
Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
9

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: KV6257

Vertical Datum: NAVD 88

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) 5.6 ☒ feet ☐ meters  
b) Top of the next higher floor 12.9 ☒ feet ☐ meters  
c) Bottom of the lowest horizontal structural member (V Zones only) N/A ☒ feet ☐ meters  
d) Attached garage (top of slab) N/A ☐ feet ☐ meters  
e) Lowest elevation of machinery or equipment servicing the building 5.6 ☒ feet ☐ meters  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) 8.2 ☒ feet ☐ meters  
g) Highest adjacent (finished) grade next to building (HAG) 9.4 ☒ feet ☐ meters  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 8.4 ☒ feet ☐ 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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No  
☐ Check here if attachments.

Certifier's Name Robert H. Morris

License Number 30090

Title Land Surveyor

Company Name R H Morris Land Surveying

Address 1123 Morris Avenue

City Point Pleasant

State NJ

ZIP Code 08742

Signature

Date 07/05/14

Telephone 732-899-4387

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Charles Johnson & Jayne Probert

For Insurance Company Use:

Policy Number

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
29 Albany Road

Company NAIC Number

City Neptune State NJ ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
Lots 22 & 23 / Block 556

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. N40-11-28 Long. W74-01-36

Horizontal Datum: ☐ NAD 1927 ☒ 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 2

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) 1,127 sq ft  
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0  
c) Total net area of flood openings in A8.b 0 sq in  
d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

- a) Square footage of attached garage N/A sq ft  
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  
c) Total net area of flood openings in A9.b 0 sq in  
d) Engineered flood openings? ☐ Yes ☒ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
Neptune, Township of 3400317

B2. County Name  
Monmouth

B3. State  
NJ

B4. Map/Panel Number  
0334

B5. Suffix  
F

B6. FIRM Index  
Date  
9/25/2009

B7. FIRM Panel  
Effective/Revised Date  
9/25/2009

B8. Flood  
Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
9

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 (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)?  
Designation Date \_\_\_\_\_ ☐ CBRS ☐ OPA ☐ Yes ☒ No

## 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. Use the same datum as the BFE.

Benchmark Utilized KV0806 Vertical Datum NAVD '88

Conversion/Comments none

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 4.00 ☒ feet ☐ meters (Puerto Rico only)  
b) Top of the next higher floor 11.15 ☒ feet ☐ meters (Puerto Rico only)  
c) Bottom of the lowest horizontal structural member (V Zones only) :- ☒ feet ☐ meters (Puerto Rico only)  
d) Attached garage (top of slab) :- ☒ feet ☐ meters (Puerto Rico only)  
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 4.40 ☒ feet ☐ meters (Puerto Rico only)  
f) Lowest adjacent (finished) grade next to building (LAG) 5.75 ☒ feet ☐ meters (Puerto Rico only)  
g) Highest adjacent (finished) grade next to building (HAG) 7.56 ☒ feet ☐ meters (Puerto Rico only)  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 6.55 ☒ feet ☐ meters (Puerto Rico only)

## 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.

☒ Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

Certifier's Name Zenon T. Grybowski

License Number 23918

Title Vice President

Company Name Landmark Surveying & Engineering, Inc.

Address 813 Main Street

City Avon-by-the-Sea

State NJ

ZIP Code 07717

Signature Zenon T. Grybowski

Date 8/2/10

Telephone 732-775-8558

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>For Insurance Company Use:</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29 Albany Road	Policy Number
City Neptune State NJ ZIP Code 07753	Company NAIC Number

### SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments The lowest utilities serving the building are the furnace and hot water heater located in the basement.

There is a detached garage in the rear of the property. The detached garage finished floor elevation is 6.82. The square footage of the detached garage is 360 square feet.

Signature [Handwritten Signature] Date 8/2/10 ☐ Check here if attachments

### 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 8-9 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's or Owner's Authorized Representative's Name

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

☐ Check here if attachments

### 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 and G9.

1. ☐ 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.)
2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_
9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_
10. Community's design flood elevation \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

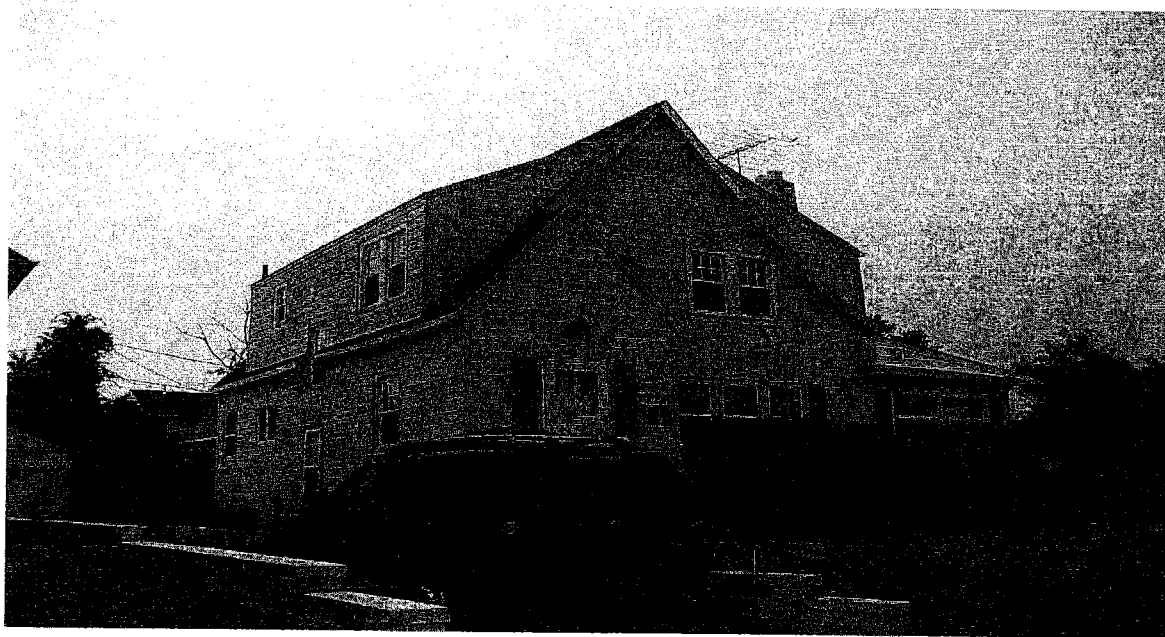
Comments \_\_\_\_\_

☐ Check here if attachments

## Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29 Albany Road	For Insurance Company Use:
City Neptune State NJ ZIP Code 07753	Policy 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.	



Front Left View – Taken 7/29/2010

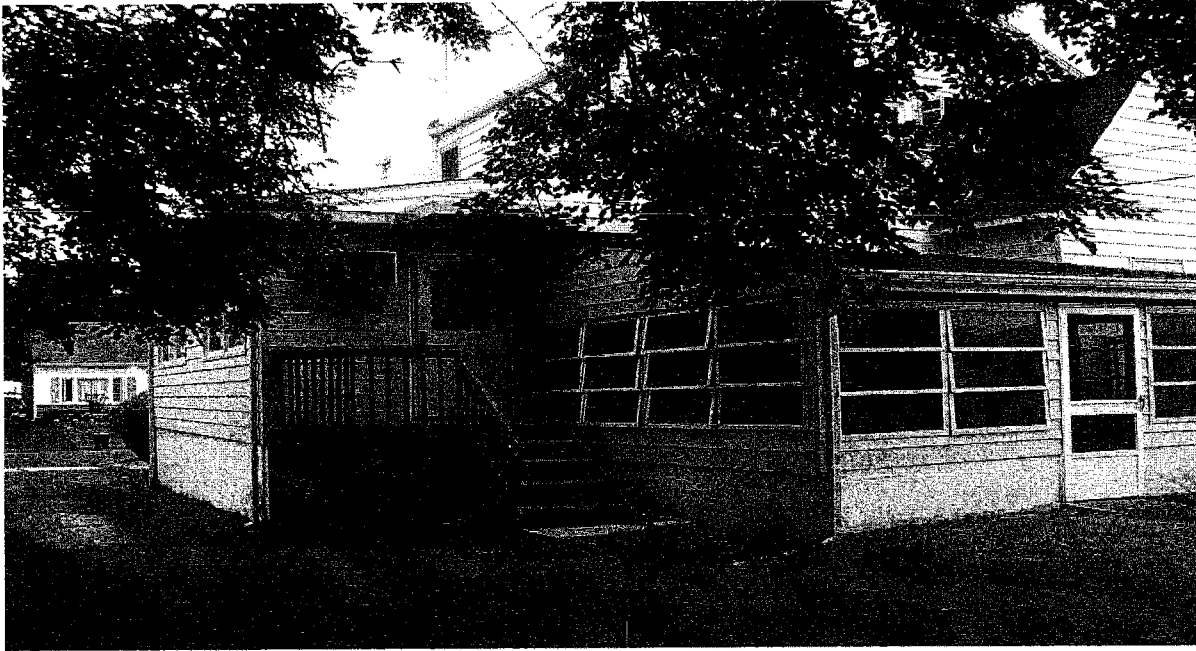


Front Right View – Taken 7/29/2010

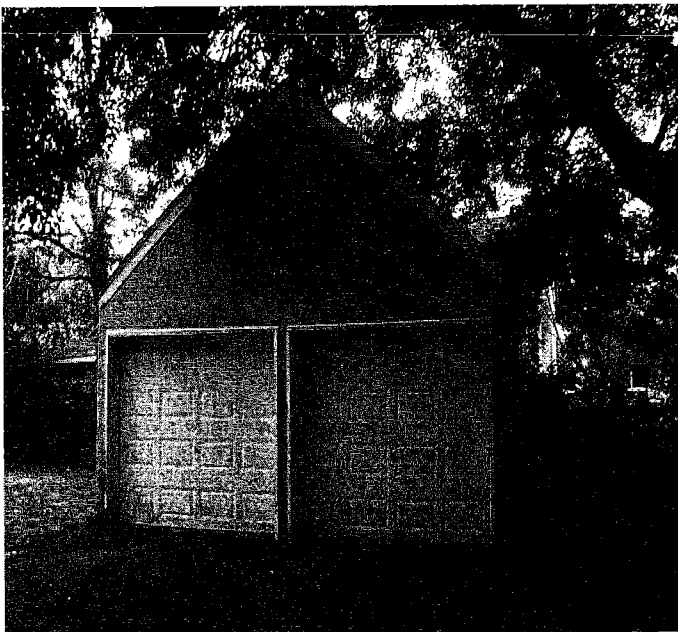
# Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29 Albany Road	For Insurance Company Use: Policy Number
City Neptune State NJ ZIP Code 07753	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."	



Rear Left View – Taken 7/29/2010



Rear Detached Garage – Taken 7/29/2010



Rear Right View – Taken 7/29/2010

**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 32 Albany Road		Policy Number:
City Neptune	State NJ ZIP Code 07753	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments C2.e) Furnace.Exterior air conditioning unit at elev. 10.0'. The Preliminary Flood Zone is AE. The Preliminary Base Flood Elevation is 10'. per Preliminary FIRM 34025C0456G dated 1/31/14.

Signature

Date 07/05/14

**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 8–9 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's or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

☐ Check here if attachments.**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 ImprovementG8. 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

Community Name Telephone

Signature Date

Comments

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**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.

32 Albany Road

Policy Number:

City Neptune

State NJ

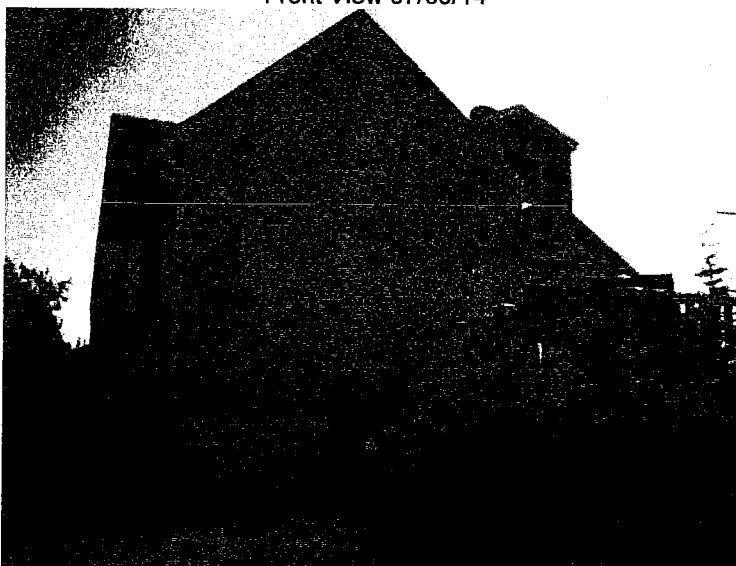
ZIP Code 07753

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.



Front View 07/05/14



Rear View 07/05/14

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name MICHAEL PULLANO	For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 28 ALBANY ROAD	Policy Number
City NEPTUNE TWP. State NJ ZIP Code 07753	Company NAIC Number

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
BLOCK 557 LOT 3

Existing structure

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RES

A5. Latitude/Longitude: Lat. 40-26-46 Long. 74.1001

Horizontal Datum: ☐

NAD 1927 ☒ 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 2

A8. For a building with a crawl space or enclosure(s), provide

a) Square footage of crawl space or enclosure(s) 1109 sq ft

b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade 5

c) Total net area of flood openings in A8.b 600 sq in

A9. For a building with an attached garage, provide:

a) Square footage of attached garage NA sq ft

b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade NA

c) Total net area of flood openings in A9.b NA sq in

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number 340317-NEPTUNE TOWNSHIP		B2. County Name MONMOUTH		B3. State NJ	
B4. Map/Panel Number 340317-0003	B5. Suffix C	B6. FIRM Index Date 2-16-77	B7. FIRM Panel Effective/Revised Date 3-1-84	B8. Flood Zone(s) A7	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9.0

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 (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 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-g below according to the building diagram specified in Item A7.  
Benchmark Utilized RM2(AVON) Vertical Datum NGVD29  
Conversion/Comments NA

Check the measurement used.

- a) Top of bottom floor (including basement, crawl space, or enclosure floor) 9.4 ☒ feet ☐ meters (Puerto Rico only)
- b) Top of the next higher floor 12.4 ☒ feet ☐ meters (Puerto Rico only)
- c) Bottom of the lowest horizontal structural member (V Zones only) NA ☒ feet ☐ meters (Puerto Rico only)
- d) Attached garage (top of slab) NA ☒ feet ☐ meters (Puerto Rico only)
- e) Lowest elevation of machinery or equipment servicing the building SEECOMM ☒ feet ☐ meters (Puerto Rico only)  
(Describe type of equipment in Comments)
- f) Lowest adjacent (finished) grade (LAG) 10.1 ☒ feet ☐ meters (Puerto Rico only)
- g) Highest adjacent (finished) grade (HAG) 10.2 ☒ feet ☐ meters (Puerto Rico only)

## 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.

☒ Check here if comments are provided on back of form.

Certifier's Name JAMES J. KUHN License Number GS 34486  
Title PROFESSIONAL LAND SURVEYOR Company Name SENECA SURVEY COMPANY-(PROJ.-0946786)  
Address 1470 ROUTE 88 WEST City BRICK TWP. State NJ ZIP Code 08724

PLACE  
SEAL  
HERE

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

28 ALBANY ROAD

City NEPTUNE TWP. State NJ ZIP Code 07753

For Insurance Company Use:

Policy Number

Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments DWELLING ON CRAWLSPACE BELOW OUTSIDE GRADE WITH 670S.I. COVERED ACCESS. A.C. @ ELEV. 10.1.

UNABLE TO VERIFY ALL UTILITIES AT TIME OF SURVEY.

THIS CERTIFICATE CERTIFIED TO THE OWNERS IN LINE A1 ONLY AND IS NON-TRANSFERRABLE.

Signature

Date 9-2-09

☒ Check here if attachments**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, crawl space, or enclosure) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.b) Top of bottom floor (including basement, crawl space, or enclosure) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the LAG.E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 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's or Owner's Authorized Representative's Name

Address

City

State

ZIP Code

Signature

Date

Telephone

Comments

☐ Check here if attachments**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. and G9.

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.-G9.) 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 ImprovementG8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_

Local Official's Name

Title

Community Name

Telephone

Signature

Date

Comments

☐ Check here if attachments

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

### FOR INSURANCE COMPANY USE

A1. Building Owner's Name Township of Neptune

Pump Station

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
99 Seaview Court

Company NAIC Number:

City Neptune

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
Tax Map Sheet 50.02, Block 569, Lot 199

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Non-Residential (sewage pumping station)

A5. Latitude/Longitude: Lat. N 40-11-16.8 Long. W 74-01-43.1

Horizontal Datum: ☐ NAD 1927 ☒ 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 1B

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) \_\_\_\_\_ sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade \_\_\_\_\_  
c) Total net area of flood openings in A8.b \_\_\_\_\_ sq in  
d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage \_\_\_\_\_ sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade \_\_\_\_\_  
c) Total net area of flood openings in A9.b \_\_\_\_\_ sq in  
d) Engineered flood openings? ☐ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
Township of Neptune - 340317

B2. County Name  
Monmouth

B3. State  
NJ

B4. Map/Panel Number  
0334

B5. Suffix  
F

B6. FIRM Index Date  
September 25, 2009

B7. FIRM Panel  
Effective/Revised Date  
September 25, 2009

B8. Flood  
Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
9

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: DK7749

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) 8.6 ☒ feet ☐ meters  
b) Top of the next higher floor \_\_\_\_\_ ☐ feet ☐ meters  
c) Bottom of the lowest horizontal structural member (V Zones only) \_\_\_\_\_ ☐ feet ☐ meters  
d) Attached garage (top of slab) \_\_\_\_\_ ☐ feet ☐ meters  
e) Lowest elevation of machinery or equipment servicing the building 9.7 ☒ feet ☐ meters  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) 7.9 ☒ feet ☐ meters  
g) Highest adjacent (finished) grade next to building (HAG) 8.6 ☒ feet ☐ meters  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support \_\_\_\_\_ ☐ feet ☐ 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.

- ☐ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No  
☐ Check here if attachments.

Certifier's Name Peter R. Avakian, PE & PLS

License Number 28142

President

Company Name Leon S. Avakian, Inc

Address 708 Wayside Road

City Neptune

State NJ

ZIP Code 07753

Signature

Date

7/8/14

Telephone (732) 922-9229

**ELEVATION CERTIFICATE, page 2****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.

Policy Number:

99 Seaview Court

City Neptune

State NJ

ZIP Code 07753

Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments C2 e - Lowest mechanical equipment is the generator located inside at elevation 9.7

Signature

Date

4/8/14

**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 8–9 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's or Owner's Authorized Representative's Name

Address

City

State

ZIP Code

Signature

Date

Telephone

Comments

☐ Check here if attachments.**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 ImprovementG8. 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

Community Name

Telephone

Signature

Date

Comments

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

Seaview Court

City Neptune

State NJ

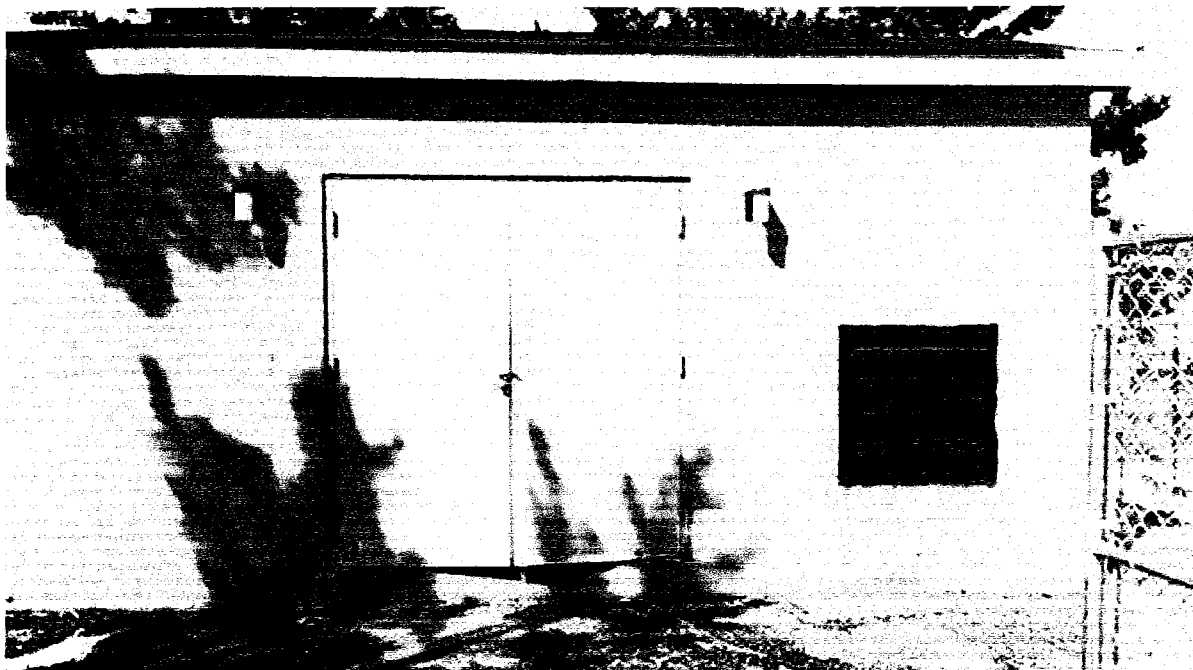
ZIP Code 07753

FOR INSURANCE COMPANY USE

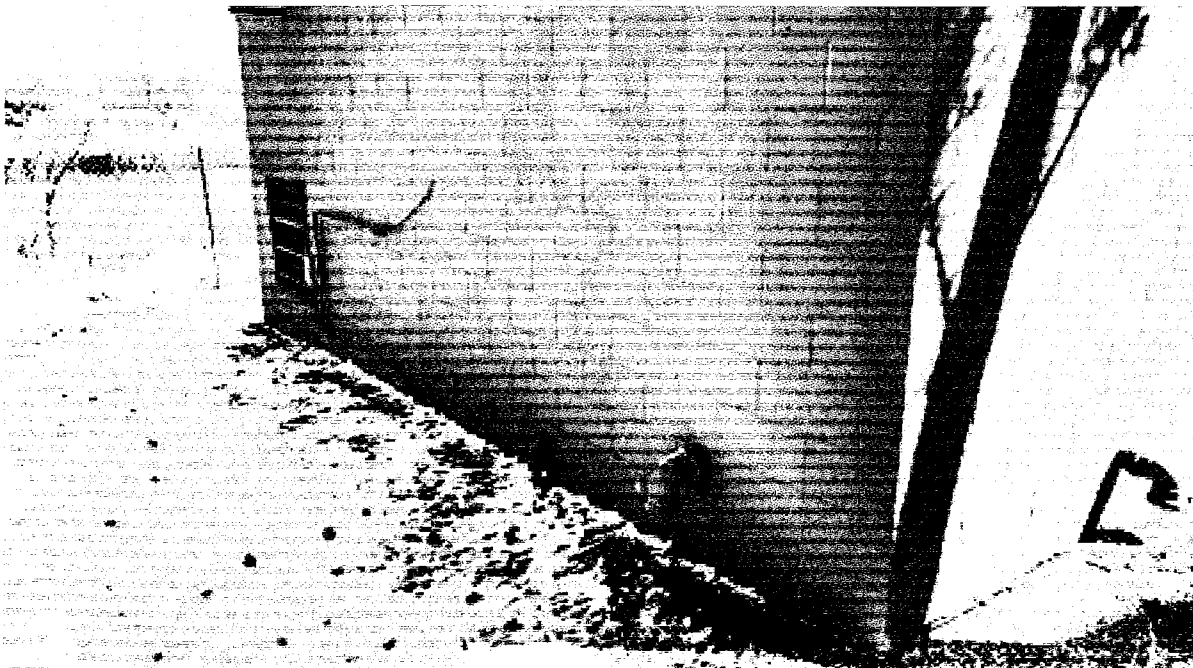
Policy Number:

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.



Front View



Rear View

**Building Photographs**

Continuation Page

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

99 Seaview Court

City Neptune

State NJ

ZIP Code 07753

FOR INSURANCE COMPANY USE

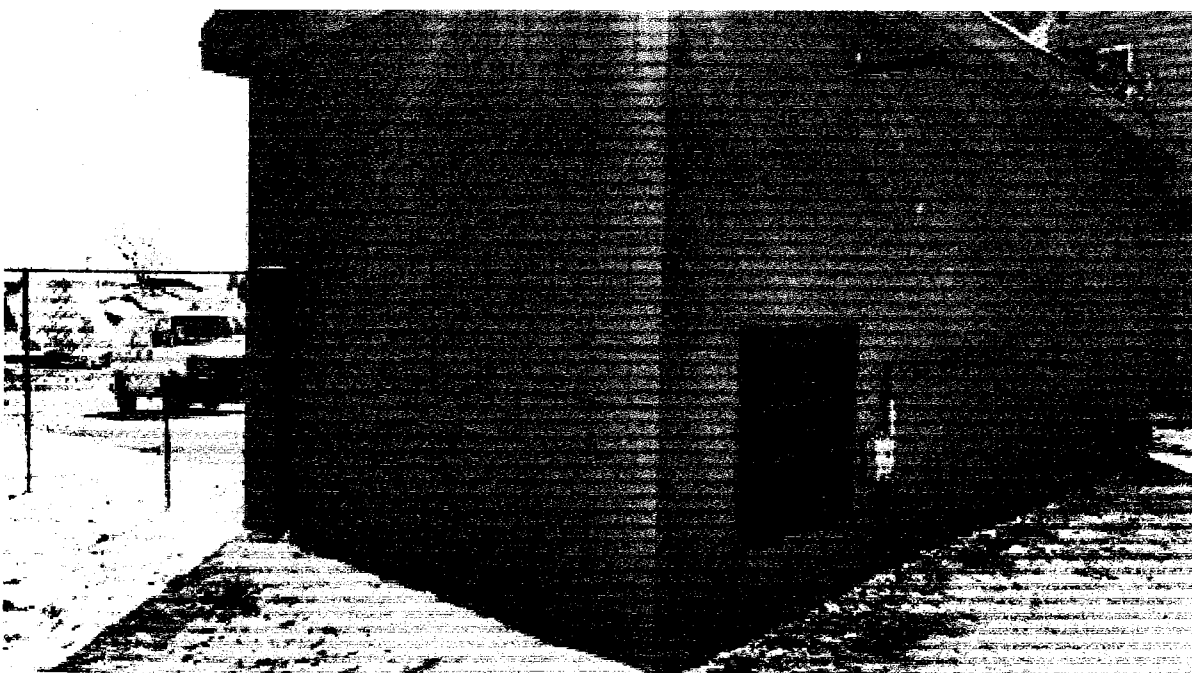
Policy Number:

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.



Left Side View



Right Side View

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

### FOR INSURANCE COMPANY USE

A1. Building Owner's Name Michael Pullano

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
28 Albany Road

Company NAIC Number:

City Neptune

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
Tax Lot 3 Block 557, Neptune Township, Monmouth County, NJ

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. 40-11'-29.4" Long. 74-01'-36.0"

Horizontal Datum: ☐ NAD 1927 ☒ 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 7

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) 1090 sq ft  
b) Number 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 1200 sq in  
d) Engineered flood openings? ☒ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage N/A sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  
c) Total net area of flood openings in A9.b N/A sq in  
d) Engineered flood openings? ☐ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
Neptune Township - 340317

B2. County Name  
Monmouth

B3. State  
NJ

B4. Map/Panel Number  
34025C0334

B5. Suffix  
F

B6. FIRM Index Date  
9/25/09

B7. FIRM Panel Effective/Revised Date  
9/25/09

B8. Flood Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone AO, use base flood depth)  
9

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: GPS-Smartnet

Vertical Datum: NAVD88

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) 8.3 ☒ feet ☐ meters  
b) Top of the next higher floor 15.6 ☒ feet ☐ meters  
c) Bottom of the lowest horizontal structural member (V Zones only) N/A ☐ feet ☐ meters  
d) Attached garage (top of slab) N/A ☐ feet ☐ meters  
e) Lowest elevation of machinery or equipment servicing the building 12.8 ☒ feet ☐ meters  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) 8.2 ☒ feet ☐ meters  
g) Highest adjacent (finished) grade next to building (HAG) 8.6 ☒ feet ☐ meters  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 8.3 ☒ feet ☐ 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.

☒ Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

☒ Check here if attachments.

Certifier's Name John P. Augustine

License Number 34838

Title Land Surveyor

Company Name Gravatt Consulting Group, Inc.-9766

Address 414 Lacey Road

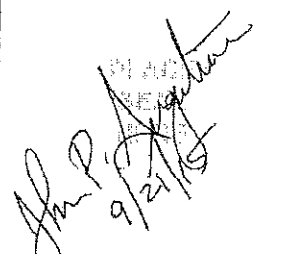
City Forked River

State NJ ZIP Code 08731

Signature John P. Augustine

Date 9/2/15

Telephone 609-693-8126 ext.100

  
9/2/15

# ELEVATION CERTIFICATE, page 2

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. 28 Albany Road		Policy Number:
City Neptune	State NJ ZIP Code 07753	Company NAIC Number:

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments This certificate certified to the owners in line A1 only and is non-transferrable. Property is located in preliminary flood zone AE, elev.=10, per preliminary map 34025C0334G, published 1/31/14 by FEMA, this is for informational purposes only & subject to verification by FEMA. Flood vents are Smart Vent Model No. 1540-510 (Typ.) Utilities: A/C Deck el.=13.6; Furnace el.=13.1; W.Heater el.=12.8, Elec.Mtr.el.=13.9.

Signature *J.P. Signature*

Date 9/2/15

## 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 8–9 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's or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments.

## 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	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
28 Albany Road

City Neptune

State NJ

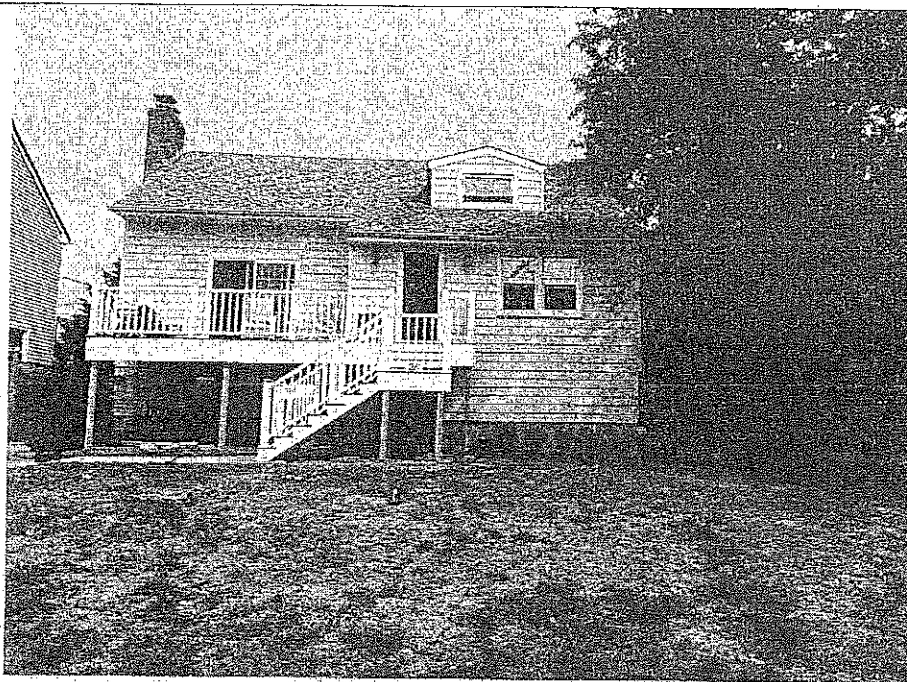
ZIP Code 07753

FOR INSURANCE COMPANY USE

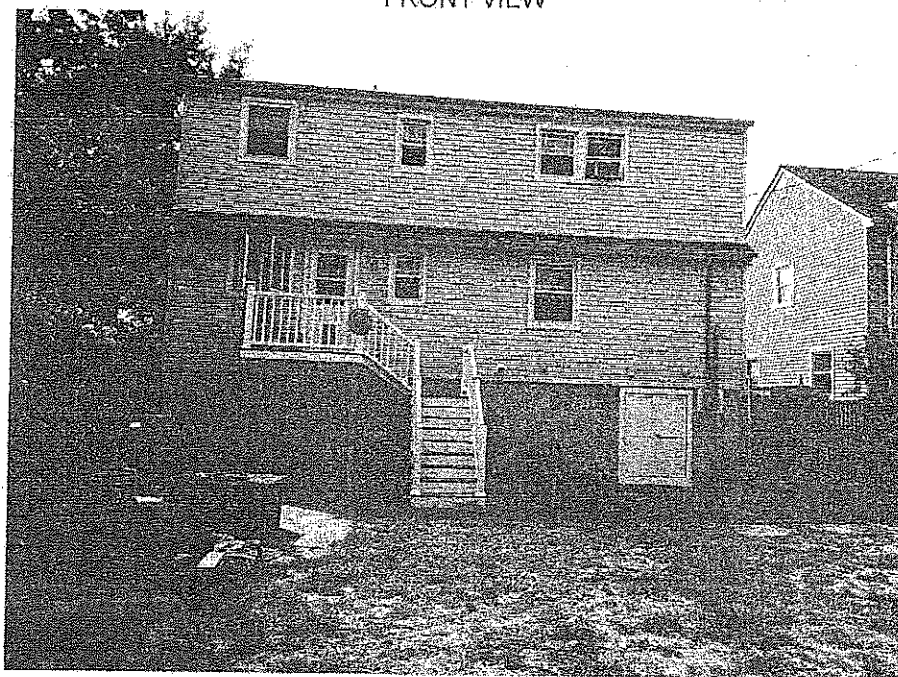
Policy Number:

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.



FRONT VIEW



REAR VIEW

## Building Photographs

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
28 Albany Road

City Neptune

State NJ

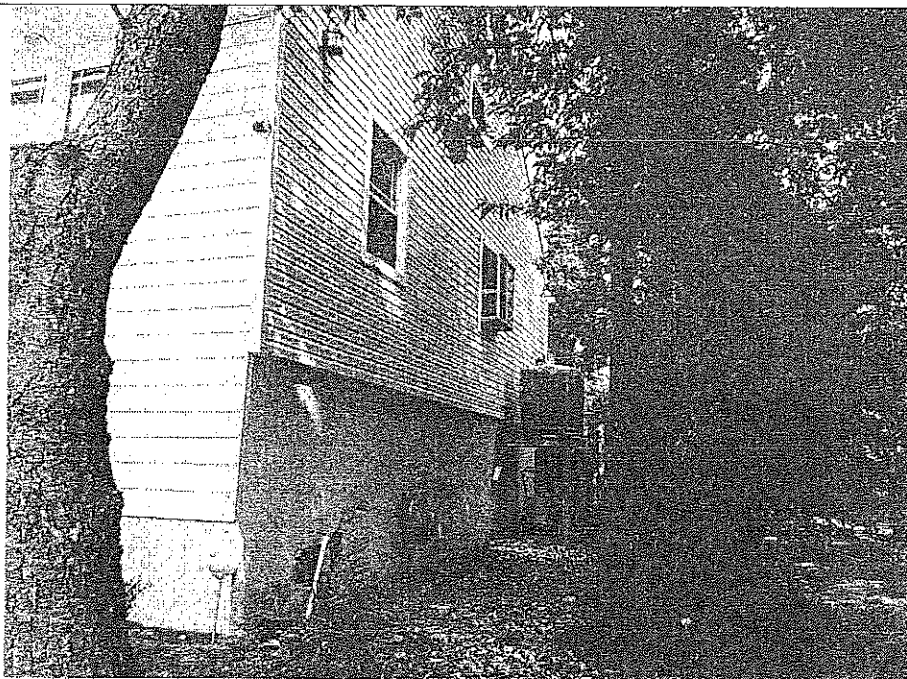
ZIP Code 07753

FOR INSURANCE COMPANY USE

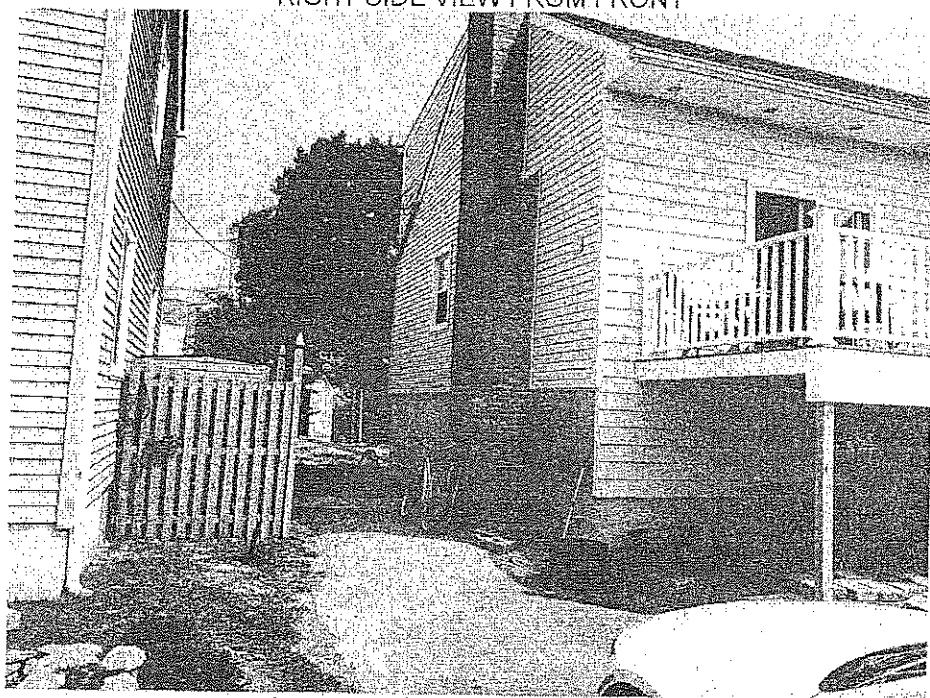
Policy Number:

Company NAIC Number:

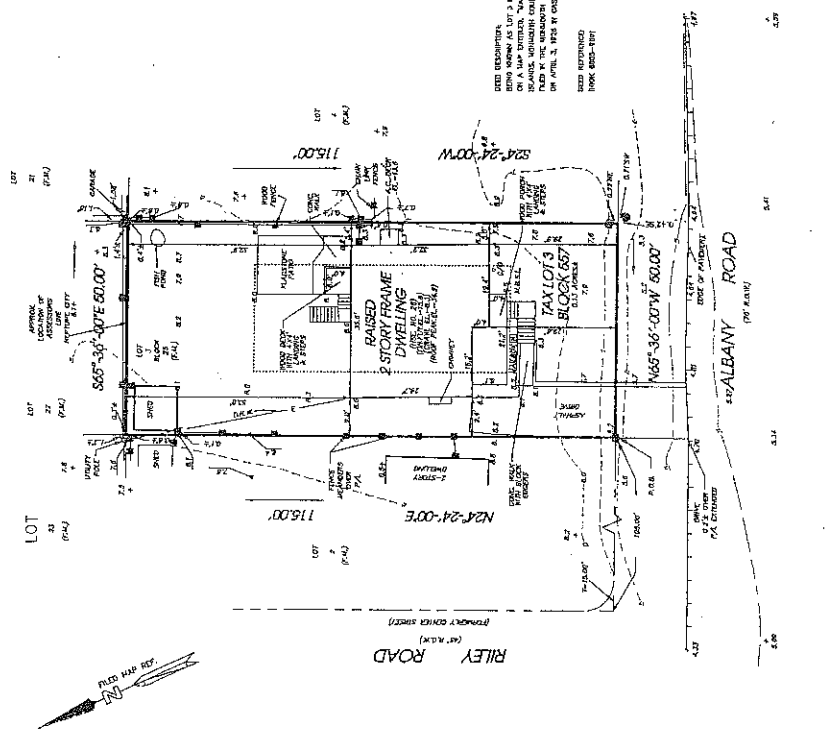
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



RIGHT SIDE VIEW FROM FRONT



LEFT SIDE VIEW FROM FRONT




- [illegible]

**LEGEND**

- ELEVATION CONTOUR  
 SPOT ELEVATION  
 OVERHEAD UTILITY WIRE  
 WATER VALVE  
 WATER METER  
 SAN. CLEAN OUT  
 MINIMORE BUILDING SETBACK LINE  
 M.B.S.L.



FINAL ASSESSMENT MAP OF TAX LOT 3 BLOCK 557 26 ALBANY ROAD NEPTUNE TOWNSHIP MONMOUTH COUNTY, NEW JERSEY	SCALE: 1" = 20'	DATE: 9/2/75	DRAWN BY: MJD	CHECKED BY:	SHEET NO. 1 OF 1	PROJECT NUMBER:
						29766



**GRAVATT**  
 CONSULTING GROUP  
 Engineers • Surveyors • Planners • Environmental Scientists  
 100 N. 9th Street, 3rd Floor  
 New York, NY 10038  
 Tel. 212. 682. 0127  
 Telex 234222GRAVATT  
 Districts of Metropolitan New York

TO: MICHAEL PULLANO

[illegible][illegible]

John P. Augustine  
JOHN P. AUGUSTINE  
N.J. Professional Land Surveyor No. 34938

MINIMUMS : <u>REQUIRED :</u>	
LOT AREA	10,000 S.F.
LOT WIDTH	100 FT.
LOT FRONTAGE	100 FT.
LOT DEPTH	100 FT.
PRINCIPAL BUILDING :	
FRONT SETBACK	25 FT.
REAR SETBACK	30 FT.
SIDE SETBACK	10 FT. (25' COMBINED)
MAXIMUMS :	
BUILDING HEIGHT	35 FT. (2.5 Story)
BLDG. COVERAGE	30%
LOT COVERAGE	40%
EXISTING NON CONFORMITY	

ZONING : R-2	
PROVIDED :	
5,750 S.F.	
50 FT.	
50 FT.	
115 FT.	
28.6 FT.	
32.0 FT.	
5.0 FT.	(14.0' TOTAL)=
25.0 FT.	(RIDGE PEAK TO GRADE)
20.28'	
32.88'	

EXISTING NON CONFORMITY

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name PAMELA CALLENDER

FOR INSURANCE COMPANY USE

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
209 NORTH RIVERSIDE DRIVE

Company NAIC Number:

City NEPTUNE TOWNSHIP

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
BLOCK 502.01 LOT 1388

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 40 11 59 Long. -74 02 40 Horizontal Datum: ☐ NAD 1927 ☒ 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 6

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) 448 sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0  
c) Total net area of flood openings in A8.b 0 sq in  
d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage OVER sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 3  
c) Total net area of flood openings in A9.b 600 sq in  
d) Engineered flood openings? ☒ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
NEPTUNE 340317

B2. County Name  
MONMOUTH

B3. State  
NJ

B4. Map/Panel Number  
34025C0333

B5. Suffix  
F

B6. FIRM Index Date  
9-25-2009

B7. FIRM Panel  
Effective/Revised Date  
9-25-2009

B8. Flood  
Zone(s)  
\*\*AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
\*\*g

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: KV0806

Vertical Datum: NAVD 88

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>6.28</u>    | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>16.04</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 type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  | <u>6.28</u>    | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | <u>AC13.16</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>6.0</u>     | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>6.6</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>6.4</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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a  
☒ Check here if attachments. licensed land surveyor? ☒ Yes ☐ No

Certifier's Name WILLIAM J. FIORE

License Number GS-35362

Title PRESIDENT

Company Name WILLIAM J. FIORE, INC.

Address 263 BRICK BOULEVARD, UNIT 5 City BRICK

State NJ ZIP Code 08723

Signature

Date 1-11-2016

Telephone 732-920-5100

PLACE  
SEAL  
HERE

In these spaces, copy the corresponding information from Section A.

Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

RIVERSIDE DRIVE

NEPTUNE TOWNSHIP

State NJ

ZIP Code 07753

FOR INSURANCE COMPANY USE

Policy Number

Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments \*\*REFERENCE: PRELIMINARY FLOOD INSURANCE RATE MAP, DATED JANUARY 30, 2015: SUFFIX G, MAP PANEL 0333, ZONE: AE, ELEVATION 10.

GARAGE AREA IS INCLUDED IN TOTAL ENCLOSED AREA IN A8a. THERE ARE (3) "SMART VENT" FLOOD VENTS (MODEL #1540-520) IN GARAGE WALLS.

Signature

Date 1-11-2016

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 8-9 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's or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

☐ Check here if attachments

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 Title

Community Name Telephone

Signature Date

Comments

☐ Check here if attachments.

# Building Photographs

See Instructions for Item A6.

**INSTRUCTIONS:** In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
209 NORTH RIVERSIDE DRIVE

City NEPTUNE TOWNSHIP

State NJ

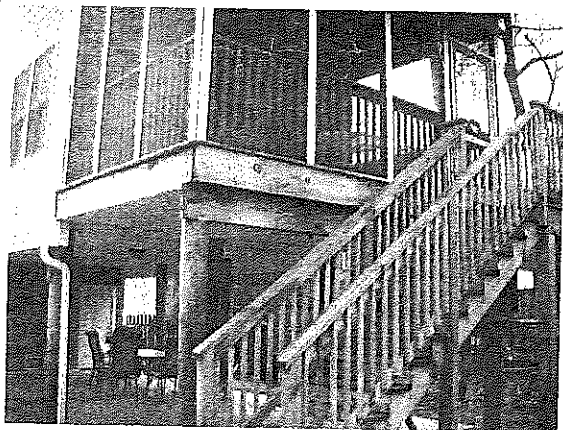
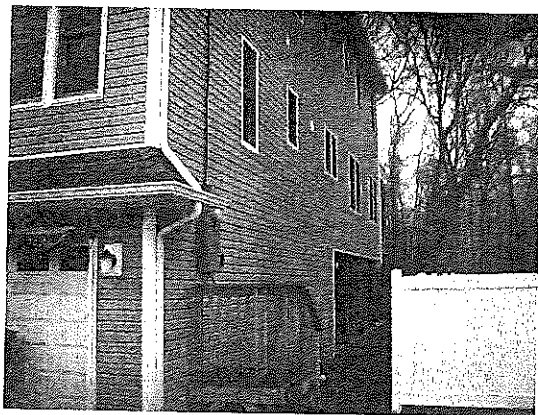
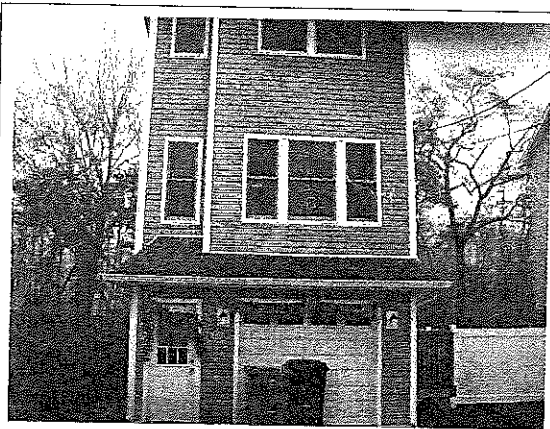
ZIP Code 07753

FOR INSURANCE COMPANY USE

Policy Number:

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.



ALL PICTURES TAKEN 12-2-2015.

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name MR. VINCE VYZAS

### FOR INSURANCE COMPANY USE

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
104 NORTH RIVERSIDE DRIVE

Company NAIC Number:

City NEPTUNE TOWNSHIP

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
LOTS 12-14 & 17-19 BLOCK 20 AKA LOT 6 BLOCK 4814

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 40.1968 Long. 74.0439 Horizontal Datum: ☐ NAD 1927 ☒ 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 7

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) 491 sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 8  
c) Total net area of flood openings in A8.b 1600 sq in  
d) Engineered flood openings? ☒ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage 600 sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 4  
c) Total net area of flood openings in A9.b 800 sq in  
d) Engineered flood openings? ☒ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
TOWNSHIP OF NEPTUNE 34025C

B2. County Name  
MONMOUTH

B3. State  
NJ

B4. Map/Panel Number  
34025 C 0333

B5. Suffix  
F

B6. FIRM Index Date  
9-29-2009

B7. FIRM Panel  
Effective/Revised Date  
9-25-2009

B8. Flood  
Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
9

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: GPS OBS. SMART NET

Vertical Datum: NAVD '88

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) 8.8 ☒ feet ☐ meters  
b) Top of the next higher floor 17.6 ☒ feet ☐ meters  
c) Bottom of the lowest horizontal structural member (V Zones only) NA ☐ feet ☐ meters  
d) Attached garage (top of slab) 8.1 ☒ feet ☐ meters  
e) Lowest elevation of machinery or equipment servicing the building 13.4 ☒ feet ☐ meters  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) 7.2 ☒ feet ☐ meters  
g) Highest adjacent (finished) grade next to building (HAG) 7.8 ☒ feet ☐ meters  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 7.2 ☒ feet ☐ 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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a  
☐ Check here if attachments. licensed land surveyor? ☒ Yes ☐ No

Certifier's Name KENNETH P. FRANK

License Number 36727

Title OWNER/PRESIDENT

Company Name KF2T PROFESSIONAL LAND SURVEYORS

Address P.O. BOX 521

City COLTS NECK

State NJ

ZIP Code 07722

Signature Kenneth P. Frank

Date 12-14-15

Telephone 908-692-7853

PLACE  
SEAL  
HERE

K F

**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 104 NORTH RIVERSIDE DRIVE		Policy Number:
City NEPTUNE TOWNSHIP	State NJ ZIP Code 07753	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments LOWEST ELEVATION OF MACHINERY SERVICING THE DWELLING IS THE HUNG FURNACE LOCATED IN THE ATTACHED GARAGE AT ELEVATION 13.4.

FLOOD VENTS ARE SMART VENT MODEL 1540-520 (8 X 16). BASED ON FLOOD VENT INFO. EACH VENT IS CERTIFIED FOR 200 SF. ABFE : A 1% EL 10 &amp; 0.2% EL 12

Signature

*Kenneth P. Frank*

Date 12-14-15

**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 8–9 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's or Owner's Authorized Representative's Name

Address

City

State

ZIP Code

Signature

Date

Telephone

Comments

☐ Check here if attachments.**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 ImprovementG8. 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

Community Name

Telephone

Signature

Date

Comments

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
104 NORTH RIVERSIDE DRIVE

City NEPTUNE TOWNSHIP

State NJ

ZIP Code 07753

FOR INSURANCE COMPANY USE

Policy Number:

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.

**FRONT VIEW**

**Building Photographs**

Continuation Page

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
104 NORTH RIVERSIDE DRIVE

City NEPTUNE TOWNSHIP

State NJ

ZIP Code 07753

FOR INSURANCE COMPANY USE

Policy Number:

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.

**REAR VIEW**

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Niskoch		FOR INSURANCE COMPANY USE	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 111 Melrose Ave		Policy Number:	
City Neptune State NJ ZIP Code 07753		Company NAIC Number:	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 9 - Block 5317, Formerly Lot 43-45, Block 471			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>			
A5. Latitude/Longitude: Lat. <u>40-11-32.06</u> Long. <u>74-02-26.08</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):		A9. For a building with an attached garage:	
a) Square footage of crawlspace or enclosure(s) <u>986</u> sq ft		a) Square footage of attached garage <u>252</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>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>2</u>	
c) Total net area of flood openings in A8.b <u>1000</u> sq in		c) Total net area of flood openings in A9.b <u>400</u> sq in	
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Twp. of Neptune- 340317		B2. County Name Monmouth		B3. State New Jersey	
B4. Map/Panel Number 34025C0333	B5. Suffix F	B6. FIRM Index Date 9-25-09	B7. FIRM Panel Effective/Revised Date 9-25-09	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9
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 checked="" type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" 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					

## 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: GPS Vertical Datum: NAVD88  
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.

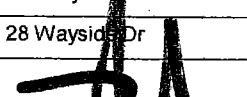
Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>6.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>13.9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>0.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>6.8</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>13.1</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>6.9</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>7.0</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>6.7</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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No  
☒ Check here if attachments.

Certifier's Name John W. Lord, PE, PLS		License Number 32455	
Title Land Surveyor		Company Name KTP Consulting, LLC	
Address 28 Wayside Dr		City Brick State NJ ZIP Code 08724	
Signature 		Date 7-6-15 Telephone 609-276-4445	

# ELEVATION CERTIFICATE, page 2

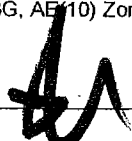
<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 111 Melrose Ave		Policy Number:	
City Neptune	State NJ	ZIP Code 07753	Company NAIC Number:

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments Lowest Mechanical EL=13.1 (Elec Met), Heat/Hot Water EL=13.9, Smartvent 1540-510 200 sq in each. Also shown on FEMA Prelim Firm 34025C0333G, AE10) Zone

Signature



Date 7-6-15

## 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 8–9 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's or Owner's Authorized Representative's Name \_\_\_\_\_

Address _____	City _____	State _____	ZIP Code _____
Signature _____	Date _____	Telephone _____	
Comments _____			

☐ Check here if attachments.

## 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 _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____
Comments _____	

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

111 Melrose Ave

City Neptune

State NJ

ZIP Code 07753

FOR INSURANCE COMPANY USE

Policy Number:

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.

FRONT VIEW



**Building Photographs**

Continuation Page

**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.  
111 Melrose Ave

Policy Number:

City Neptune

State NJ

ZIP Code 07753

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.

**REAR VIEW**

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name <b>LORRAINE M. ROSS</b>		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or R.O. Route and Box No. <b>118 BEVERLY WAY</b>		Company NAIC Number:
City <b>NEPTUNE TOWNSHIP</b>	State <b>NJ</b>	ZIP Code <b>07753</b>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>TAX MAP LOT 1 BLOCK 5306</b>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>RESIDENTIAL</b>		
A5. Latitude/Longitude: Lat. <b>N 40 11 39.30</b> Long. <b>W 74 02 29.20</b>		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 <b>7</b>		
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) <b>1115</b> sq ft b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>7</b> c) Total net area of flood openings in A8.b <b>comment</b> 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 <b>500</b> sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>3</b> c) Total net area of flood openings in A9.b <b>comment</b> sq in d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <b>NEPTUNE TOWNSHIP 340317</b>		B2. County Name <b>MONMOUTH</b>		B3. State <b>NJ</b>	
B4. Map/Panel Number <b>34025C0333</b>	B5. Suffix <b>F</b>	B6. FIRM Index Date <b>09/25/2009</b>	B7. FIRM Panel Effective/ Revised Date <b>09/25/2009</b>	B8. Flood Zone(s) <b>AE</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>9</b>
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 type="checkbox"/> NGVD 1929 <input checked="" 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					

## 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: **R.M. #28, R.M. #29 OLD FIRM** 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.

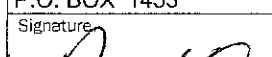
		Check the measurement used.	
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>6</u> . <u>37</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<u>15</u> . <u>47</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>5</u> . <u>95</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>12</u> . <u>77</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>5</u> . <u>6</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>6</u> . <u>1</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>5</u> . <u>6</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.

☒ Check here if comments are provided on back of form.  
☒ Check here if attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

Certifier's Name <b>PAUL K. LYNCH LS</b>		License Number <b>GS35855</b>	
Title <b>LAND SURVEYOR</b>		Company Name <b>PAUL K. LYNCH LS</b>	
Address <b>P.O. BOX 1453</b>	City <b>WALL</b>	State <b>NJ</b>	ZIP Code <b>07719</b>
Signature 	Date <b>04/14/2016</b>	Telephone <b>(732) 681-4035</b>	

# ELEVATION CERTIFICATE, page 2

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>118 BEVERLY WAY</b>			Policy Number:	
City <b>NEPTUNE TOWNSHIP</b>	State <b>NJ</b>	ZIP Code <b>07753</b>	Company NAIC Number:	

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments A8b,c,A9b,c ALL OPENINGS HAVE "SMART" VENT MODEL 1540-510 INSTALLED,MANUFACT. CERTIFIES EACH COVERS 200SF(ENCLOS. COVERAGE 1400SF/GARAGE COVERAGE 600SF) C2e ELEVATION SHOWN IS BOTTOM OF A.C. UNIT ATTACHED TO SIDE OF GARAGE  
PRELIMINARY FIRM 34025C0333G DATED 1-30-2015 SHOWS STRUCTURE IN ZONE AE BFE = 10

Signature

Date 04/14/2016

## 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 8–9 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.

## 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–G9) 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

Title

Community Name

Telephone

Signature

Date

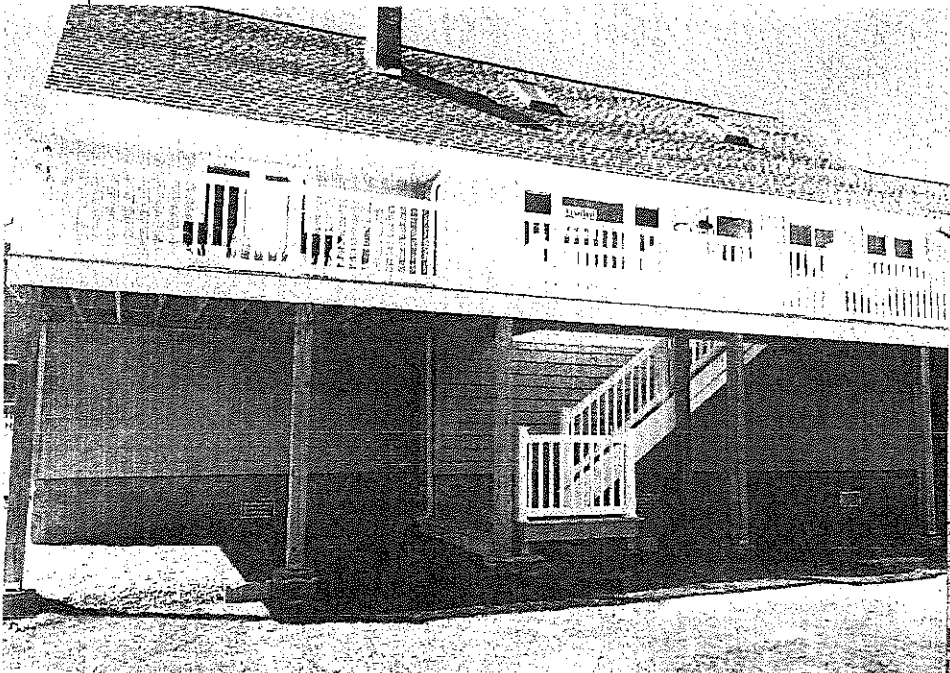
Comments

☐ Check here if attachments.

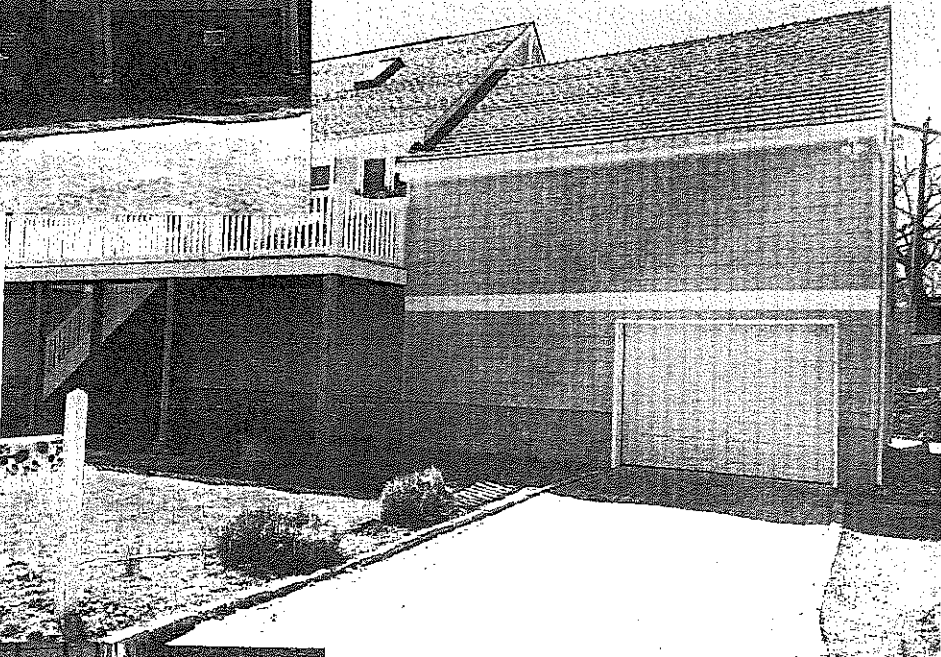
IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 118 BEVERLY WAY			Policy Number:
City NEPTUNE TOWNSHIP	State NJ	ZIP Code 07753	Company NAIC Number:

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.

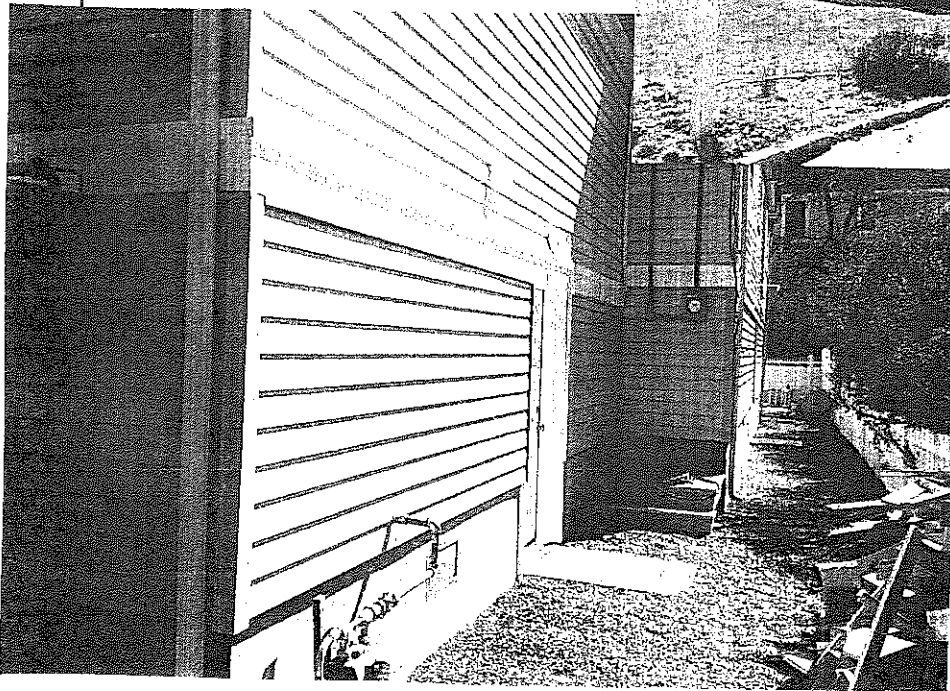
4-13-16



LEFT  
FRONT



RIGHT  
FRONT



LEFT  
REAR

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

### FOR INSURANCE COMPANY USE

A1. Building Owner's Name	JEFFREY & JUDITH TAKACH	Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	411 S. RIVERSIDE DRIVE	Company NAIC Number:	
City	NEPTUNE TOWNSHIP	State	NJ
		ZIP Code	07753
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	TAX MAP LOT 12 BLOCK 5409 <i>Existing structure</i>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longitude: Lat.	N 40 11 10.00	Long.	W 74 02 35.95
		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 1A			
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:	
a) Square footage of crawlspace or enclosure(s)	997 sq ft	a) Square footage of attached garage	N/A sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	0	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade	
c) Total net area of flood openings in A8.b	N/A sq in	c) Total net area of flood openings in A9.b	
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number	NEPTUNE TOWNSHIP 340317		B2. County Name	MONMOUTH		B3. State	NJ	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)			
34025C0341	F	09/25/2009	09/25/2009	AE	9			
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 type="checkbox"/> NGVD 1929 <input checked="" 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								

## 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: R.M.# 28 OLD FIRM 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.

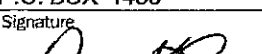
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	8.35	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	16.75	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	N/A	<input 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)	8.3	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	7.95	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	9.4	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	7.95	<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.

☒ Check here if comments are provided on back of form.  
☐ Check here if attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

Certifier's Name	PAUL K. LYNCH LS			License Number	GS 35855		
Title	LAND SURVEYOR			Company Name	PAUL K. LYNCH LS		
Address	P.O. BOX 1453			City	WALL	State	NJ
						ZIP Code	07719
Signature				Date	03/09/2016	Telephone	(732) 681-4035

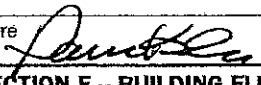
PLACE  
SEAL  
HERE

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>411 S. RIVERSIDE DRIVE</b>			Policy Number:
City <b>NEPTUNE TOWNSHIP</b>	State <b>NJ</b>	ZIP Code <b>07753</b>	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments **STRUCTURE IS BI-LEVEL DESIGN**  
**C2e ELEVATION SHOWN IS BOTTOM OF WATER HEATER IN CLOSET ON LOWER LEVEL**  
**PRELIMINARY FIRM 34025C0341G DATED 1-30-2015 SHOWS STRUCTURE IN ZONE AE BFE = 10**

Signature  Date **03/09/2016**

**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 8–9 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.**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–G9) 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 ImprovementG8. 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 \_\_\_\_\_

Community Name \_\_\_\_\_ Telephones \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments \_\_\_\_\_

☐ Check here if attachments.

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>Lena D'Aloia &amp; Louise Ventola</u>		FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>102 Prospect Avenue</u>		Policy Number:
City <u>Township of Neptune</u> State <u>NJ</u> ZIP Code <u>07753-5806</u>		Company NAIC Number:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Tax lot 4, Tax block 5413</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>40°11'20.9"</u> Long. <u>-074°02'21.9"</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>5</u>		
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) <u>None</u> sq ft b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>None</u> c) Total net area of flood openings in A8.b <u>0</u> sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		A9. For a building with an attached garage: a) Square footage of attached garage <u>N/A</u> sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u> c) Total net area of flood openings in A9.b <u>N/A</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 <u>Township of Neptune 340317</u>		B2. County Name <u>Monmouth</u>		B3. State <u>NJ</u>	
B4. Map/Panel Number <u>34025C/0333</u>	B5. Suffix <u>F</u>	B6. FIRM Index Date <u>September 25, 2009</u>	B7. FIRM Panel Effective/Revised Date <u>September 25, 2009</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>9.0 feet</u>
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 type="checkbox"/> NGVD 1929 <input checked="" 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					

## 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: \_\_\_\_\_ Vertical Datum: NAVD'88

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>13.03</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	<input 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>12.45</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>6.60</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>7.55</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>6.47</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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

☐ Check here if attachments.

Certifier's Name <u>John W. McCord, Sr.</u>	License Number <u>24GS03538500</u>
Title <u>Land Surveyor</u>	Company Name <u>Clearpoint Services, LLC.</u>
Address <u>2105 W. County Line Road</u>	City <u>Jackson</u> State <u>NJ</u> ZIP Code <u>08527</u>
Signature <u>[Signature]</u>	Date <u>08-11-2015</u> Telephone <u>732-905-5463</u>

8-13-2015

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

### FOR INSURANCE COMPANY USE

A1. Building Owner's Name Niskoch

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
111 Melrose Ave

Company NAIC Number:

City Neptune

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
Lot 9 - Block 5317, Formerly Lot 43-45, Block 471

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. 40-11-32.06 Long. 74-02-26.08

Horizontal Datum: ☐ NAD 1927 ☒ 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 8

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) 986 sq ft

b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 5

c) Total net area of flood openings in A8.b 1000 sq in

d) Engineered flood openings? ☒ Yes ☐ No

A9. For a building with an attached garage:

a) Square footage of attached garage 252 sq ft

b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 2

c) Total net area of flood openings in A9.b 400 sq in

d) Engineered flood openings? ☒ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
Twp. of Neptune- 340317

B2. County Name  
Monmouth

B3. State  
New Jersey

B4. Map/Panel Number  
34025C0333

B5. Suffix  
F

B6. FIRM Index Date  
9-25-09

B7. FIRM Panel  
Effective/Revised Date  
9-25-09

B8. Flood  
Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
9

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: GPS

Vertical Datum: NAVD88

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) 6.85

☒ feet ☐ meters

b) Top of the next higher floor 13.90

☒ feet ☐ meters

c) Bottom of the lowest horizontal structural member (V Zones only) 11.2

☐ feet ☐ meters

d) Attached garage (top of slab) 6.98

☒ feet ☐ meters

e) Lowest elevation of machinery or equipment servicing the building  
(Describe type of equipment and location in Comments) 13.1

☒ feet ☐ meters

f) Lowest adjacent (finished) grade next to building (LAG) 6.8

☒ feet ☐ meters

g) Highest adjacent (finished) grade next to building (HAG) 7.0

☒ feet ☐ meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 6.7

☒ feet ☐ 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.

☒ Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a  
licensed land surveyor? ☒ Yes ☐ No

☒ Check here if attachments.

Certifier's Name John W. Lord, PE, PLS

License Number 32455

Title Land Surveyor

Company Name KTP Consulting, LLC

Address 28 Wayside Dr

City Brick

State NJ

ZIP Code 08724

Signature

Date 12-25-15

Telephone 609-276-4445

**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 111 Melrose Ave		Policy Number:
City Neptune	State NJ ZIP Code 07753	Company NAIC Number:

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments: Lowest Mechanical EL=13.1 (Elec Met), Heat/Hot Water EL=13.9, Smartvent 1540-510 200 sq in each. Also shown on FEMA Prelim Firm 34025C033G, AE(10) Zone

Signature 

Date 12-25-15

**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 8–9 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's or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments.**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 ImprovementG8. 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
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
111 Melrose Ave

City Neptune

State NJ

ZIP Code 07753

FOR INSURANCE COMPANY USE

Policy Number:

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.

**FRONT VIEW**

**Building Photographs**

Continuation Page

**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.  
111 Melrose Ave

Policy Number:

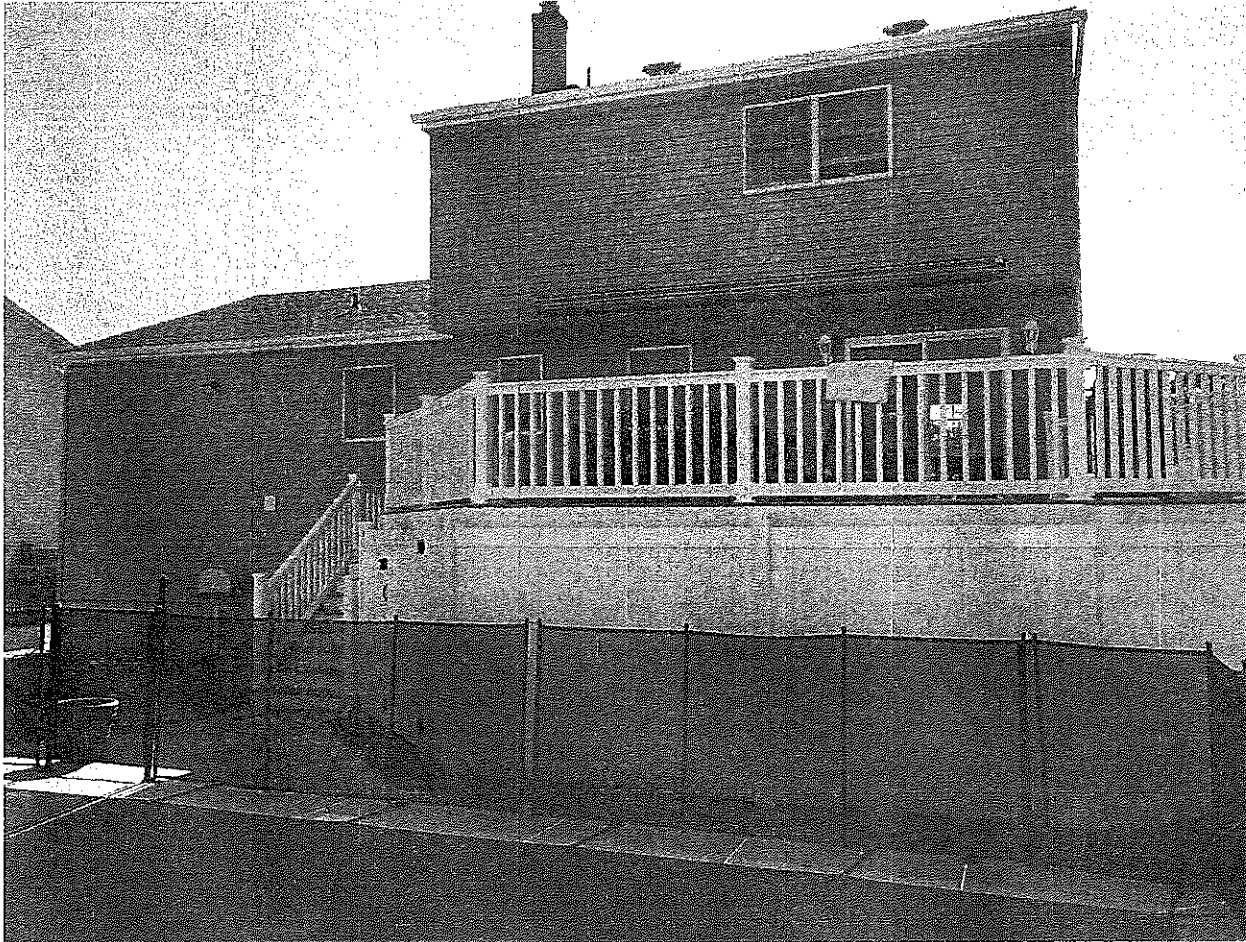
City Neptune

State NJ

ZIP Code 07753

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.

**REAR VIEW**

**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 102 Prospect Avenue		Policy Number:
City Township of Neptune	State NJ ZIP Code 07753-5806	Company NAIC Number:

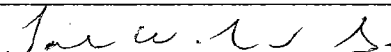
**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments There is no permanent enclosure at the ground level (it is an open flow), the building is on pilings. The lowest machinery servicing the building is the Air Conditioning Unit elevated on a platform at elevation =12.45

FEMA "PRELIMINARY FIRM MAP NUMBER 34025C0333G" DATED JANUARY 30, 2015 (NOT OFFICIALLY ADOPTED AS AN EFFECTIVE FIRM ON THIS DATE) INDICATES ZONE AE, WITH A BASE FLOOD ELEVATION OF 10.0 FEET ABOVE NAVD'88.

Signature



Date 08-11-2015

**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 8–9 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's or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments.**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	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments.

**Building Photographs**

See Instructions for Item A6.

**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.  
102 Prospect Avenue

Policy Number:

City Township of Neptune

State NJ

ZIP Code 07753-5806

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.

Front view of 102 Prospect Avenue 8/11/2015



Rear view of 102 Prospect Avenue 8/11/2015



**Building Photographs**

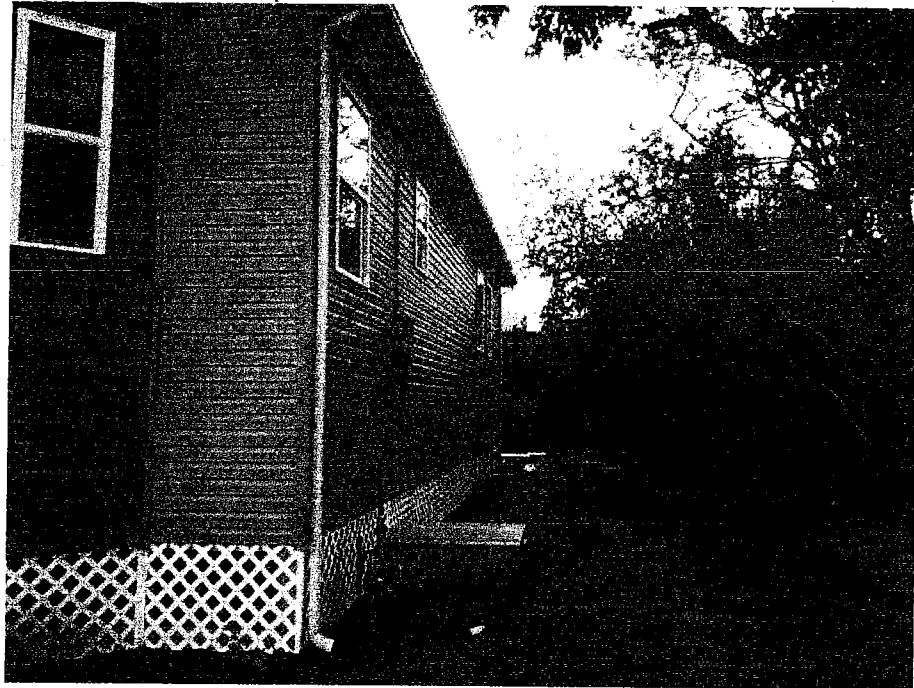
Continuation Page

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 102 Prospect Avenue			FOR INSURANCE COMPANY USE
City Township of Neptune			Policy Number:
State NJ ZIP Code 07753-5806			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.

Right side of 102 Prospect Avenue 8/11/2015



Left side of 102 Prospect Avenue 8/11/2015



DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
**ELEVATION CERTIFICATE**

**IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16**

OMB Control Number: 1660-0008  
Expiration: 11/30/2018

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				FORM INSURANCE COMPANY USE	
A1. Building Owner's Name Robbin Gilbert				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 103 Wilson Road				Company NAIC Number:	
City Neptune		State NJ		Zip Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 13 Block 4808					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential					
A5. Latitude/Longitude: Lat. 40°11'57.85" Long. 74°02'41.88" Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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 7					
A8. For a building with a crawlspace or enclosure(s):			A9. For a building with an attached garage:		
a) Square footage of crawlspace or enclosure(s) 846 sq ft			a) Square footage of attached garage 0 sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 5			b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade		
c) Total net area of flood openings in A8.b 1000 sq in			c) Total net area of flood openings in A9.b sq in		
d) Engineered flood openings? <input checked="" type="radio"/> Yes <input type="radio"/> No			d) Engineered flood openings? <input type="radio"/> Yes <input type="radio"/> No		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Township of Neptune / 340317			B2. County Name Monmouth County		B3. State NJ
B4. Map/Panel Number 34025C0333	B5. Suffix F	B6. FIRM Index Date 9/25/2009	B7. FIRM Panel Effective/ Revised Date 9/25/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9.0'
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in item B9: <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source:					
B11. Indicate elevation datum used for BFE in item B9: <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other/Source:					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA					
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> Finished Construction					
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. * A new Elevation Certificate will be required when construction of the building is complete.					
Benchmark Utilized: Smart Net Vertical Datum: NAVD 88					
Indicate elevation datum used for the elevations in items a) through h) below. <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> 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)		ENCL - 8.0	<input checked="" type="radio"/> feet <input type="radio"/> meters		
b) Top of the next higher floor		FF - 16.1	<input checked="" type="radio"/> feet <input type="radio"/> meters		
c) Bottom of the lowest horizontal structural member (V Zones only)		N/A -	<input type="radio"/> feet <input type="radio"/> meters		
d) Attached garage (top of slab)		GF - 7.7	<input checked="" type="radio"/> feet <input type="radio"/> meters		
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)		A/C - 15.4	<input checked="" type="radio"/> feet <input type="radio"/> meters		
f) Lowest adjacent (finished) grade next to building (LAG)		LAG - 7.4	<input checked="" type="radio"/> feet <input type="radio"/> meters		
g) Highest adjacent (finished) grade next to building (HAG)		HAG - 7.6	<input checked="" type="radio"/> feet <input type="radio"/> meters		
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support		DECK - 7.4	<input checked="" type="radio"/> feet <input type="radio"/> meters		

# ELEVATION CERTIFICATE

OMB Control Number: 1660-0008  
Expiration: 11/30/2018

103 Wilson Road

Neptune

NJ

07753

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.				
<input checked="" type="checkbox"/> Check here if attachments.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="radio"/> Yes <input type="radio"/> No		
Certifier's Name Robert L. Vallee, PLS		License Number 43276		
Title Land Surveyor		Company Name Vallee Surveying, Inc		
Address 1010 Commons Way		City Toms River	State NJ	Zip Code 08755
Signature 		Date JUL 29, 2016	Telephone 732-244-2373	
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.				
Comments (including type of equipment and location, per C2(e), if applicable) A/C located on platform at elev. 15.4'. SmartVent Model #1540-520 (200 sq. in.) Property located in floodway area within Zone AW with a BFE of 9.0'. ***Preliminary Updated FEMA Flood Hazard Data BFE=Floodway area within Zone AE BFE 11.0'. Release date 1/30/15*** This information is to be used for insurance purposes only.				
Signature 		Date JUL 29, 2016		
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 _____ - _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ - _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the LAG.				
E2. For Building Diagrams 6 - 9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8 - 9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ - _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E3. Attached garage (top of slab) is _____ - _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E4. Top of platform of machinery and /or equipment servicing the building is _____ - _____ <input type="radio"/> feet <input type="radio"/> meters <input type="checkbox"/> above or <input type="checkbox"/> 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? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> 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				
<input type="checkbox"/> Check here if attachments.				

**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	Title
-----------------------	-------

Community Name	Telephone
----------------	-----------

Signature	Date
-----------	------

Comments

☐ Check here if attachments.

# BUILDING PHOTOGRAPHS

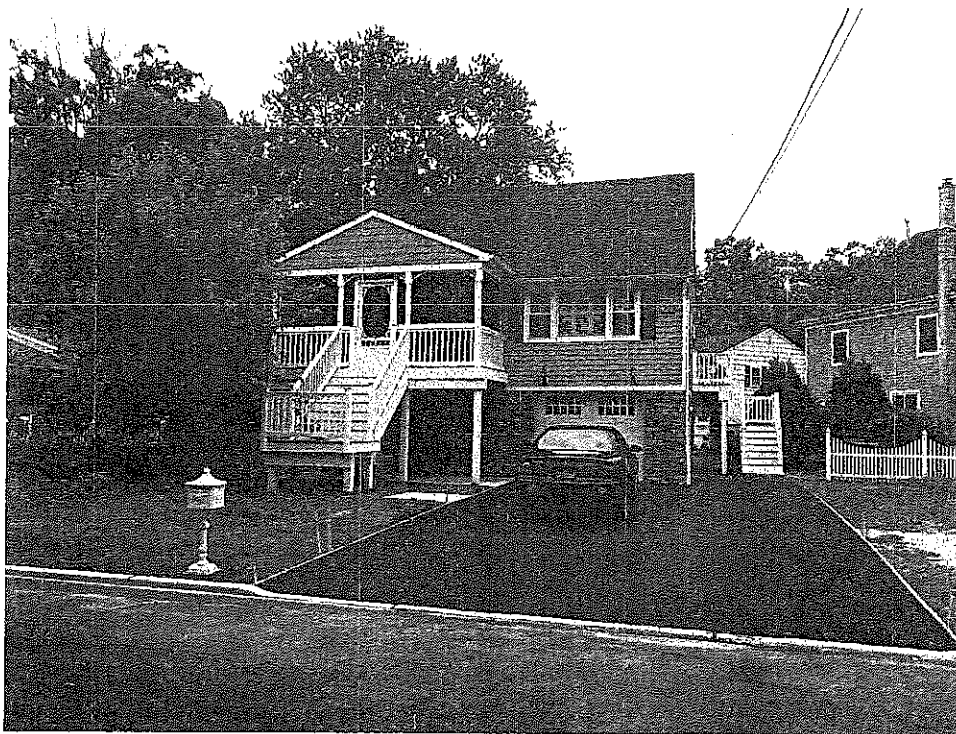
See instructions for Item A6

OMB Control Number: 1660-0008

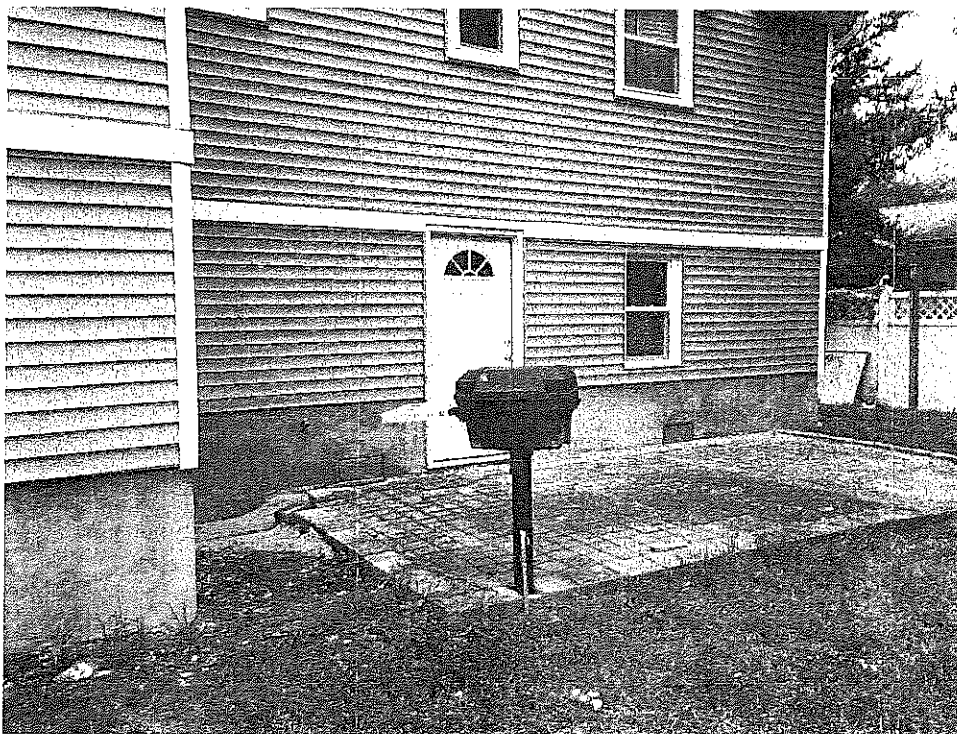
Expiration: 11/30/2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 103 Wilson Road			Policy Number:
City Neptune	State NJ	Zip Code 07753	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.



Front View (6/28/16)



Rear View (6/28/16)

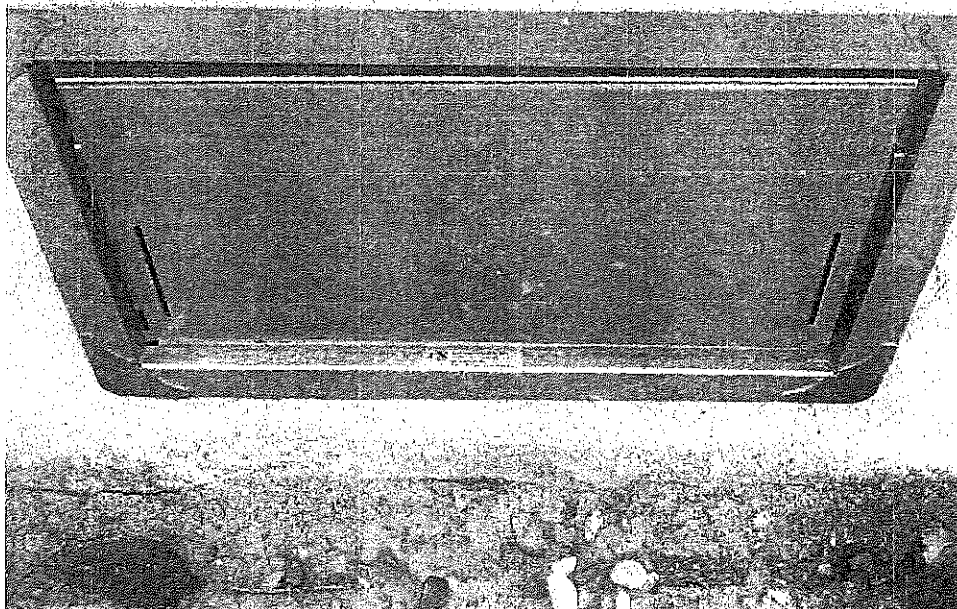
# BUILDING PHOTOGRAPHS

Continuation Page

OMB Control Number: 1660-0008  
Expiration: 11/30/2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FORM INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 103 Wilson Road			Policy Number:
City Neptune	State NJ	Zip Code 07753	Company NAIC Number:

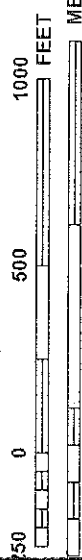
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View" and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Flood Vent (6/28/16)



MAP SCALE 1" = 500'



# NATIONAL FLOOD INSURANCE PROGRAM

PANEL 0333F			
<b>FIRM</b>			
FLOOD INSURANCE RATE MAP			
MONMOUTH COUNTY, NEW JERSEY (ALL JURISDICTIONS)			
PANEL 333 OF 457 (SEE MAP INDEX FOR FIRM PANEL LAYOUT)			
CONTAINS:			
COMMUNITY	NUMBER	PANEL	SUFFIX
BELMAR BOROUGH OF	340333	0333	F
NEPTUNE CITY BOROUGH OF	340316	0333	F
NEPTUNE TOWNSHIP OF	340317	0333	F
WALL TOWNSHIP OF	340333	0333	F

Notice to User: The Map Number shown below should be used when placing map orders; the Community Number shown above should be used on insurance applications for the subject community.

**MAP NUMBER**  
34025C0333F

**EFFECTIVE DATE**  
SEPTEMBER 25, 2009

Federal Emergency Management Agency



This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at [www.msc.fema.gov](http://www.msc.fema.gov)

DISCLAIMER: The information generated for each report is dependent on the point location of the marker. The address locator is not 100% accurate in identifying addresses and results are not considered an official determination. Property owners should contact their local floodplain administrator for more information and

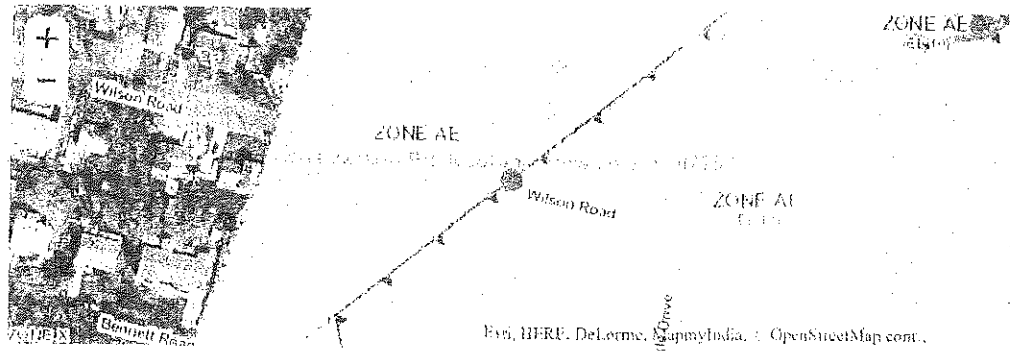
Enter an address to view effective and updated flood risk information for that location:

103 Wilson Road, Neptune, NJ

Get Details

Clear Details

Approximate Address Identified: 103 Wilson Road, Neptune, NJ 07752



#### Updated FEMA Flood Hazard Data

FEMA flood hazard data currently available for coastal areas of New York and New Jersey is provided below to help you understand the current flood risk to your property and to guide Sandy recovery and rebuilding efforts.

Note: This tool provides flood zone and Base Flood Elevation (BFE) information for areas affected by coastal flood risk. However, riverine flood zone information will also be returned by the tool in communities where preliminary FIRMs have been released.

Attribute Name	Attribute Value
What is the flood zone (FEMA Flood Hazard) for this location?	Coastal Flood Hazard Zone AE (1% Annual Flood)
What is the property's depth of flood (FEMA Flood Hazard) for this location? (Note: For AO Zones, the flood depth will be in an area of no elevation. For AO results, please contact your local floodplain administrator for more information.)	5.4
What is my property's flood zone (FEMA Flood Hazard) for this location? (Note: For AO Zones, please contact your local floodplain administrator for more information.)	AE
What is the estimated depth of flood (FEMA Flood Hazard) for this location? (Note: For AO Zones, please contact your local floodplain administrator for more information.)	5.4
What is my FEMA Flood Hazard Map for this location?	Coastal Flood Hazard Zone AE (1% Annual Flood)
View your property's flood zone (FEMA Flood Hazard) for this location.	Coastal Flood Hazard Zone AE (1% Annual Flood)
What is my property's flood zone (FEMA Flood Hazard) for this location?	Coastal Flood Hazard Zone AE (1% Annual Flood)

#### Effective Flood Insurance Data

This information is from the effective Flood Insurance Rate Map for your community. It is used to determine who must buy flood insurance and how much it costs. It may also be used by your community to regulate development in flood-prone areas.

Attribute Name	Attribute Value
What is the flood zone (FEMA Flood Hazard) for this location?	5.4
What is my property's flood zone (FEMA Flood Hazard) for this location?	AE

DISCLAIMER: The information generated for each report is dependent on the point location of the marker. The address locator is not 100% accurate in identifying addresses and results are not considered an official determination. Property owners should contact their local floodplain administrator for more information and

BOROUGH OF NEPTUNE CITY  
MONMOUTH COUNTY

TAX MAP  
TOWNSHIP OF NEPTUNE

ROBERT R. HEGGAN

THIS MAP HAS BEEN GIVEN A  
FORMAL CERTIFICATION BY THE  
DIVISION OF TAXATION ON  
APRIL 9, 2014, SIGNED BY  
SUE DAVISON, CTA AND  
ASSIGNED SERIAL NUMBER 1035

- from 2011: had their country using computerized drug history records (CDR) and consistency of use (CUMED)

DATE	DESCRIPTION	AMOUNT	CHECK NO.	BANK	REMARKS
1/1/1918	PAID TO J. H. HARRIS	100.00	100	WELLS FARGO	
1/15/1918	PAID TO J. H. HARRIS	50.00	101	WELLS FARGO	
2/1/1918	PAID TO J. H. HARRIS	75.00	102	WELLS FARGO	
2/15/1918	PAID TO J. H. HARRIS	125.00	103	WELLS FARGO	
3/1/1918	PAID TO J. H. HARRIS	150.00	104	WELLS FARGO	
3/15/1918	PAID TO J. H. HARRIS	175.00	105	WELLS FARGO	
4/1/1918	PAID TO J. H. HARRIS	200.00	106	WELLS FARGO	
4/15/1918	PAID TO J. H. HARRIS	225.00	107	WELLS FARGO	
5/1/1918	PAID TO J. H. HARRIS	250.00	108	WELLS FARGO	
5/15/1918	PAID TO J. H. HARRIS	275.00	109	WELLS FARGO	
6/1/1918	PAID TO J. H. HARRIS	300.00	110	WELLS FARGO	
6/15/1918	PAID TO J. H. HARRIS	325.00	111	WELLS FARGO	
7/1/1918	PAID TO J. H. HARRIS	350.00	112	WELLS FARGO	
7/15/1918	PAID TO J. H. HARRIS	375.00	113	WELLS FARGO	
8/1/1918	PAID TO J. H. HARRIS	400.00	114	WELLS FARGO	
8/15/1918	PAID TO J. H. HARRIS	425.00	115	WELLS FARGO	
9/1/1918	PAID TO J. H. HARRIS	450.00	116	WELLS FARGO	
9/15/1918	PAID TO J. H. HARRIS	475.00	117	WELLS FARGO	
10/1/1918	PAID TO J. H. HARRIS	500.00	118	WELLS FARGO	
10/15/1918	PAID TO J. H. HARRIS	525.00	119	WELLS FARGO	
11/1/1918	PAID TO J. H. HARRIS	550.00	120	WELLS FARGO	
11/15/1918	PAID TO J. H. HARRIS	575.00	121	WELLS FARGO	
12/1/1918	PAID TO J. H. HARRIS	600.00	122	WELLS FARGO	
12/15/1918	PAID TO J. H. HARRIS	625.00	123	WELLS FARGO	
1/1/1919	PAID TO J. H. HARRIS	650.00	124	WELLS FARGO	
1/15/1919	PAID TO J. H. HARRIS	675.00	125	WELLS FARGO	
2/1/1919	PAID TO J. H. HARRIS	700.00	126	WELLS FARGO	
2/15/1919	PAID TO J. H. HARRIS	725.00	127	WELLS FARGO	
3/1/1919	PAID TO J. H. HARRIS	750.00	128	WELLS FARGO	
3/15/1919	PAID TO J. H. HARRIS	775.00	129	WELLS FARGO	
4/1/1919	PAID TO J. H. HARRIS	800.00	130	WELLS FARGO	
4/15/1919	PAID TO J. H. HARRIS	825.00	131	WELLS FARGO	
5/1/1919	PAID TO J. H. HARRIS	850.00	132	WELLS FARGO	
5/15/1919	PAID TO J. H. HARRIS	875.00	133	WELLS FARGO	
6/1/1919	PAID TO J. H. HARRIS	900.00	134	WELLS FARGO	
6/15/1919	PAID TO J. H. HARRIS	925.00	135	WELLS FARGO	
7/1/1919	PAID TO J. H. HARRIS	950.00	136	WELLS FARGO	
7/15/1919	PAID TO J. H. HARRIS	975.00	137	WELLS FARGO	
8/1/1919	PAID TO J. H. HARRIS	1000.00	138	WELLS FARGO	
8/15/1919	PAID TO J. H. HARRIS	1025.00	139	WELLS FARGO	
9/1/1919	PAID TO J. H. HARRIS	1050.00	140	WELLS FARGO	
9/15/1919	PAID TO J. H. HARRIS	1075.00	141	WELLS FARGO	
10/1/1919	PAID TO J. H. HARRIS	1100.00	142	WELLS FARGO	
10/15/1919	PAID TO J. H. HARRIS	1125.00	143	WELLS FARGO	
11/1/1919	PAID TO J. H. HARRIS	1150.00	144	WELLS FARGO	
11/15/1919	PAID TO J. H. HARRIS	1175.00	145	WELLS FARGO	
12/1/1919	PAID TO J. H. HARRIS	1200.00	146	WELLS FARGO	
12/15/1919	PAID TO J. H. HARRIS	1225.00	147	WELLS FARGO	
1/1/1920	PAID TO J. H. HARRIS	1250.00	148	WELLS FARGO	
1/15/1920	PAID TO J. H. HARRIS	1275.00	149	WELLS FARGO	
2/1/1920	PAID TO J. H. HARRIS	1300.00	150	WELLS FARGO	
2/15/1920	PAID TO J. H. HARRIS	1325.00	151	WELLS FARGO	
3/1/1920	PAID TO J. H. HARRIS	1350.00	152	WELLS FARGO	

[illegible]

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>Leonard Fiorenza &amp; Lynda Kingman - Fiorenza</u>		FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>111 Wilson Road</u>		Policy Number:
City/Township of <u>Neptune</u> State <u>NJ</u> ZIP Code <u>07753-5425</u>		Company NAIC Number:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>Lot 17 Block 4808</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat <u>40.199720</u> Long. <u>-74.045869</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>3</u>		
A8. For a building with a crawlspace or enclosure(s):		
a) Square footage of crawlspace or enclosure(s)	<u>459</u>	sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	<u>0</u>	
c) Total net area of flood openings in A8.b	<u>0</u>	sq in
d) Engineered flood openings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
A9. For a building with an attached garage:		
a) Square footage of attached garage	<u>270</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 <u>Township of Neptune 340317</u>		B2. County Name <u>Monmouth</u>		B3. State <u>NJ</u>	
B4. Map/Panel Number <u>34025C0333</u>	B5. Suffix <u>F</u>	B6. FIRM Index Date <u>09-25-2009</u>	B7. FIRM Panel Effective/Revised Date <u>09-25-2009</u>	B8. Flood Zone(s) <u>AE, X</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>9'</u>
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 type="checkbox"/> NGVD 1929 <input checked="" 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)? Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

## 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: KV6267 Vertical Datum: NAVD88

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>13.86</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>22.05</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 type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	<u>13.86</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>13.86</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>13.86</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>21.56</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>12.81</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.

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

Certifier's Name <u>Walter Scharfenberg</u>		License Number <u>GS14159</u>
Title <u>President</u>	Company Name <u>George W. Henn, Inc.</u>	
Address <u>435 Mantoloking Road</u>	City <u>Brick</u>	State <u>NJ</u> ZIP Code <u>08723</u>
Signature <u>Walter Scharfenberg</u>	Date <u>03-30-2016</u>	Telephone <u>732-477-6500</u>

Walter Scharfenberg  
Professional Engineer  
No. 14159  
State of New Jersey

# ELEVATION CERTIFICATE, page 2

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
111 Wilson Road

City/Township of Neptune

State NJ

ZIP Code 07753-5425

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number:

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments The lowest elevation of machinery servicing the building is the furnace at elevation 13.86 above NAVD'88"

FEMA FIRM MAP NUMBER 34025C0333G DATED JANUARY 30, 2015 (NOT OFFICIALLY ADOPTED AS AN EFFECTIVE FIRM ON THIS DATE)  
INDICATES ZONE AE, X, WITH A BASE FLOOD ELEVATION OF 10 FEET ABOVE NAVD'88

Signature Walter Schanzenberg

Date 03-30-2016

## 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 8–9 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's or Owner's Authorized Representative's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments \_\_\_\_\_

☐ Check here if attachments.

## 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.

1. ☐ 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.)
2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
3. ☐ 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 \_\_\_\_\_

17. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

18. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_

19. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_

10. Community's design flood elevation: \_\_\_\_\_ ☐ feet ☐ meters Datum \_\_\_\_\_

Local Official's Name \_\_\_\_\_

Title \_\_\_\_\_

Community Name \_\_\_\_\_

Telephone \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Comments \_\_\_\_\_

☐ Check here if attachments.

# Building Photographs

See Instructions for Item A6.

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
111 Wilson Road

City/Township of Neptune

State NJ

ZIP Code 07753-5425

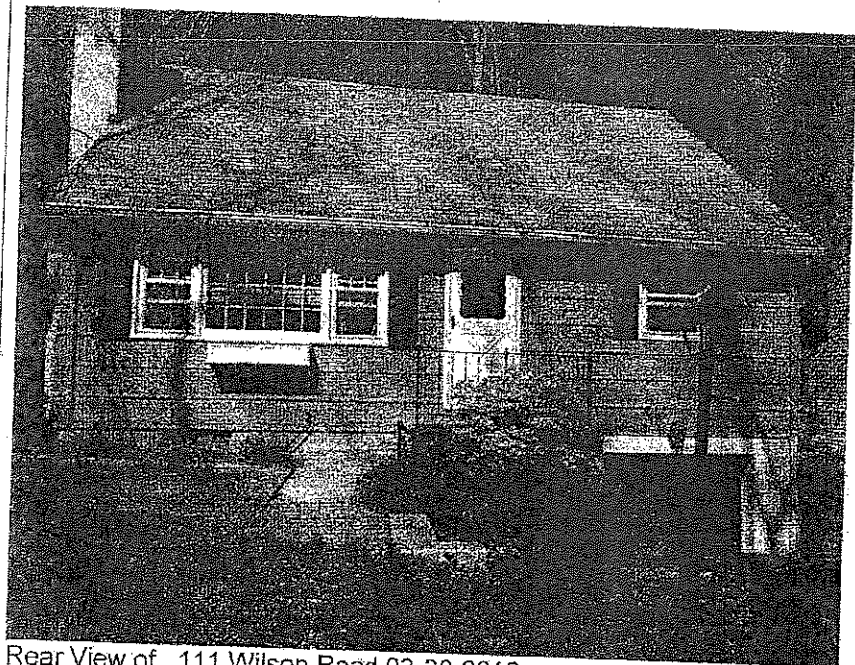
FOR INSURANCE COMPANY USE

Policy Number:

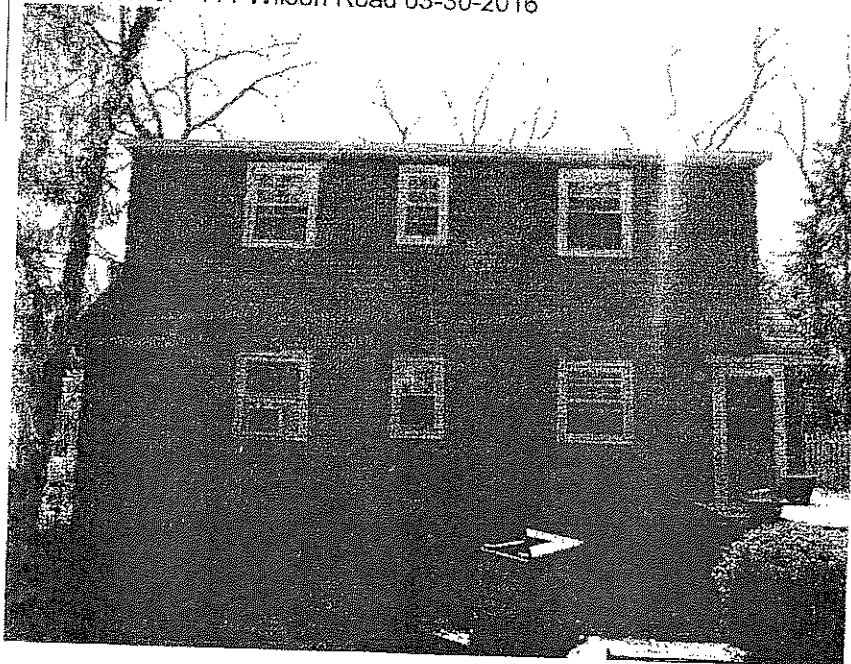
Company NAIC Number:

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.

Front View of 111 Wilson Road 03-30-2016



Rear View of 111 Wilson Road 03-30-2016



## Building Photographs

Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
111 Wilson Road

City/Township of Neptune

State NJ

ZIP Code 07753-5425

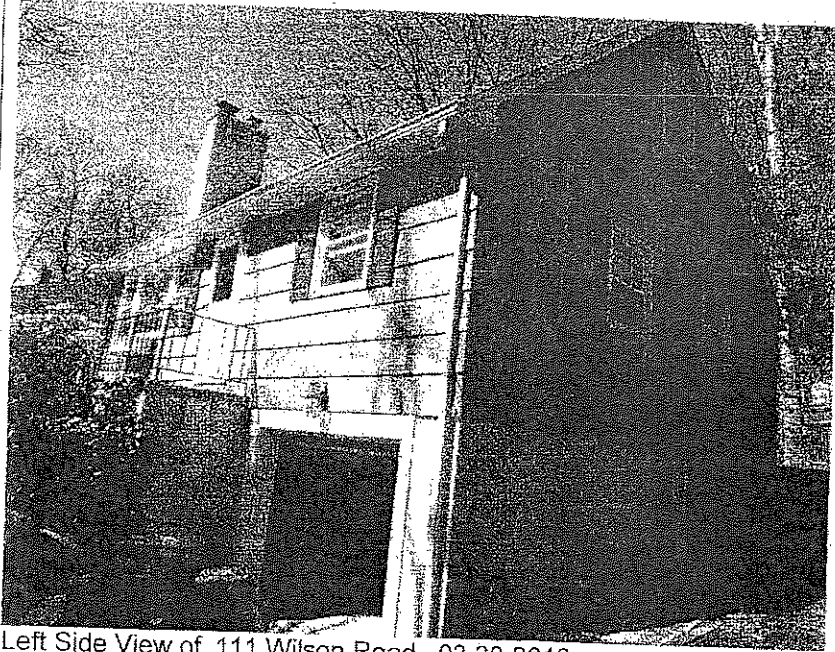
FOR INSURANCE COMPANY USE

Policy Number:

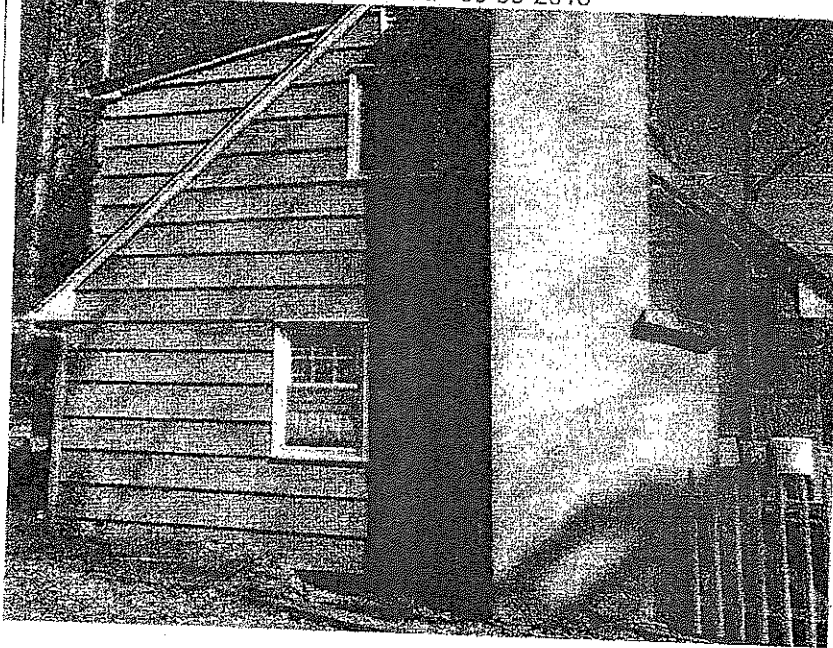
Company NAIC Number:

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.

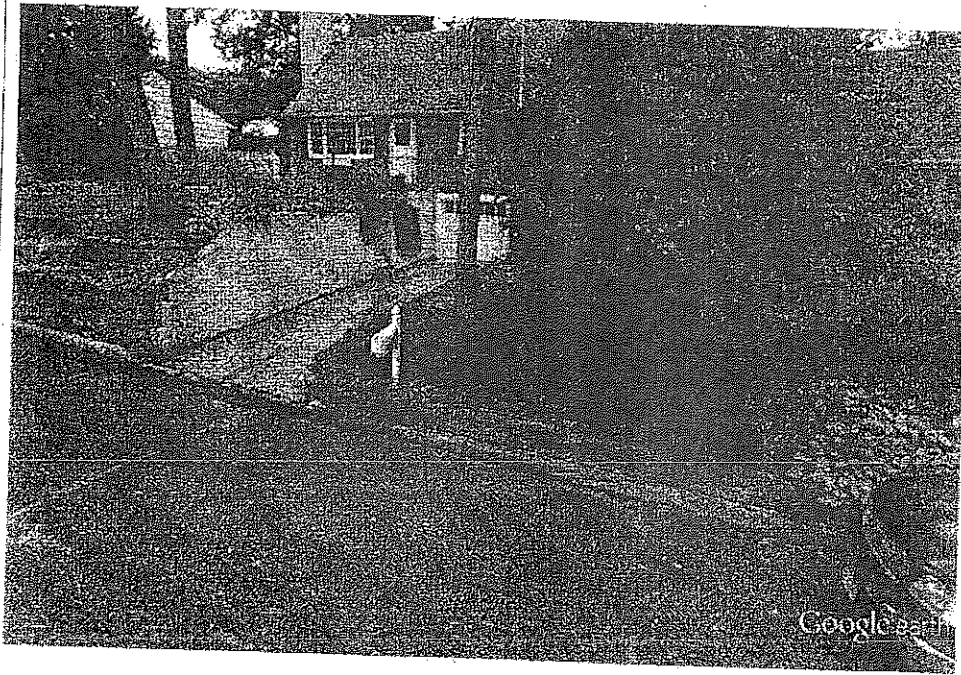
Right Side View of 111 Wilson Road 03-30-2016



Left Side View of 111 Wilson Road 03-30-2016



Front View of 111 Wilson Road 03-30-2016



DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number: 1660-0008  
Expiration: 11/30/2018

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				FORM INSURANCE COMPANY USE	
A1. Building Owner's Name <b>TIMOTHY FAGAN &amp; KIM WELLE</b>				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>506 SOUTH RIVERSIDE DRIVE</b>				Company NAIC Number:	
City <b>NEPTUNE</b>		State <b>NEW JERSEY</b>		Zip Code <b>07753</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>BLOCK 5213, LOT 4, NEPTUNE TOWNSHIP, NJ</b>					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>					
A5. Latitude/Longitude: Lat. <b>40°11'20.4" N</b> Long. <b>74°02'52.9" W</b> Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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 <b>8</b>					
A8. For a building with a crawlspace or enclosure(s):			A9. For a building with an attached garage:		
a) Square footage of crawlspace or enclosure(s) <b>809</b> sq ft			a) Square footage of attached garage <b>934</b> sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>6</b>			b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>7</b>		
c) Total net area of flood openings in A8.b <b>768</b> sq in			c) Total net area of flood openings in A9.b <b>896</b> sq in		
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <b>TOWNSHIP OF NEPTUNE - 340317</b>			B2. County Name <b>MONMOUTH</b>		B3. State <b>NJ</b>
B4. Map/Panel Number <b>34025C0333</b>	B5. Suffix <b>F</b>	B6. FIRM Index Date <b>9-25-2009</b>	B7. FIRM Panel Effective/Revised Date <b>9-25-2009</b>	B8. Flood Zone(s) <b>AE</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>9</b>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source:					
B11. Indicate elevation datum used for BFE in Item B9: <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other/Source:					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA					
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> Finished Construction					
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. * A new Elevation Certificate will be required when construction of the building is complete.					
Benchmark Utilized: <b>G.P.S.</b>			Vertical Datum: <b>NAVD 1988</b>		
Indicate elevation datum used for the elevations in items a) through h) below. <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> 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)		<b>9</b>	-	<b>9</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
b) Top of the next higher floor		<b>14</b>	-	<b>1</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)			-		<input type="radio"/> feet <input type="radio"/> meters
d) Attached garage (top of slab)		<b>9</b>	-	<b>9</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)		<b>13</b>	-	<b>7</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)		<b>9</b>	-	<b>2</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
g) Highest adjacent (finished) grade next to building (HAG)		<b>10</b>	-	<b>2</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support		<b>9</b>	-	<b>6</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters

# ELEVATION CERTIFICATE

OMB Control Number: 1660-0008  
Expiration: 11/30/2018

## 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.

☒ Check here if attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor?

☒ Yes ☐ No

Certifier's Name

Robert H. Morris

License Number

24GE030090

Title

Professional Land Surveyor

Company Name

Nelson Engineering Assoc. Inc.

Address

1750 Bloomsbury Avenue

City

Ocean

State

NJ

Zip Code

07712

Signature



Date

8-11-2016

Telephone

732-918-2180

PLACE  
SEAL  
HERE

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)"

AC condenser on platform at north side of house

Signature

8-11-2016

Date

## 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 8 -9 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.

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 \_\_\_\_\_ Title \_\_\_\_\_

Community Name \_\_\_\_\_ Telephone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments

☐ Check here if attachments.

# BUILDING PHOTOGRAPHS

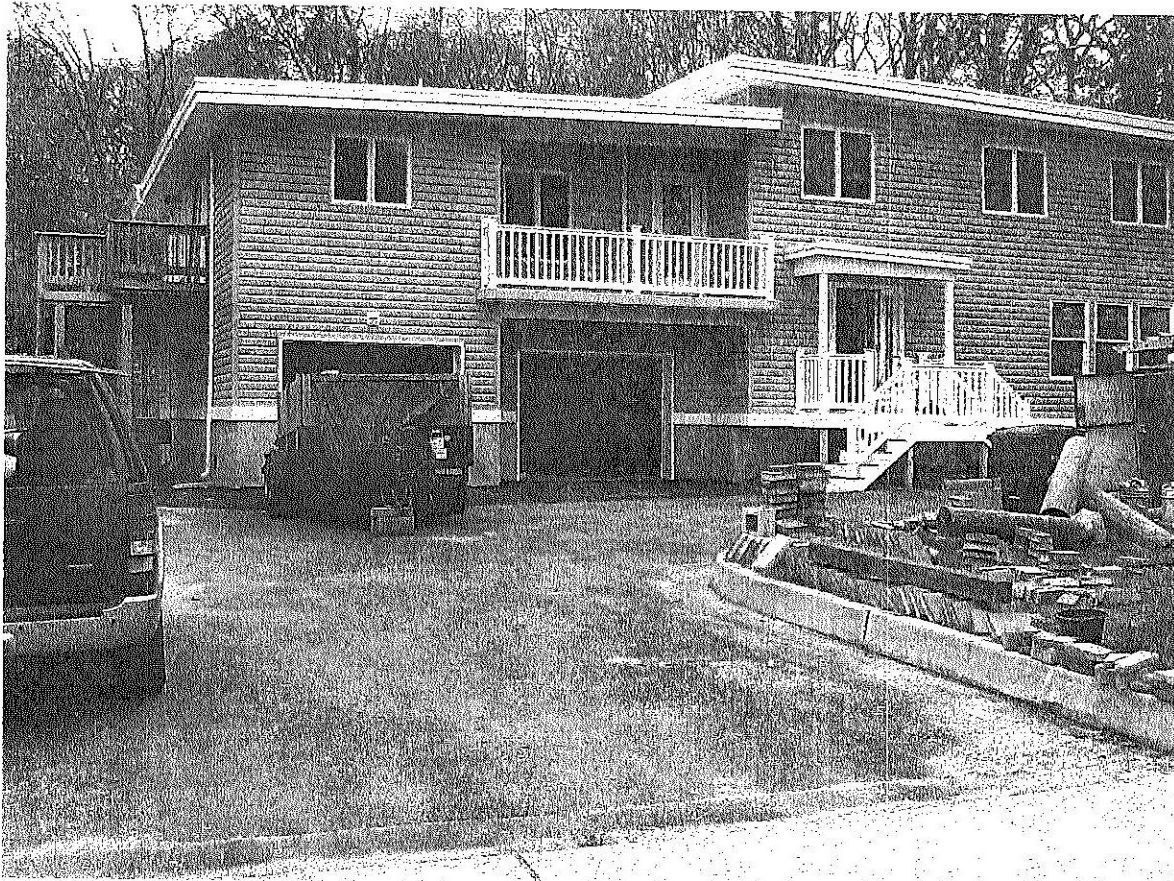
See instructions for Item A6

OMB Control Number: 1660-0008

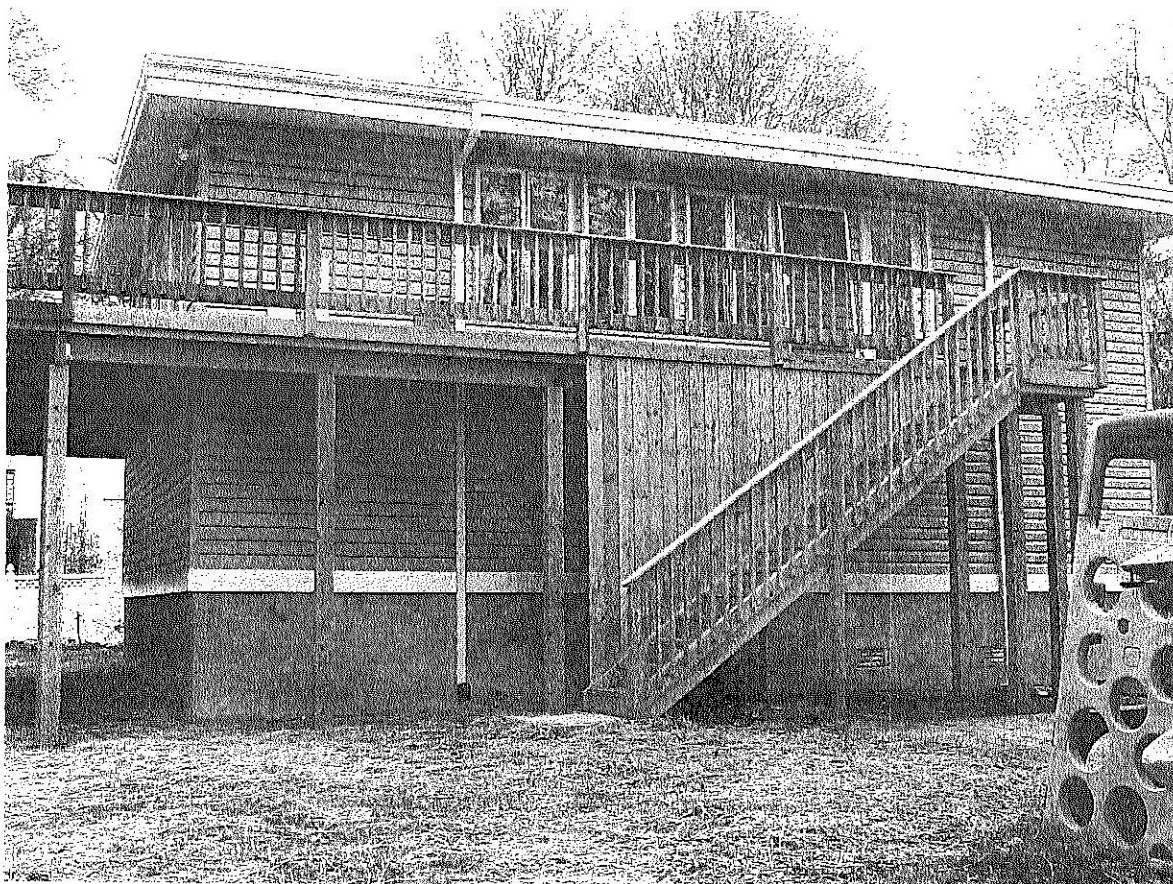
Expiration: 11/30/2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  506 SOUTH RIVERSIDE DRIVE			Policy Number:	
City  NEPTUNE	State  NJ	Zip Code  07753	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.



Front (east) side of house - Photo taken May 6, 2016



Left (south) side of house - Photo taken May 6, 2016

## 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 Ronald and Linda Roman				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 500 South Riverside Drive				Company NAIC Number:	
City Neptune		State New Jersey		ZIP Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Tax Lot 7 Block 5213, Neptune Township, Monmouth County, New Jersey					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>40-11'-18.5"</u> Long. <u>74-02'-52.7"</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>1,920</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>11</u>					
c) Total net area of flood openings in A8.b <u>2,200</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>506</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>3</u>					
c) Total net area of flood openings in A9.b <u>600</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Neptune Township - 340317			B2. County Name Monmouth		B3. State New Jersey
B4. Map/Panel Number 34025C0333	B5. Suffix F	B6. FIRM Index Date 09/25/2009	B7. FIRM Panel Effective/ Revised Date 09/25/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9
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 type="checkbox"/> NGVD 1929 <input checked="" 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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 500 South Riverside Drive			Policy Number:
City Neptune	State New Jersey	ZIP Code 07753	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: GPS-SMARTNET 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.

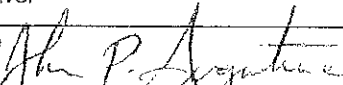
Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>8.6</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>13.7</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>10.1</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>7.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>9.9</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>8.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

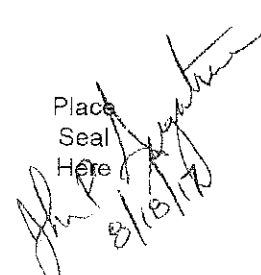
## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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 John P. Augustine	License Number PLS 34838
Title Land Surveyor	
Company Name Gravatt Consulting Group, Inc. (Project No. 9936)	
Address 414 Lacey Road	
City Forked River	State New Jersey
	ZIP Code 08731
Signature 	Date 08/14/2017
	Telephone (609) 693-6126

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)

This certificate certified to the owners in line A1 only and is non-transferrable. Property is located in preliminary flood zone AE, elev.=10 & 11, per preliminary map 34029C0333G, published 1/30/15 by ; this is for informational purposes only & subject to verification by FEMA. Utilities: A/C unit el.=13.7, Furnace el.=16.6, W.Heater el.=17.6, E. Meter el.=14.5. All flood vents are Smartvent Model No. 1540-520.

# ELEVATION CERTIFICATE

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 500 South Riverside Drive			Policy Number:
City Neptune	State New Jersey	ZIP Code 07753	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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 500 South Riverside Drive			Policy Number:
City Neptune	State New Jersey	ZIP Code 07753	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: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____		
G9. BFE or (in Zone AO) depth of flooding at the building site: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____		
G10. Community's design flood elevation: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____		

Local Official's Name	Title
Community Name	Telephone
Signature	Date

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.

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.  
500 South Riverside Drive

Policy Number:

City  
Neptune

State  
New Jersey

ZIP Code  
07753

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.

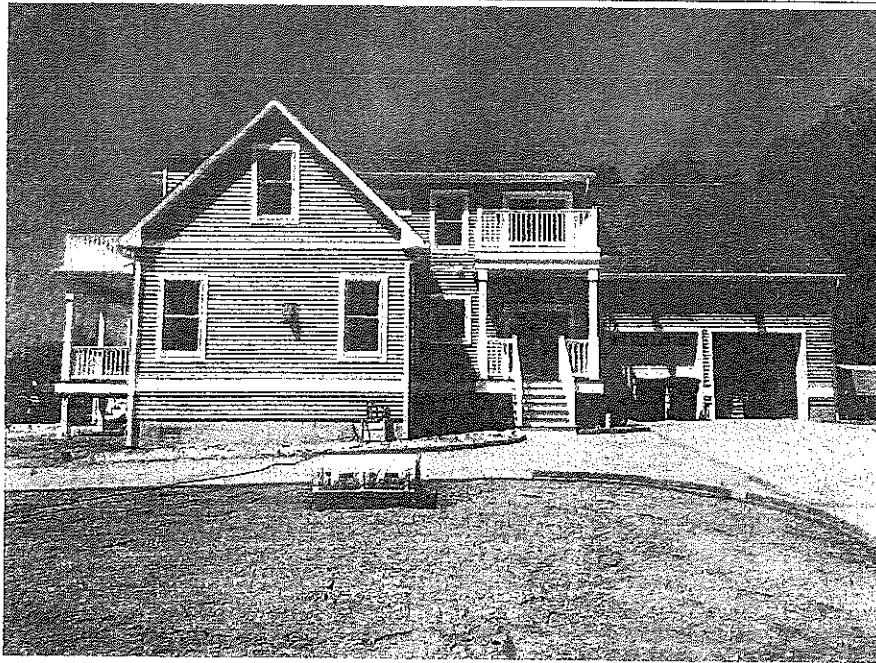


Photo One

Photo One Caption FRONT VIEW



Photo Two

Photo Two Caption REAR VIEW

# ELEVATION CERTIFICATE

## BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
500 South Riverside Drive

**FOR INSURANCE COMPANY USE**

Policy Number:

City  
Neptune

State  
New Jersey

ZIP Code  
07753

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.

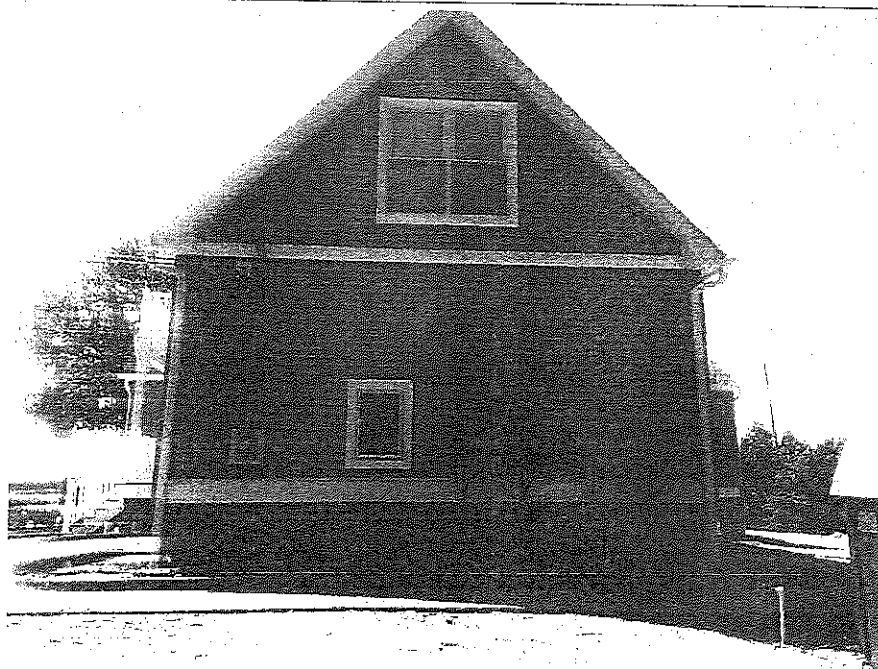


Photo One

Photo One Caption RIGHT SIDE VIEW

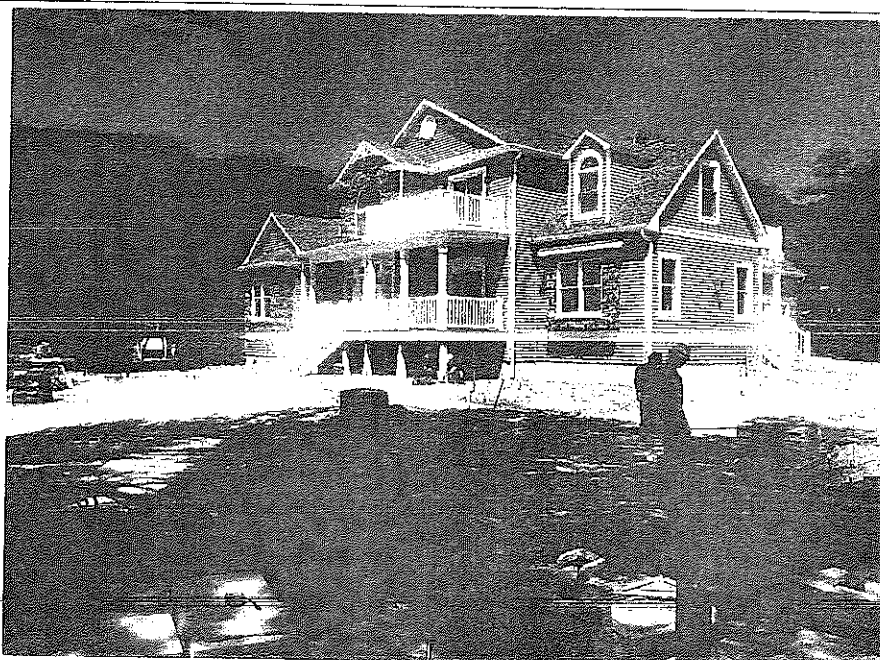


Photo Two

Photo Two Caption LEFT SIDE VIEW (Dykeman Place)

# ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

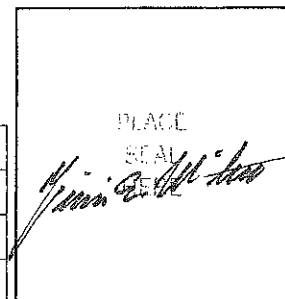
OMB No. 1660-0008  
Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE			
A1. Building Owner's Name	DOREMUS PROPERTY MANAGEMENT, LLC	Policy Number:			
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	107 FAIRVIEW PLACE	Company NAIC Number:			
City	NEPTUNE TOWNSHIP	State	NEW JERSEY	ZIP Code	07753
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 12, BLOCK 5306					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. 40.193612° Long. -74.040110° 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 # 6					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s)		1100 sq ft			
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade		SIX			
c) Total net area of flood openings in A8.b		1200 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		N/A sq ft			
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade		N/A			
c) Total net area of flood openings in A9.b		N/A sq in			
d) Engineered flood openings?		<input type="checkbox"/> Yes <input type="checkbox"/> No			

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. FIRM Community Name & Community Number NEPTUNE TOWNSHIP 340317		B2. County Name MONMOUTH		B3. State N.J.	
B4. Map/Panel Number 34025C0333F	B5. Suffix 0333	B6. FIRM Index Date 09/25/2009	B7. FIRM Panel Effective/Revised Date 09/25/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone A0, use base flood depth) 9 FEET
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 type="checkbox"/> NGVD 1929 <input checked="" 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					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> 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: GPS SMARTNET Vertical Datum: NAVD'88	
Indicate elevation datum used for the elevations in Items a) through h) below. <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> 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)	6.20 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	16.60 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A <input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	SAME AS a) ABOVE <input 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)	13.00 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	6.00 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	6.20 <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	6.00 <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.			
<input checked="" type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Check here if attachments.			
Certifier's Name WILLIAM E. McGRATH		License Number GS24194	
Title PRESIDENT		Company Name McGRATH SURVEYING & WATERFRONT CONSULTING	
Address 321 MANTOLOKING ROAD		City BRICK	State NJ
Signature <i>William E. McGrath</i>		ZIP Code 08723	Telephone 848-232-3820
Date 12/23/2015			



# **ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 107 FAIRVIEW PLACE		Policy Number:	
City NEPTUNE TOWNSHIP	State N.J.	ZIP Code 07753	Company NAIC Number:

## **SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments FEMA "PRELIMINARY FIRM MAP" (NOT OFFICIALLY ADOPTED AS A FIRM AS YET)  
ZONE AE, BASE FLOOD ELEVATION 10 FEET ABOVE NAVD'88.  
LOWEST EQUIPMENT SERVICING THE BUILDING IS AN ELEC. METER BOX ON OUTSIDE WALL.  
HOUSE HAS SIX SMARTVENTS MODEL #1540-520, ICC CERTIFICATION ATTACHED.

Signature *Jimi E. Wilton* Date 12/22/2015

## **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 G–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8–9 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.

## **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–G9) 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 _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_

☐ Check here if attachments.

## BUILDING PHOTOGRAPHS

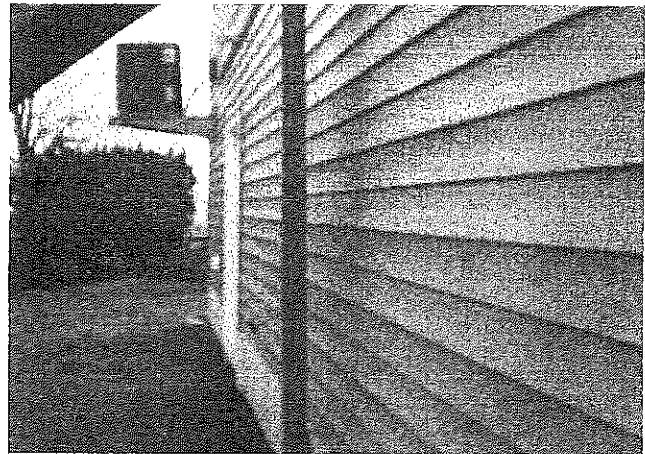
See Instructions for Item A6.

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 107 FAIRFIELD PLACE				
City NEPTUNE TOWNSHIP	State N.J.	ZIP Code 07753	Policy Number:	
			Company NAIC Number:	

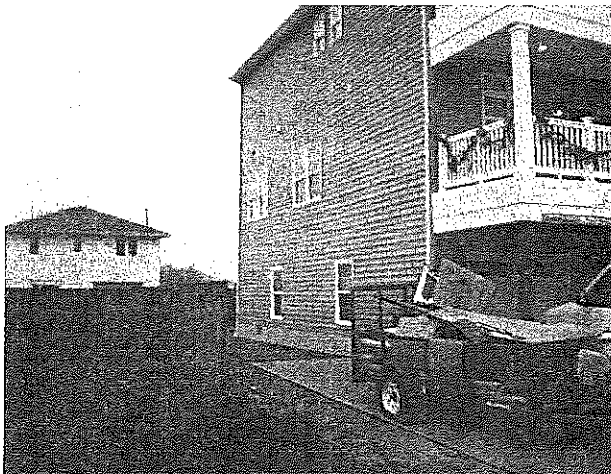
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, 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.



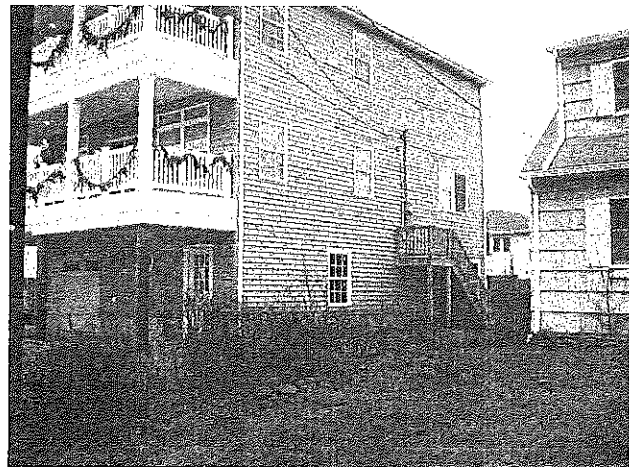
FRONT OF 107 FAIRVIEW PLACE



REAR OF 107 FAIRVIEW PLACE



WEST SIDE OF 107 FAIRVIEW PLACE



EAST SIDE OF 107 FAIRVIEW PLACE



*Most Widely Accepted and Trusted*

# ICC-ES Report

**ESR-2074**

ICC-ES | (800) 423-6587 | (562) 699-0543 | [www.icc-es.org](http://www.icc-es.org)

Reissued 02/2015  
This report is subject to renewal 02/2017.

**DIVISION: 08 00 00—OPENINGS**

**SECTION: 08 95 43—VENTS/FOUNDATION FLOOD VENTS**

**REPORT HOLDER:**

**SMARTVENT PRODUCTS, INC.**

**430 ANDBRO DRIVE, UNIT 1  
PITMAN, NEW JERSEY 08071**

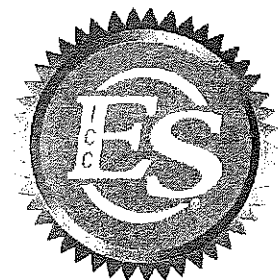
**EVALUATION SUBJECT:**

**SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS: MODELS #1540-520; #1540-521; #1540-510;  
#1540-511; #1540-570; #1540-574; #1540-524; #1540-514**



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(WSSPC) Award in Excellence"*



A Subsidiary of

*ICC-ES Evaluation Reports are not to be construed as representing aesthetics or any other attributes not specifically addressed, nor are they to be construed as an endorsement of the subject of the report or a recommendation for its use. There is no warranty by ICC Evaluation Service, LLC, express or implied, as to any finding or other matter in this report, or as to any product covered by the report.*



**ICC-ES Evaluation Report****ESR-2074\***

Reissued February 2015

This report is subject to renewal February 2017.

[www.icc-es.org](http://www.icc-es.org) | (800) 423-6587 | (562) 699-0543

A Subsidiary of the International Code Council®

**DIVISION: 08 00 00—OPENINGS****Section: 08 95 43—Vents/Foundation Flood Vents****REPORT HOLDER:**

**SMARTVENT PRODUCTS, INC.**  
430 ANDBRO DRIVE, UNIT 1  
PITMAN, NEW JERSEY 08071  
(877) 441-8368  
[www.smartvent.com](http://www.smartvent.com)  
[info@smartvent.com](mailto:info@smartvent.com)

**EVALUATION SUBJECT:**

**SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS:  
MODELS #1540-520; #1540-521; #1540-510; #1540-511;  
#1540-570; #1540-574; #1540-524; #1540-514**

**1.0 EVALUATION SCOPE****Compliance with the following codes:**

- 2012, 2009 and 2006 *International Building Code*® (IBC)
- 2012, 2009 and 2006 *International Residential Code*® (IRC)
- 2013 *Abu Dhabi International Building Code* (ADIBC)<sup>†</sup>

<sup>†</sup>The ADIBC is based on the 2009 IBC. 2009 IBC code sections referenced in this report are the same sections in the ADIBC.

**Properties evaluated:**

- Physical operation
- Water flow

**2.0 USES**

The Smart Vent® units are engineered mechanically operated flood vents (FVs) employed to equalize hydrostatic pressure on walls of enclosures subject to rising or falling flood waters. Certain models also allow natural ventilation.

**3.0 DESCRIPTION****3.1 General:**

When subjected to rising water, the Smart Vent® FVs internal floats are activated, then pivot open to allow flow in either direction to equalize water level and hydrostatic pressure from one side of the foundation to the other. The FV pivoting door is normally held in the closed position by a buoyant release device. When subjected to rising water, the buoyant release device causes the unit to unlatch, allowing the door to rotate out of the way and allow flow.

The water level stabilizes, equalizing the lateral forces. Each unit is fabricated from stainless steel. Smart Vent® Automatic Foundation Flood Vents are available in various models and sizes as described in Table 1. The SmartVENT® Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 units each contain two vertically arranged openings per unit.

**3.2 Engineered Opening:**

The FVs comply with the design principle noted in Section 2.6.2.2 of ASCE/SEI 24 for a maximum rate of rise and fall of 5.0 feet per hour (0.423 mm/s). In order to comply with the engineered opening requirement of ASCE/SEI 24, Smart Vent FVs must be installed in accordance with Section 4.0.

**3.3 Ventilation:**

The SmartVENT® Model #1540-510 and SmartVENT® Overhead Door Model #1540-514 both have screen covers with 1/4-inch-by-1/4-inch (6.35 by 6.35 mm) openings, yielding 51 square inches (32 903 mm<sup>2</sup>) of net free area to supply natural ventilation. The SmartVENT® Stacking Model #1540-511 consists of two Model #1540-510 units in one assembly, and provides 102 square inches (65 806 mm<sup>2</sup>) of net free area to supply natural ventilation. Other FVs recognized in this report do not offer natural ventilation.

**4.0 DESIGN AND INSTALLATION**

SmartVENT® and FloodVENT® are designed to be installed into walls or overhead doors of existing or new construction from the exterior side. Installation of the vents must be in accordance with the manufacturer's instructions, the applicable code and this report. The mounting straps allow mounting in masonry and concrete walls up to 12 inches (305 mm) thick. In order to comply with the engineered opening design principle noted in Section 2.6.2.2 of ASCE/SEI 24, the Smart Vent® FVs must be installed as follows:

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one FV for every 200 square feet (18.6 m<sup>2</sup>) of enclosed area, except that the SmartVENT® Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 must be installed with a minimum of one FV for every 400 square feet (37.2 m<sup>2</sup>) of enclosed area.
- Below the base flood elevation.
- With the bottom of the FV located a maximum of 12 inches (305.4 mm) above the higher of the final

\*Revised July 2015

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grade or floor and finished exterior grade immediately under each opening.

## 5.0 CONDITIONS OF USE

The Smart Vent® FVs described in this report comply with, or are suitable alternatives to what is specified in, those codes listed in Section 1.0 of this report, subject to the following conditions:

- 5.1 The Smart Vent® FVs 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 Smart Vent® FVs must not be used in the 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 (AC308), dated October 2013 (editorially revised May 2014).

## 7.0 IDENTIFICATION

The Smart VENT® models recognized in this report must be identified by a label bearing the manufacturer's name (Smartvent Products, Inc.), the model number, and the evaluation report number (ESR-2074).

TABLE 1—MODEL SIZES

MODEL NAME	MODEL NUMBER	MODEL SIZE (in.)	COVERAGE (sq. ft.)
FloodVENT®	1540-520	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
SmartVENT®	1540-510	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
FloodVENT® Overhead Door	1540-524	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
SmartVENT® Overhead Door	1540-514	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
Wood Wall FloodVENT®	1540-570	14" X 8 <sup>3</sup> / <sub>4</sub> "	200
Wood Wall FloodVENT® Overhead Door	1540-574	14" X 8 <sup>3</sup> / <sub>4</sub> "	200
SmartVENT® Stacker	1540-511	16" X 16"	400
FloodVent® Stacker	1540-521	16" X 16"	400

For SI: 1 inch = 25.4 mm; 1 square foot = m<sup>2</sup>

MAY 2 2017

N

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 JOHN AND MELANIE MATHEWS				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 119 FAIRVIEW PLACE				Company NAIC Number:	
City NEPTUNE TOWNSHIP		State New Jersey		ZIP Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 16, BLOCK 5306					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>40.193778 DEG.</u> Long. <u>-74.041194 DEG.</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>1,714</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>9</u>					
c) Total net area of flood openings in A8.b <u>1,800</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 NEPTUNE TOWNSHIP 340317			B2. County Name MONMOUTH		B3. State New Jersey
B4. Map/Panel Number 34025C0333	B5. Suffix F	B6. FIRM Index Date 09/25/2009	B7. FIRM Panel Effective/ Revised Date 09/25/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9 FEET
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 type="checkbox"/> NGVD 1929 <input checked="" 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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 119 FAIRVIEW PLACE			Policy Number:
City NEPTUNE TOWNSHIP	State New Jersey	ZIP Code 07753	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: GPS SMARTNET Vertical Datum: NAVD'88

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>6.84</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>14.10</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<br>(Describe type of equipment and location in Comments) | <u>12.93</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>6.38</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>8.25</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>6.38</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  
WILLIAM E. McGRATH

License Number  
GS24194

Title  
PRESIDENT

Company Name  
McGRATH SURVEYING & WATERFRONT CONSULTING, LLC

Address  
321 MANTOLOKING ROAD, SUITE 2B

City  
BRICK

State  
New Jersey

ZIP Code  
08723

Signature

*William E. McGrath*

Date  
05/10/2017

Telephone  
(848) 232-3820

Place Seal  
*William E. McGrath*

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)

LOWEST EQUIPMENT SERVICING THE BUILDING IS AN AIR COND. UNIT ON AN OUTSIDE PLATFORM ELEV. 12.93.  
BOTTOM OF ELEC. METER ELEVATION 12.00.

PROPERTY IN FEMA "PRELIMINARY FLOOD INSURANCE RATE MAP" (1/30/2015) ZONE AE, BASE FLOOD ELEV. 10 FT.  
THERE ARE NINE (9) SMARTVENT MODEL # 1540-510 INSTALLED IN THE PERIMETER FOUNDATION. ICC CERTIFICATION ATTACHED.

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 119 FAIRVIEW PLACE			Policy Number: _____
City NEPTUNE TOWNSHIP	State New Jersey	ZIP Code 07753	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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 119 FAIRVIEW PLACE			Policy Number:	
City NEPTUNE TOWNSHIP	State New Jersey	ZIP Code 07753	Company NAIC Number	
<b>SECTION G – COMMUNITY INFORMATION (OPTIONAL)</b>				
<p>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.</p> <p>G1. <input type="checkbox"/> 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.)</p> <p>G2. <input type="checkbox"/> A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.</p> <p>G3. <input type="checkbox"/> The following information (Items G4–G10) is provided for community floodplain management purposes.</p>				
G4. Permit Number		G5. Date Permit Issued		G6. Date Certificate of Compliance/Occupancy Issued
<p>G7. This permit has been issued for:      <input type="checkbox"/> New Construction    <input type="checkbox"/> Substantial Improvement</p> <p>G8. Elevation of as-built lowest floor (including basement) of the building: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters    Datum _____</p> <p>G9. BFE or (in Zone AO) depth of flooding at the building site: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters    Datum _____</p> <p>G10. Community's design flood elevation: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters    Datum _____</p>				
Local Official's Name			Title	
Community Name			Telephone	
Signature			Date	
<p>Comments (including type of equipment and location, per C2(e), if applicable)</p> <div style="text-align: right; margin-top: 10px;"><input type="checkbox"/> Check here if attachments.</div>				

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

**ELEVATION CERTIFICATE****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.  
119 FAIRVIEW PLACE

Policy Number:...

City  
NEPTUNE TOWNSHIPState  
New JerseyZIP Code  
07753

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.

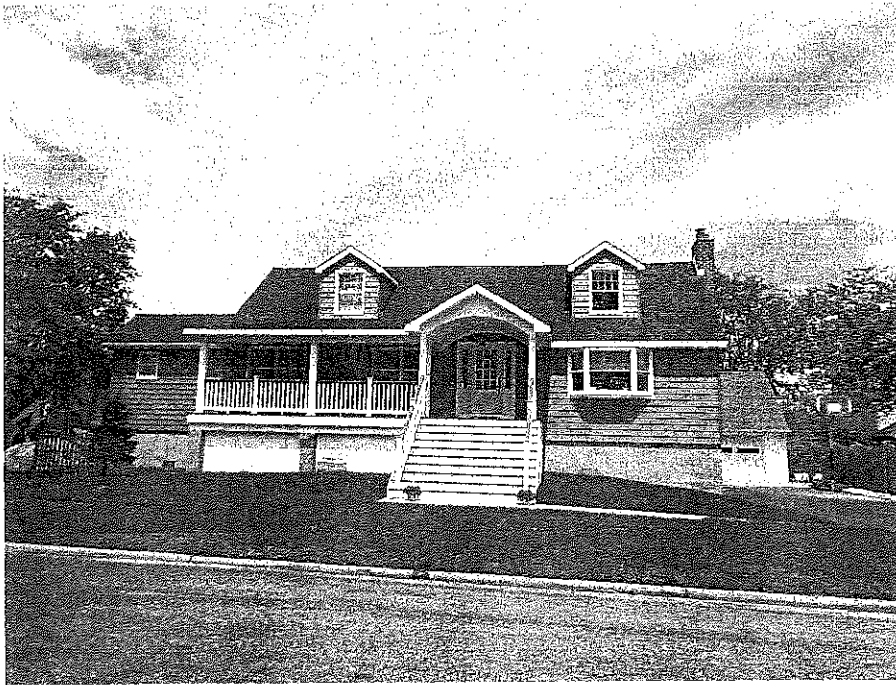


Photo One

Photo One Caption FRONT OF 119 FAIRVIEW DRIVE



Photo Two

Photo Two Caption REAR OF 119 FAIRVIEW PLACE

# ELEVATION CERTIFICATE

## BUILDING PHOTOGRAPHS

Continuation Page

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.  
119 FAIRVIEW PLACE

Policy Number:

City  
NEPTUNE TOWNSHIP

State  
New Jersey

ZIP Code  
07753

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.

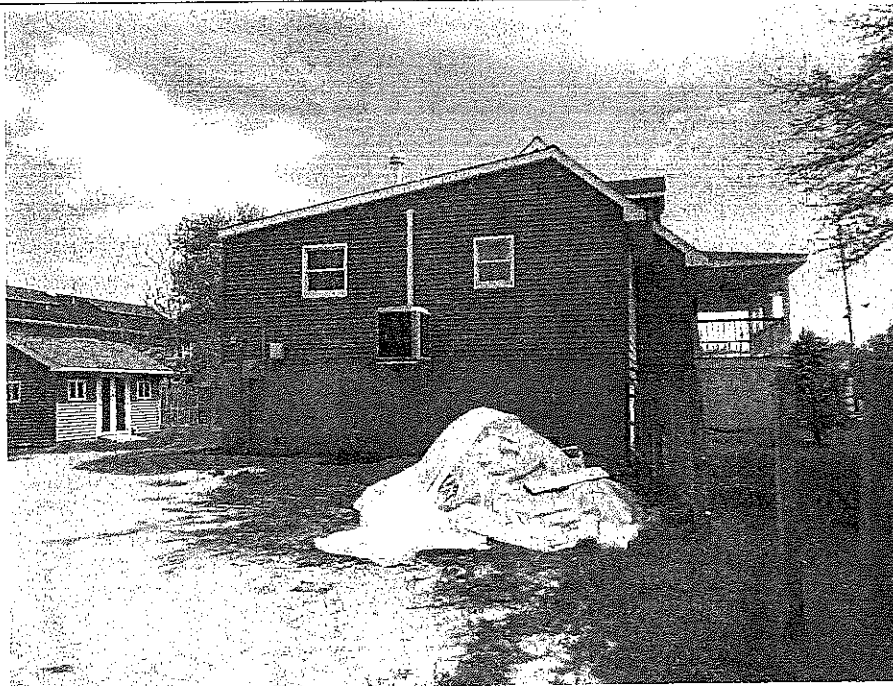


Photo One

Photo One Caption WEST SIDE OF 119 FAIRVIEW PLACE

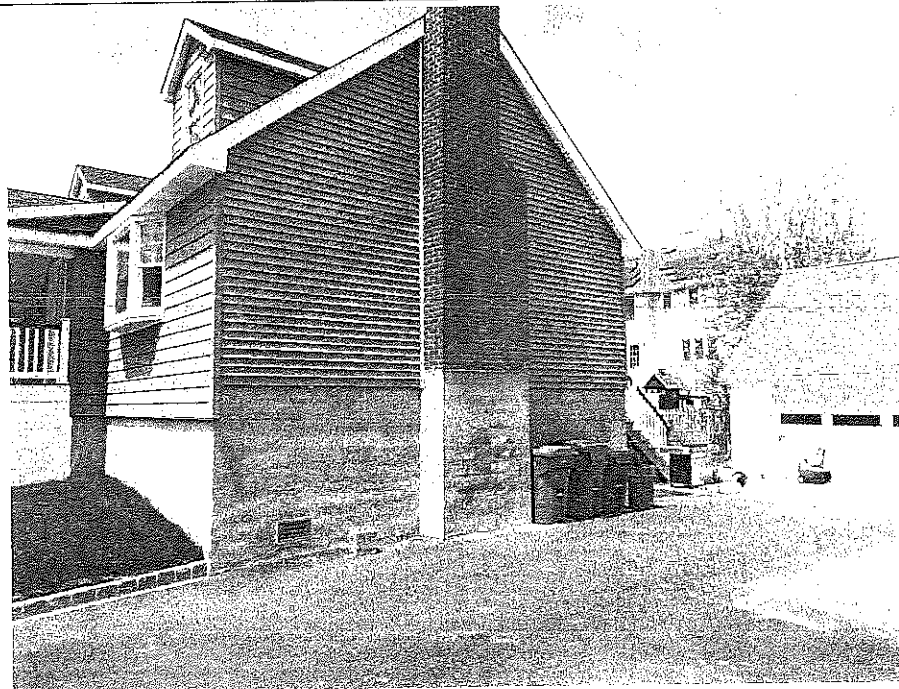


Photo Two

Photo Two Caption EAST SIDE OF 119 FAIRVIEW PLACE



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## ICC-ES Report

ICC-ES | (800) 423-6587 | (562) 699-0543 | [www.icc-es.org](http://www.icc-es.org)

## ESR-2074

Reissued 02/2017

This report is subject to renewal 02/2019.

DIVISION: 08 00 00—OPENINGS

SECTION: 08 95 43—VENTS/FOUNDATION FLOOD VENTS

REPORT HOLDER:

**SMARTVENT PRODUCTS, INC.**

430 ANDBRO DRIVE, UNIT 1  
PITMAN, NEW JERSEY 08071

EVALUATION SUBJECT:

**SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS:**

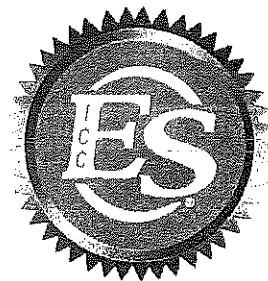
**MODELS #1540-520; #1540-521; #1540-510; #1540-511;**

**#1540-570; #1540-574; #1540-524; #1540-514**



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# ICC-ES Evaluation Report

**ESR-2074**

Reissued February 2017

This report is subject to renewal February 2019.

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A Subsidiary of the International Code Council®

**DIVISION: 08 00 00—OPENINGS**

**Section: 08 95 43—Vents/Foundation Flood Vents**

## REPORT HOLDER:

**SMARTVENT PRODUCTS, INC.**  
430 ANDBRO DRIVE, UNIT 1  
PITMAN, NEW JERSEY 08071  
(877) 441-8368

[www.smartvent.com](http://www.smartvent.com)  
[info@smartvent.com](mailto:info@smartvent.com)

## EVALUATION SUBJECT:

**SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS:**  
MODELS #1540-520; #1540-521; #1540-510; #1540-511;  
#1540-570; #1540-574; #1540-524; #1540-514

## 1.0 EVALUATION SCOPE

Compliance with the following codes:

- 2015, 2012, 2009 and 2006 *International Building Code*® (IBC)
- 2015, 2012, 2009 and 2006 *International Residential Code*® (IRC)
- 2013 *Abu Dhabi International Building Code* (ADIBC)<sup>†</sup>

<sup>†</sup>The ADIBC is based on the 2009 IBC. 2009 IBC code sections referenced in this report are the same sections in the ADIBC.

### Properties evaluated:

- Physical operation
- Water flow

## 2.0 USES

The Smart Vent® units are engineered mechanically operated flood vents (FVs) employed to equalize hydrostatic pressure on walls of enclosures subject to rising or falling flood waters. Certain models also allow natural ventilation.

## 3.0 DESCRIPTION

### 3.1 General:

When subjected to rising water, the Smart Vent® FVs internal floats are activated, then pivot open to allow flow in either direction to equalize water level and hydrostatic pressure from one side of the foundation to the other. The FV pivoting door is normally held in the closed position by a buoyant release device. When subjected to rising water, the buoyant release device causes the unit to unlatch, allowing the door to rotate out of the way and allow flow.

The water level stabilizes, equalizing the lateral forces. Each unit is fabricated from stainless steel. Smart Vent® Automatic Foundation Flood Vents are available in various models and sizes as described in Table 1. The SmartVENT® Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 units each contain two vertically arranged openings per unit.

### 3.2 Engineered Opening:

The FVs comply with the design principle noted in Section 2.7.2.2 and Section 2.7.3 of ASCE/SEI 24-14 [Section 2.6.2.2 of ASCE/SEI 24-05 (2012, 2009, 2006 IBC and IRC)] for a maximum rate of rise and fall of 5.0 feet per hour (0.423 mm/s). In order to comply with the engineered opening requirement of ASCE/SEI 24, Smart Vent FVs must be installed in accordance with Section 4.0.

### 3.3 Ventilation:

The SmartVENT® Model #1540-510 and SmartVENT® Overhead Door Model #1540-514 both have screen covers with 1/4-inch-by-1/4-inch (6.35 by 6.35 mm) openings, yielding 51 square inches (32 903 mm<sup>2</sup>) of net free area to supply natural ventilation. The SmartVENT® Stacking Model #1540-511 consists of two Model #1540-510 units in one assembly, and provides 102 square inches (65 806 mm<sup>2</sup>) of net free area to supply natural ventilation. Other FVs recognized in this report do not offer natural ventilation.

## 4.0 DESIGN AND INSTALLATION

SmartVENT® and FloodVENT® are designed to be installed into walls or overhead doors of existing or new construction from the exterior side. Installation of the vents must be in accordance with the manufacturer's instructions, the applicable code and this report. Installation clips allow mounting in masonry and concrete walls of any thickness. In order to comply with the engineered opening design principle noted in Section 2.7.2.2 and 2.7.3 of ASCE/SEI 24-14 [Section 2.6.2.2 of ASCE/SEI 24-05 (2012, 2009, 2006 IBC and IRC)], the Smart Vent® FVs must be installed as follows:

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one FV for every 200 square feet (18.6 m<sup>2</sup>) of enclosed area, except that the SmartVENT® Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 must be installed with a minimum of one FV for every 400 square feet (37.2 m<sup>2</sup>) of enclosed area.
- Below the base flood elevation.

- With the bottom of the FV located a maximum of 12 inches (305.4 mm) above the higher of the final grade or floor and finished exterior grade immediately under each opening.

## 5.0 CONDITIONS OF USE

The Smart Vent® FVs described in this report comply with, or are suitable alternatives to what is specified in, those codes listed in Section 1.0 of this report, subject to the following conditions:

- 5.1 The Smart Vent® FVs 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 Smart Vent® FVs must not be used in the 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 Smart VENT® models recognized in this report must be identified by a label bearing the manufacturer's name (Smartvent Products, Inc.), the model number, and the evaluation report number (ESR-2074).

TABLE 1—MODEL SIZES

MODEL NAME	MODEL NUMBER	MODEL SIZE (in.)	COVERAGE (sq. ft.)
FloodVENT®	1540-520	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
SmartVENT®	1540-510	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
FloodVENT® Overhead Door	1540-524	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
SmartVENT® Overhead Door	1540-514	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
Wood Wall FloodVENT®	1540-570	14" X 8 <sup>3</sup> / <sub>4</sub> "	200
Wood Wall FloodVENT® Overhead Door	1540-574	14" X 8 <sup>3</sup> / <sub>4</sub> "	200
SmartVENT® Stacker	1540-511	16" X 16"	400
FloodVent® Stacker	1540-521	16" X 16"	400

For SI: 1 inch = 25.4 mm; 1 square foot = m<sup>2</sup>

## 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 Brice and Karen Cote				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 109 Hillcrest Avenue				Company NAIC Number:	
City Neptune Township		State New Jersey		ZIP Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 5316 Lot 10					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>N 40 11 34.6272</u> Long. <u>w -74 02 25.0116</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>7</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>160</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>2</u>					
c) Total net area of flood openings in A8.b <u>464</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>957</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>5</u>					
c) Total net area of flood openings in A9.b <u>1,160</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Township Of Neptune 340317			B2. County Name Monmouth		B3. State New Jersey
B4. Map/Panel Number 34025C0333	B5. Suffix F	B6. FIRM Index Date 09/25/2009	B7. FIRM Panel Effective/ Revised Date 09/25/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9
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 type="checkbox"/> NGVD 1929 <input checked="" 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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 109 Hillcrest Avenue			Policy Number:
City Neptune Township	State New Jersey	ZIP Code 07753	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: GPS Observation 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)   | 6.1  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor   | 16.1 | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)   |      | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  |      | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | 12.1 | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | 5.8  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | 6.1  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | 5.9  | <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  
Robert M. Ragan

License Number  
N.J. Lic. No. 38977

Title  
Land Surveyor

Company Name  
Ragan Land Surveying

Address  
1913 Cottage Place

City  
Wall Township

State  
New Jersey

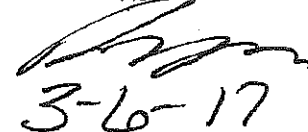
ZIP Code  
07719

Signature  


Date  
03/06/2017

Telephone  
(732) 280-7000

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)

Structure is a 2 story frame dwelling built on full story foundation walls. The gas hot water heater and furnace are in the enclosure at elevation 12.3 and 12.1, respectively. The air conditioning unit is outside on a platform at elevation 15.5. There are five USA Foundation Flood and Air Vent Co. engineered foundation vents Model RFSS (232 Sq. Ft.) in the garage area. (See specifications attached.) There are two of the same vents in the storage room.

**BUILDING PHOTOGRAPHS****ELEVATION CERTIFICATE**

See Instructions for Item A6.

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.  
109 Hillcrest Avenue

Policy Number:

City  
Neptune TownshipState  
New JerseyZIP Code  
07753

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.

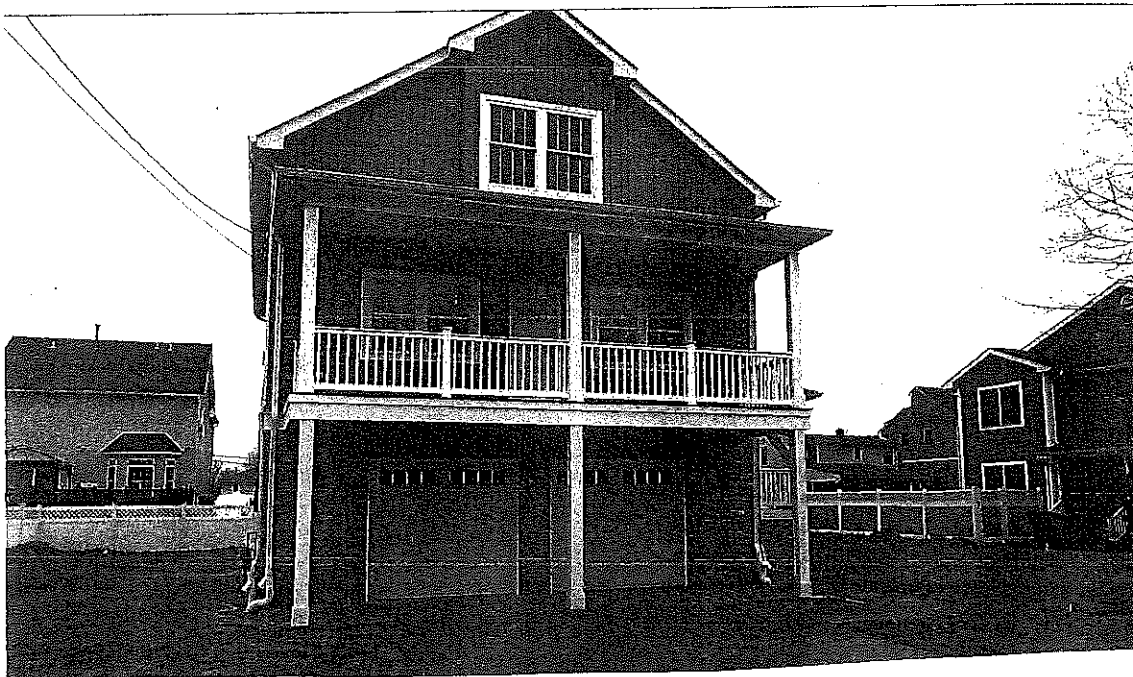


Photo One

Photo One Caption Front

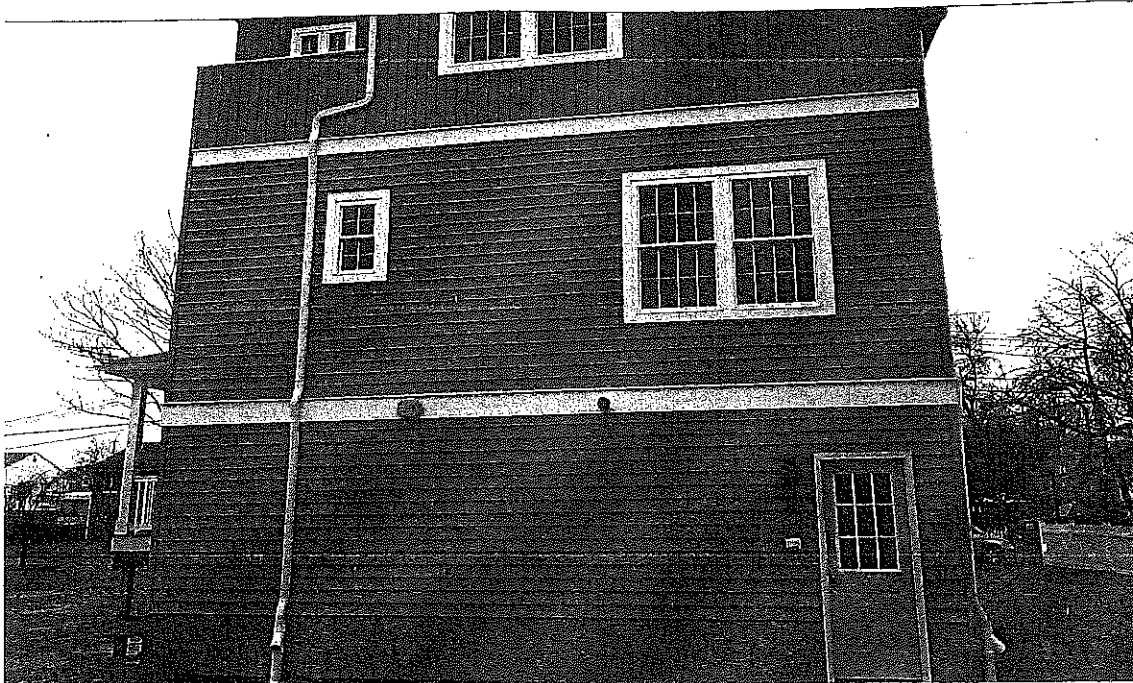


Photo Two

Photo Two Caption Rear

# ELEVATION CERTIFICATE

## BUILDING PHOTOGRAPHS

Continuation Page

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.  
109 Hillcrest Avenue

Policy Number:

City  
Neptune Township

State  
New Jersey

ZIP Code  
07753

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 Left Side



Photo Two

Photo Two Caption Right Side



# Certification of Engineered Flood Openings

In accordance with NFIP, FEMA Technical Bulletin 1-08 and ASCE/SEI 24-14

## Certification Statement

I hereby certify that the flood vents manufactured by USA Foundation Flood Air Vents (Model No's FO-316, FA-316, FOAL, FAAL, RFPC and RFSS) are designed in accordance with the requirements of the 2011 NFIP "Flood Insurance Manual" to provide automatic equalization of hydrostatic flood loads on exterior walls by allowing the automatic entry and exit of floodwaters during floods up to and including the base 100-year flood. The flood vents must be installed and sized properly as set forth by the requirements below. This certification follows the design requirements and specifications that are established in FEMA Technical Bulletin 1-08 and ASCE/SEI 24-14.

## Design Characteristics

I hereby certify that I have measured the flood vent models listed below. I have also calculated the maximum total enclosed area that can be served by each individual model based on the net area of the opening using the equation taken from ASCE/SEI 24-14, Section 2.6.2.2 and the following design assumptions listed below.

### Design Assumptions:

1. The rates of rise and fall have been assumed to be 5 feet per hour.
2. The maximum difference between the exterior and interior floodwater levels have been assumed to be 1 foot during base flood conditions.
3. A factor of safety of 5 has been used in the design.

### Area of Engineered Openings per ASCE 24, Section 2.6.2.2

$$A_o = (0.0333)[1/c]R(A_e) \rightarrow A_e = A_o / [(0.0333)[1/c]R]$$

Where:

$A_o$  = Total Net Area of Openings Required (in<sup>2</sup>)

0.033 = Coefficient Corresponding to a Factor of Safety of 5.0 (in<sup>2</sup>-hr/ft<sup>3</sup>)

$c$  = Opening Coefficient (Non-Dimensional; see ASCE 24, Table 2-2)

$R$  = Worst Case Rate of Rise and Fall (ft/hr)

$A_e$  = Total Enclosed Area (ft<sup>2</sup>)

Maximum Area Coverage in Square Feet per Vent for each Model

Model	Height (in.)	Width (in.)	$A_o$ (in. <sup>2</sup> )	Constant (in <sup>2</sup> -hr/ft <sup>3</sup> )	$c$	$R$ (ft/hr)	$A_e$ (ft <sup>2</sup> )
FO-316	7.00	15.50	108.50	0.0330	0.400	5	263
FA-316	7.00	15.50	108.50	0.0330	0.400	5	263
FOAL-W	7.00	15.50	108.50	0.0330	0.400	5	263
FOAL-B	7.00	15.50	108.50	0.0330	0.400	5	263
FOAL-G	7.00	15.50	108.50	0.0330	0.400	5	263
FAAL-W	7.00	15.50	108.50	0.0330	0.400	5	263
FAAL-B	7.00	15.50	108.50	0.0330	0.400	5	263
FAAL-G	7.00	15.50	108.50	0.0330	0.400	5	263
RFPC	7.00	13.75	96.25	0.0330	0.398	5	232
RFSS	7.00	13.75	96.25	0.0330	0.398	5	232

\*Note: ( $A_e$ ) is the maximum total enclosed area that can be served for each individual model based on the net area of the opening ( $A_o$ )

## Limitations and Installation Requirements

This certification will be voided in its entirety if the following installation requirements and limitations are not enforced. USA Foundation Flood Air Vents and Conn Engineering Consultants, Inc. do not recommend or authorize any modifications to the flood vents and will not be held liable for improper installation or modification of the flood vents.

### FEMA/ NFIP Limitations and Installation Requirements:

1. A minimum of two openings having a total net area of not less than one square inch for every square foot of enclosed area subject to flooding shall be provided.
2. The bottom of all openings shall be no higher than one foot above grade that is immediately under each opening.
3. Openings may be equipped with screens, louvers, valves or other coverings or devices provided that they permit the automatic entry and exit of floodwaters.
4. It is recommended that openings be reasonably distributed around the perimeter of the enclosed area unless there is clear justification for putting all openings on just one or two sides (such as in townhouses or buildings set into sloping sites).
5. Where analysis indicates rates of rise and fall greater than 5 feet per hour, the total enclosed area shall be reduced accordingly.

### Design Professional

Name / Title: Jason M. Conn, P.E. President, Conn Engineering Consultants, Inc.  
Address: 107 N. Bridge St., Linden, MI 48451  
License Type: Professional Engineer  
State: New Jersey  
License Number: 24GE04573000

### Installation Address

Customer and Installation Address:  
109 Hilcrest Avenue  
Neptune, NJ 07753

### Model Installed

Model Number: RFSS  
Maximum total enclosed area that can be served for EACH individual vent: 232 Square Feet

Professional Engineering Seal

3/2/17

## ELEVATION CERTIFICATE

LDC - #15027

**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 EMIDIO AND MARIA DIFIORE				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 401 SOUTH RIVERSIDE DRIVE				Company NAIC Number:	
City NEPTUNE		State New Jersey		ZIP Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TOWNSHIP OF NEPTUNE; LOT 8, BLOCK 5409					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>40°11'07.9"N</u> Long. <u>074°02'32.8"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>1,756</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>1,800</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>341</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>2</u>					
c) Total net area of flood openings in A9.b <u>400</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number TOWNSHIP OF NEPTUNE 340317			B2. County Name MONMOUTH		B3. State New Jersey
B4. Map/Panel Number 34025C0341	B5. Suffix F	B6. FIRM Index Date 09/25/2009	B7. FIRM Panel Effective/ Revised Date 09/25/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9
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 type="checkbox"/> NGVD 1929 <input checked="" 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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 401 SOUTH RIVERSIDE DRIVE			Policy Number:
City NEPTUNE	State New Jersey	ZIP Code 07753	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: GPS RTK OBSERVATION Vertical Datum: 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>7.9</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>14.0</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>7.82</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | <u>12.3</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>7.6</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>8.0</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>7.6</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  
William H. Doolittle

License Number  
24GS3624000

Title  
Professional Land Surveyor

Company Name  
Lindstrom, Diessner & Carr, P.C.

Address  
136 Drum Point Road, Suite 6

City  
Brick

State  
New Jersey

ZIP Code  
08723

Signature  
*William H. Doolittle*

Date  
09/21/2016

Telephone  
(732) 477-8900

Place  
Stamp  
Here  
*William H. Doolittle*  
9-21-2016

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)

FEMA PRELIMINARY FLOOD INSURANCE RATE MAP (PFIRM)(REVISED RELEASED 1/30/2015) FLOOD HAZARD ZONE AE-11. A/C PLATFORM AT ELEVATION 12.3 FEET LOCATED THE RIGHT SIDE OF THE DWELLING (SEE PHOTO); FURNACE AND HOT WATER HEATER AT ELEVATION 16.6 FEET; ELECTRIC PANEL AT ELEVATION 16.2 FEET. TEN (10) SMART VENTS WITHIN THE CRAWLSPACE AREA AT ELEVATION 8.4 FEET; FIVE (5) SMART VENTS WITHIN CRAWLSPACE 'A' (892 Sq.Ft.); FIVE (5) SMART VENTS WITHIN CRAWLSPACE 'B' (864 Sq.Ft); TWO (2) SMART VENTS WITHIN THE GARAGE AREA (341 Sq.Ft.) AT ELEVATION 8.4 FEET. SMART VENT MODEL #1540-520.

**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.  
401 SOUTH RIVERSIDE DRIVE

Policy Number:

City  
NEPTUNEState  
New JerseyZIP Code  
07753

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 401 SOUTH RIVERSIDE DRIVE			Policy Number:
City NEPTUNE	State New Jersey	ZIP Code 07753	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	Title
-----------------------	-------

Community Name	Telephone
----------------	-----------

---

Signature \_\_\_\_\_ Date \_\_\_\_\_

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.

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.  
401 SOUTH RIVERSIDE DRIVE

Policy Number:

City  
NEPTUNEState  
New JerseyZIP Code  
07753

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.

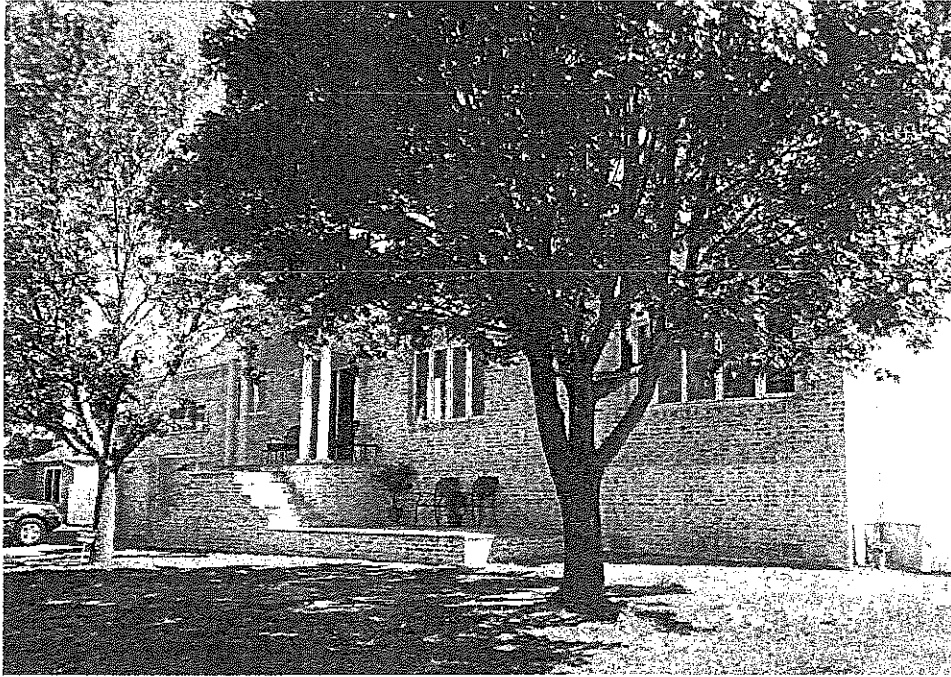


Photo One

Photo One Caption FRONT OF 401 SOUTH RIVERSIDE DRIVE

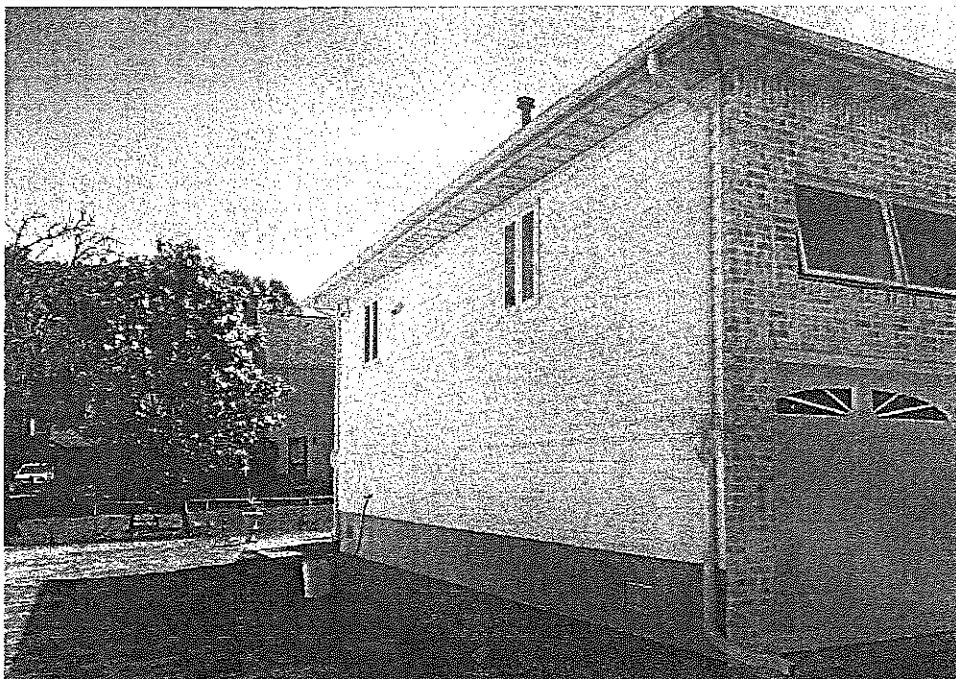


Photo Two

Photo Two Caption LEFT SIDE OF 401 SOUTH RIVERSIDE DRIVE

**ELEVATION CERTIFICATE****BUILDING PHOTOGRAPHS**

Continuation Page

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.  
401 SOUTH RIVERSIDE DRIVE

Policy Number:

City  
NEPTUNEState  
New JerseyZIP Code  
07753

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 REAR OF 401 SOUTH RIVERSIDE DRIVE

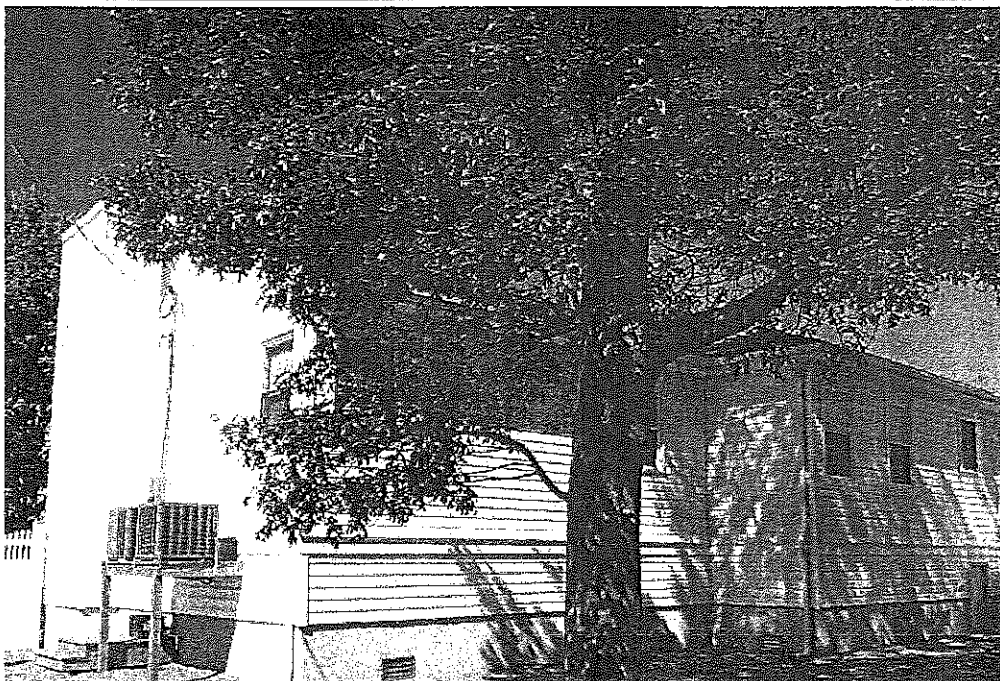


Photo Two

Photo Two Caption RIGHT SIDE OF 401 SOUTH RIVERSIDE DRIVE

**BUILDING PHOTOGRAPHS****ELEVATION CERTIFICATE**

See Instructions for Item A6.

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.  
401 SOUTH RIVERSIDE DRIVE

Policy Number:

City  
NEPTUNEState  
New JerseyZIP Code  
07753

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.

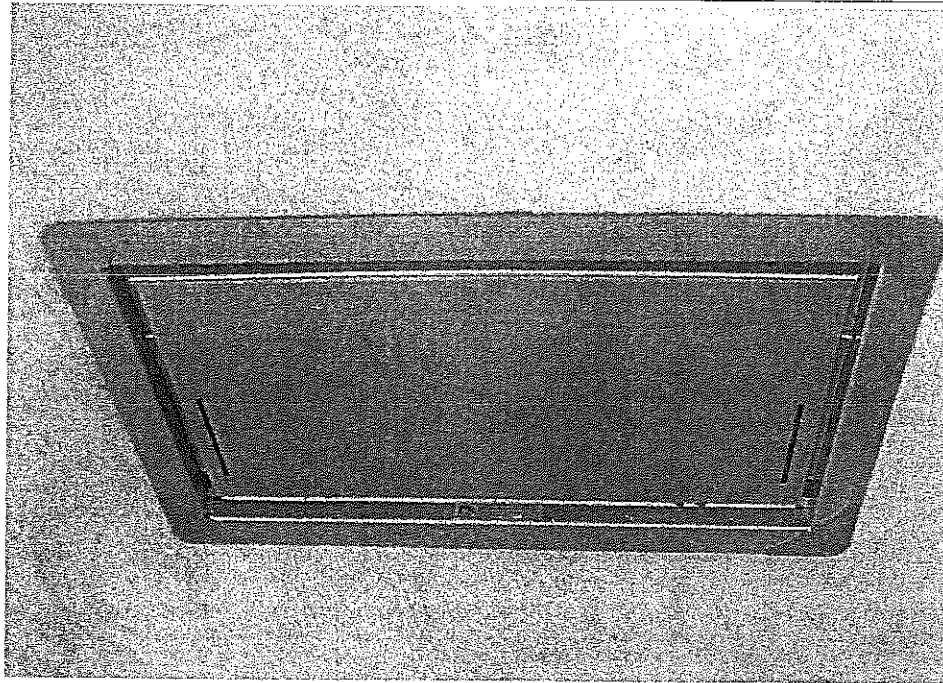


Photo One

Photo One Caption SMART VENT MODEL #1540-520

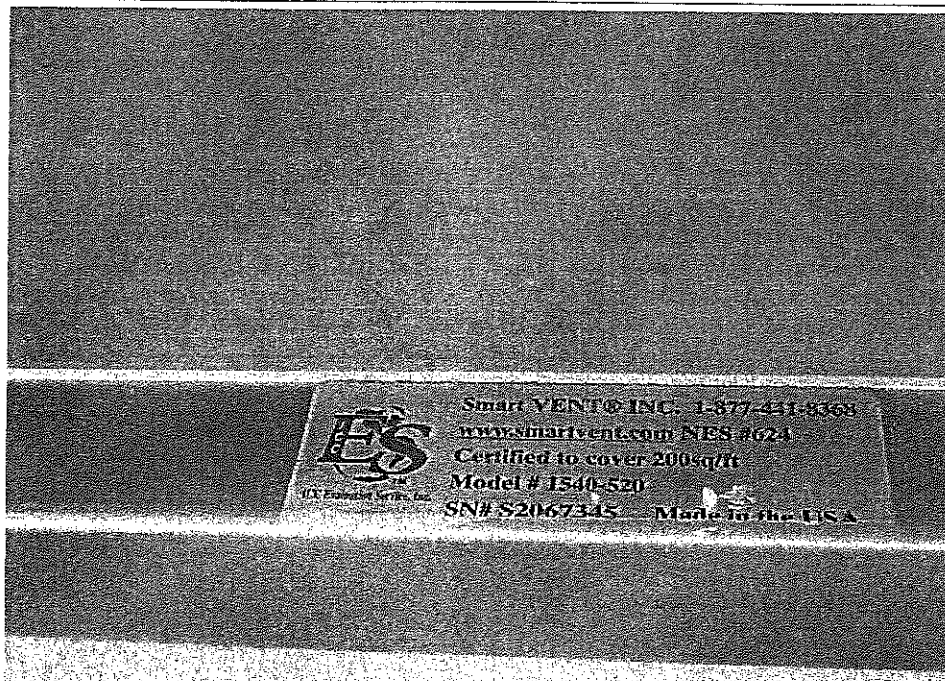


Photo Two

Photo Two Caption

DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
**ELEVATION CERTIFICATE**

**IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16**

OMB Control Number: 1660-0008  
Expiration: 11/30/2018

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				FORM INSURANCE COMPANY USE	
A1. Building Owner's Name ROBERT G. REGAN				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 105 PROSPECT AVENUE				Company NAIC Number:	
City NEPTUNE TOWNSHIP		State NEW JERSEY		Zip Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 15, BLOCK 5412					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. 40.189575° Long. -74.039721° Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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 # 6					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) 985 sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade SIX					
c) Total net area of flood openings in A8.b 1200 sq in					
d) Engineered flood openings? <input checked="" type="radio"/> Yes <input type="radio"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage N/A sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A					
c) Total net area of flood openings in A9.b N/A sq in					
d) Engineered flood openings? <input type="radio"/> Yes <input type="radio"/> No N/A					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number NEPTUNE TOWNSHIP 340317			B2. County Name MONMOUTH		B3. State NJ
B4. Map/Panel Number 34025C033	B5. Suffix F	B6. FIRM Index Date 09/25/2009	B7. FIRM Panel Effective/Revised Date 09/25/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9 FEET
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source:					
B11. Indicate elevation datum used for BFE in Item B9: <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other/Source:					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA					
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> Finished Construction					
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. * A new Elevation Certificate will be required when construction of the building is complete.					
Benchmark Utilized: GPS SMARTNET Vertical Datum: NAVD'88					
Indicate elevation datum used for the elevations in items a) through h) below. <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> 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)	6	-	80	<input checked="" type="radio"/> feet	<input type="radio"/> meters
b) Top of the next higher floor	15	-	60	<input checked="" type="radio"/> feet	<input type="radio"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	-		<input type="radio"/> feet	<input type="radio"/> meters
d) Attached garage (top of slab)	N/A	-		<input type="radio"/> feet	<input type="radio"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	13	-	10	<input checked="" type="radio"/> feet	<input type="radio"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	6	-	30	<input checked="" type="radio"/> feet	<input type="radio"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	6	-	60	<input checked="" type="radio"/> feet	<input type="radio"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	6	-	40	<input checked="" type="radio"/> feet	<input type="radio"/> meters

# ELEVATION CERTIFICATE

OMB Control Number: 1660-0008  
Expiration: 11/30/2018

## 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.

☐ Check here if attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor?  
☒ Yes ☐ No

Certifier's Name WILLIAM E. McGRATH		License Number GS24194	
Title PROFESSIONAL LAND SURVEYOR	Company Name McGRATH SURVEYING & WATERFRONT CONSULTING, LLC		
Address 321 MANTOLOKING ROAD	City BRICK	State NJ	Zip Code 08723
Signature	Date 06/06/2016	Telephone (848) 232-3820	

*William E. McGrath*

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)"

HOUSE IN ZONE AE, BASE FLOOD ELEVATION 10 FT. ON FEMA "PRELIMINARY FLOOD INSURANCE RATE MAP" DATED 01/30/2015 (NOT OFFICIALLY ADOPTED AS A FIRM AS YET).  
LOWEST EQUIPMENT SERVICING THE BUILDING IS AN ELECTRIC METER (BOTTOM ELEV. 13.1)  
AIR COND. UNIT ON A PLATFORM AT ELEV. 14.8  
THERE ARE SIX ENGINEERED FLOOD VENTS (SMARTVENT MODEL # 1540-520)  
ICC CERTIFICATION ATTACHED.

Signature *William E. McGrath* Date 06/06/2016

## 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 8-9 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.

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. <input type="checkbox"/> 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. <input type="checkbox"/> 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. <input type="checkbox"/> 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: <input type="radio"/> New Construction <input type="radio"/> Substantial Improvement		
G8. Elevation of as-built lowest floor (including basement) of the building: _____ - _____ <input type="radio"/> feet <input type="radio"/> meters Datum _____		
G9. BFE or (in Zone AO) depth of flooding at the building site: _____ - _____ <input type="radio"/> feet <input type="radio"/> meters Datum _____		
G10. Community's design flood elevation: _____ - _____ <input type="radio"/> feet <input type="radio"/> meters Datum _____		
Local Official's Name		Title
Community Name		Telephone
Signature		Date
Comments		
<div><input type="checkbox"/> Check here if attachments.</div>		

# BUILDING PHOTOGRAPHS

See instructions for Item A6

OMB Control Number: 1660-0008  
Expiration: 11/30/2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>		<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 105 PROSPECT AVE.		Policy Number:	
City NEPTUNE TOWNSHIP	State NJ	Zip Code 07753	Company NAIC Number:

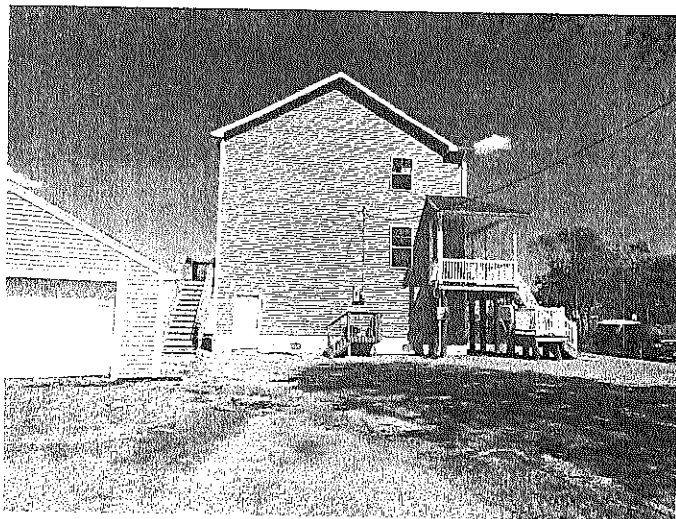
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front view" and "Rear view"; and, if required, "Right Side View" and "Left Side View." When applicable, 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.



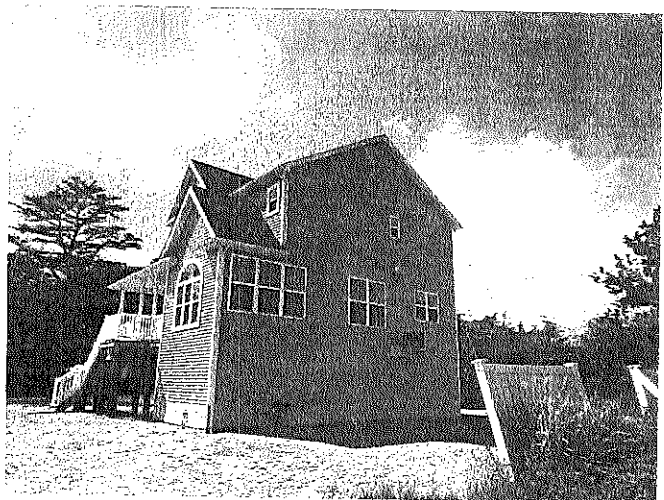
FRONT OF 105 PROSPECT AVENUE



REAR OF 105 PROSPECT AVENUE



WEST SIDE OF 105 PROSPECT AVENUE



EAST SIDE OF 105 PROSPECT AVENUE

# ICC-ES Evaluation Report

**ESR-2074**

Reissued February 2015

Revised May 2016

This report is subject to renewal February 2017.

[www.icc-es.org](http://www.icc-es.org) | (800) 423-6587 | (562) 699-0543

A Subsidiary of the International Code Council®

DIVISION: 08 00 00—OPENINGS

Section: 08 95 43—Vents/Foundation Flood Vents

## REPORT HOLDER:

**SMARTVENT PRODUCTS, INC.**

430 ANDBRO DRIVE, UNIT 1

PITMAN, NEW JERSEY 08071

(877) 441-8368

[www.smartvent.com](http://www.smartvent.com)
[info@smartvent.com](mailto:info@smartvent.com)

## EVALUATION SUBJECT:

**SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS:**
**MODELS #1540-520; #1540-521; #1540-510; #1540-511; #1540-570; #1540-574; #1540-524; #1540-514**

## 1.0 EVALUATION SCOPE

Compliance with the following codes:

■ 2015, 2012, 2009 and 2006 *International Building Code®* (IBC)

■ 2015, 2012, 2009 and 2006 *International Residential Code®* (IRC)

■ 2013 *Abu Dhabi International Building Code* (ADIBC)<sup>†</sup>
<sup>†</sup>The ADIBC is based on the 2009 IBC. 2009 IBC code sections referenced in this report are the same sections in the ADIBC.

### Properties evaluated:

■ Physical operation

■ Water flow

## 2.0 USES

The Smart Vent® units are engineered mechanically operated flood vents (FVs) employed to equalize hydrostatic pressure on walls of enclosures subject to rising or falling flood waters. Certain models also allow natural ventilation.

## 3.0 DESCRIPTION

### 3.1 General:

When subjected to rising water, the Smart Vent® FVs internal floats are activated, then pivot open to allow flow in either direction to equalize water level and hydrostatic pressure from one side of the foundation to the other. The FV pivoting door is normally held in the closed position by a buoyant release device. When subjected to rising water, the buoyant release device causes the unit to unlatch,

allowing the door to rotate out of the way and allow flow. The water level stabilizes, equalizing the lateral forces. Each unit is fabricated from stainless steel. Smart Vent® Automatic Foundation Flood Vents are available in various models and sizes as described in Table 1. The SmartVENT® Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 units each contain two vertically arranged openings per unit.

### 3.2 Engineered Opening:

The FVs comply with the design principle noted in Section 2.7.2.2 and Section 2.7.3 of ASCE/SEI 24-14 [Section 2.6.2.2 of ASCE/SEI 24-05 (2012, 2009, 2006 IBC and IRC)] for a maximum rate of rise and fall of 5.0 feet per hour (0.423 mm/s). In order to comply with the engineered opening requirement of ASCE/SEI 24, Smart Vent FVs must be installed in accordance with Section 4.0.

### 3.3 Ventilation:

The SmartVENT® Model #1540-510 and SmartVENT® Overhead Door Model #1540-514 both have screen covers with 1/4-inch-by-1/4-inch (6.35 by 6.35 mm) openings, yielding 51 square inches (32 903 mm<sup>2</sup>) of net free area to supply natural ventilation. The SmartVENT® Stacking Model #1540-511 consists of two Model #1540-510 units in one assembly, and provides 102 square inches (65 806 mm<sup>2</sup>) of net free area to supply natural ventilation. Other FVs recognized in this report do not offer natural ventilation.

## 4.0 DESIGN AND INSTALLATION

SmartVENT® and FloodVENT® are designed to be installed into walls or overhead doors of existing or new construction from the exterior side. Installation of the vents must be in accordance with the manufacturer's instructions, the applicable code and this report. Installation clips allow mounting in masonry and concrete walls of any thickness. In order to comply with the engineered opening design principle noted in Section 2.7.2.2 and 2.7.3 of ASCE/SEI 24-14 [Section 2.6.2.2 of ASCE/SEI 24-05 (2012, 2009, 2006 IBC and IRC)], the Smart Vent® FVs must be installed as follows:

■ With a minimum of two openings on different sides of each enclosed area.

■ With a minimum of one FV for every 200 square feet (18.6 m<sup>2</sup>) of enclosed area, except that the SmartVENT® Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 must be installed with a minimum of one FV for every 400 square feet (37.2 m<sup>2</sup>) of enclosed area.

ICC-ES Evaluation Reports are not to be construed as representing aesthetics or any other attributes not specifically addressed, nor are they to be construed as an endorsement of the subject of the report or a recommendation for its use. There is no warranty by ICC Evaluation Service, LLC, express or implied, as to any finding or other matter in this report, or as to any product covered by the report.

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U.S. DEPARTMENT OF HOMELAND SECURITY  
FEDERAL EMERGENCY MANAGEMENT AGENCY  
National Flood Insurance Program

**ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

**SECTION A - PROPERTY INFORMATION**

A1. Building Owner's Name John C. Coyne &amp; Lucille T. Coyne

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
20 Albany Road

City Neptune Township

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
Block 557 Lot 7

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. 40°11'28.6" Long. 74°01'33.5" Horizontal Datum: ☐ NAD 1927 ☒ 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 2

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s) n/a sq ft

b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade n/a

c) Total net area of flood openings in A8.b n/a sq ft

d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

a) Square footage of attached garage n/a sq ft

b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade n/a

c) Total net area of flood openings in A9.b n/a sq ft

d) Engineered flood openings? ☐ Yes ☒ No**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**B1. NFIP Community Name & Community Number  
Township of Neptune - 340317B2. County Name  
Monmouth CountyB3. State  
NJB4. Map/Panel Number  
34025C0334B5. Suffix  
FB6. FIRM Index Date  
08/25/09B7. FIRM Panel Effective/Revised Date  
09/25/09B8. Flood Zone(s)  
XB9. Base Flood Elevation(s) (Zone AO, use base flood depth)  
n/a

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 ☒ NAVD 1988 ☐ Other/Source:B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No  
Designation Date:**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/AH, AR/A1-A30, AR/AH, AR/AO. Complete items C2.e-h below according to the building diagram specified in item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: 5.92

Vertical Datum: NAVD 88

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) 5.1

☒ feet ☐ meters

b) Top of the next higher floor 13.1

☒ feet ☐ meters

c) Bottom of the lowest horizontal structural member (V Zones only)

☐ feet ☐ meters

d) Attached garage (top of slab)

☐ feet ☐ meters

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)

☐ feet ☐ meters

f) Lowest adjacent (finished) grade next to building (LAG) 9.4

☒ feet ☐ meters

g) Highest adjacent (finished) grade next to building (HAG) 9.2

☒ feet ☐ meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support

☐ feet ☐ 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.

☒ Check here if comments are provided on back of form.Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ No

Certifier's Name Marc J. Cifone, PLS

License Number QS 41329

Title President

Company Name Lakeland Surveying, Inc.

Address 117 Rittenburg Avenue

City Rockaway Borough

State NJ

ZIP Code 07866

Signature

Date 04/30/13

Telephone (973) 625-5670

PLACE  
SEAL  
HERE

CENTAR LOAN # 0057286213

## 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 Charles & Jayne Johnson				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29 Albany Road				Company NAIC Number:	
City Neptune Township		State New Jersey		ZIP Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 23 / Block 5602					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>40-11-28 N</u> Long. <u>74-01-36 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>1,142</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>6</u>					
c) Total net area of flood openings in A8.b <u>(see comments)</u>					
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 Neptune, Township of 340317			B2. County Name Monmouth		B3. State New Jersey
B4. Map/Panel Number 34025C0334	B5. Suffix F	B6. FIRM Index Date 09/25/2009	B7. FIRM Panel Effective/ Revised Date 09/25/2009	B8. Flood Zone(s) AE (PBM AE)	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9 (PBFE 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 type="checkbox"/> NGVD 1929 <input checked="" 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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29 Albany Road			Policy Number:
City Neptune Township	State New Jersey	ZIP Code 07753	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: Mon. DM6975 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.

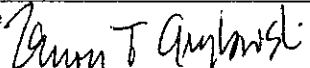
Check the measurement used.

- |   |               |  |                                 |
|---|---------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor)   | <u>6. 74</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>14. 87</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<br>(Describe type of equipment and location in Comments) | <u>19. 97</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>6. 70</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>8. 99</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>6. 95</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 Zenon T. Grybowski	License Number 23918	Place Seal Here
Title Vice President		
Company Name Landmark Surveying & Engineering		
Address 813 Main Street		
City Avon-by-the-Sea	State New Jersey	
Signature 	Date 06/13/2016	Telephone (732) 775-8558

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)

The lowest elevation of machinery are the Furnace and Hot Water Heater at elevation 19.97. There are no AC Units. Engineered flood vents (SMART Vent Model# 1540-520) designed to cover 200 square feet of enclosed area which totals 1,200 square feet. Based on FEMA website 06/13/2016 NJ Preliminary FIRM Data, the dwelling is in flood zone "AE", minimum PBFE is 10.

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29 Albany Road			Policy Number:
City Neptune Township	State New Jersey	ZIP Code 07753	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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29 Albany Road			Policy Number:
City Neptune Township	State New Jersey	ZIP Code 07753	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	Title
Community Name	Telephone
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.

OMB No. 1660-0008

Expiration Date: November 30, 2018

## ELEVATION CERTIFICATE

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 29 Albany Road			Policy Number:
City Neptune Township	State New Jersey	ZIP Code 07753	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.

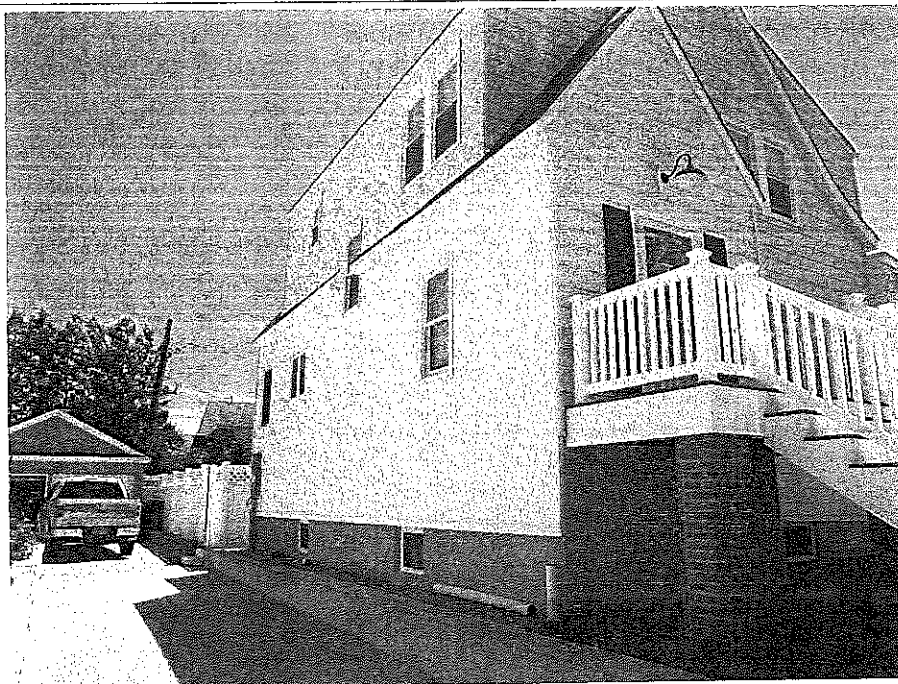


Photo One

Photo One Caption

Front Left/Side View - Taken 06/13/2016

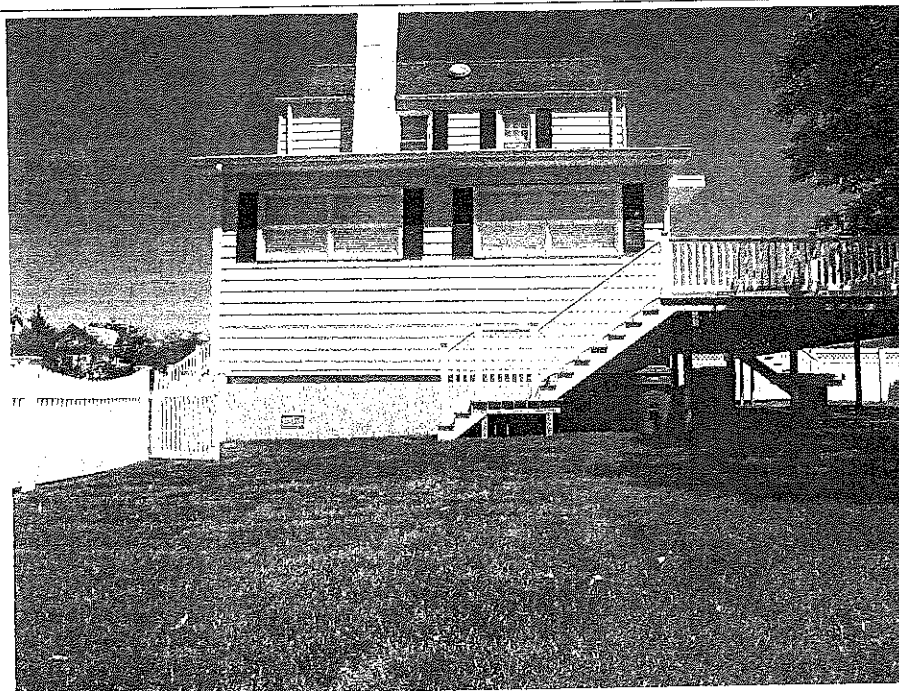


Photo Two

Photo Two Caption

Side View - Taken 06/13/2016

# ELEVATION CERTIFICATE

## BUILDING PHOTOGRAPHS

Continuation Page

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.  
29 Albany Road

Policy Number:

City  
Neptune Township

State  
New Jersey

ZIP Code  
07753

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.

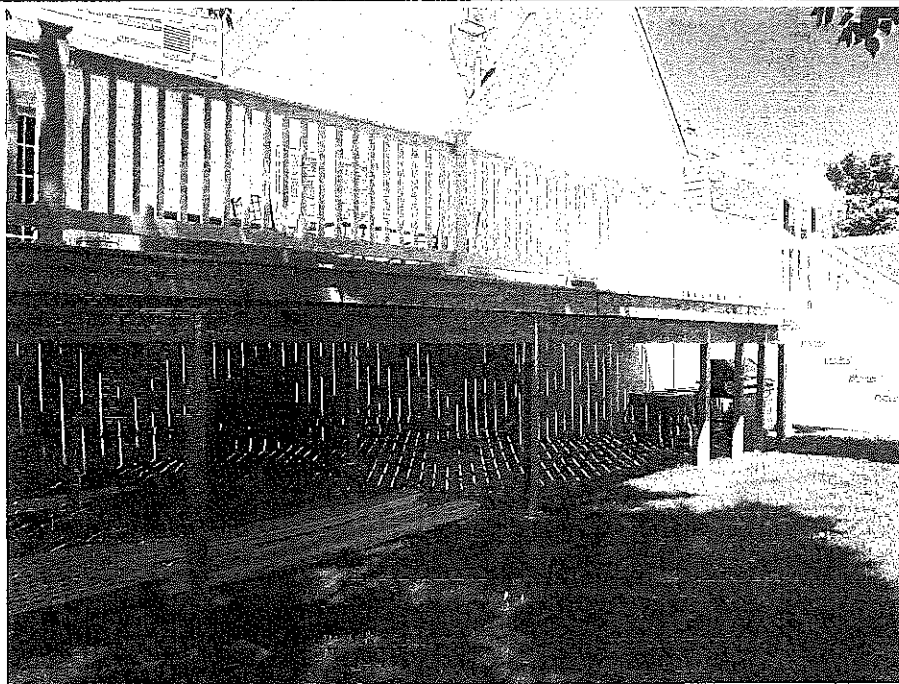


Photo One

Photo One Caption

Rear View - Taken 06/13/2016

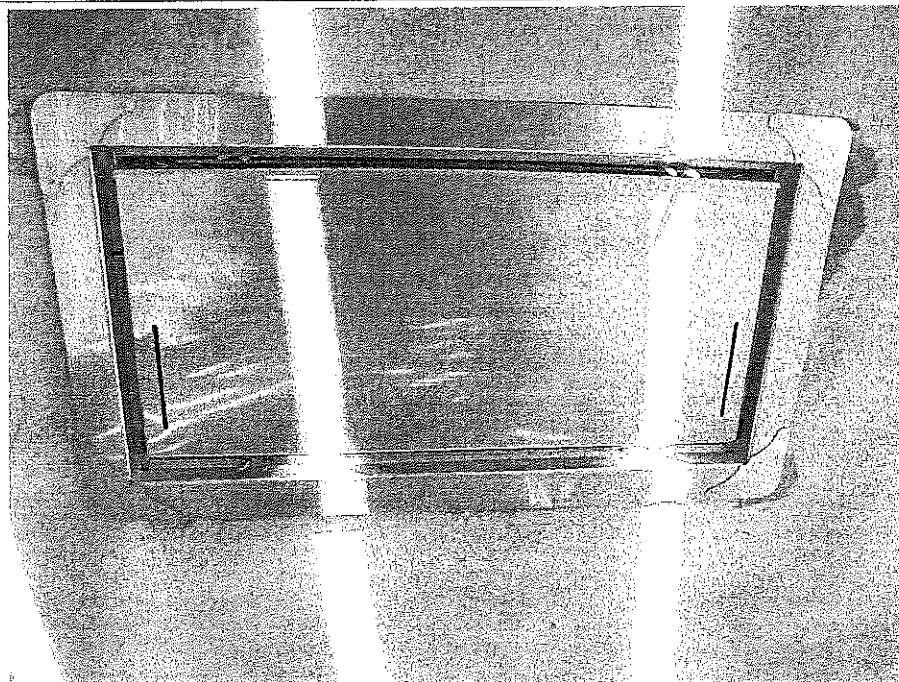


Photo Two

Photo Two Caption

SMART Vent Model# 1540-520 - Taken 06/13/2016

# 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.

<b>SECTION A - PROPERTY INFORMATION</b>	
A1. Building Owner's Name EVELYN SCHEIDT	FOR INSURANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 106 NORTH RIVERSIDE DR.	Company NAIC Number:
City NEPTUNE	State New Jersey
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 20 IN BLOCK 451	ZIP Code 07753
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL	
A5. Latitude/Longitude: Lat. 40°11'49.0" Long. -74°02'39.3"	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 7	
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) _____ sq ft b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____ c) Total net area of flood openings in A8.b _____ sq ft 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 _____ sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____ c) Total net area of flood openings in A9.b _____ sq ft d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number NEPTUNE TOWNSHIP 340317		B2. County Name MONMOUTH	B3. State New Jersey
B4. Map/Panel Number 34025C0333	B5. Suffix F	B6. FIRM Index Date 09/25/2009	B7. FIRM Panel Effective/Revised Date 09/25/2009
B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9		

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☒ Yes ☐ No

# 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

Policy Number:

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

City

State

ZIP Code

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: ☐ GPS ☐ NAVD 1988 ☒ NAVD 1929 ☐ Other/Source: \_\_\_\_\_

Indicate elevation datum used for the elevations in items a) through h) below.

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) ☒ feet ☐ meters

b) Top of the next higher floor ☒ feet ☐ meters

c) Bottom of the lowest horizontal structural member (V Zones only) ☒ feet ☐ meters

d) Attached garage (top of slab) ☒ feet ☐ meters

e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) ☒ feet ☐ meters

f) Lowest adjacent (finished) grade next to building (LAG) ☒ feet ☐ meters

g) Highest adjacent (finished) grade next to building (HAG) ☒ feet ☐ meters

h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support ☒ feet ☐ 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

License Number

Title

PROFESSIONAL LAND SURVEYOR

Company Name

RC BURDICK, PE, PP

Address

1023 OCEAN ROAD

City

POINT PLEASANT

State

New Jersey

ZIP Code

08742

Date

05/15/2017

Telephone

(732) 892-5050

Signature

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)

LOWER LEVEL FLOOR=7.6' FF=16.8' GF=6.9' A/C=14.8'

HOUSE HAS 4 (1540-510) SMART VENTS 200X4=800 SQ. IN'S , GARAGE HAS 3 (1540-520) SMART VENTS 200X3=600 SQ. IN'S

BEST AVAILABLE DATA PER FEMA PRELIMINARY FIRM PANEL # 34025C0333G UPDATED THROUGH 01/30/2015 BFE=AE 10

# 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.		Policy Number:
106 NORTH RIVERSIDE DR.		
City	State	ZIP Code
NEPTUNE	New Jersey	07753
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
Comments	

☒ Check here if attachments.

Replaces all previous editions.

FEMA Form 086-0-33 (7/15)

5573

# ELEVATION CERTIFICATE

OMB No. 1660-0008

Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	106 NORTH RIVERSIDE DR.
City	NEPTUNE
State	New Jersey
ZIP Code	07753
Company NAIC Number	
FOR INSURANCE COMPANY USE	Policy 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:

G9. BFE or (in Zone AO) depth of flooding at the building site:

G10. Community's design flood elevation:

Local Official's Name

Title

Community Name

Telephone

Signature

Date

Comments (including type of equipment and location, per C2(e), if applicable)

☒ Check here if attachments.

5513

# BUILDING PHOTOGRAPHS

## ELEVATION CERTIFICATE

See Instructions for Item A6.

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

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

FOR INSURANCE COMPANY USE		Policy Number:	
Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		106 NORTH RIVERSIDE DR.	
City		NEPTUNE	
State		New Jersey	
ZIP Code		07753	
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, "Left Side View" and "Right 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.

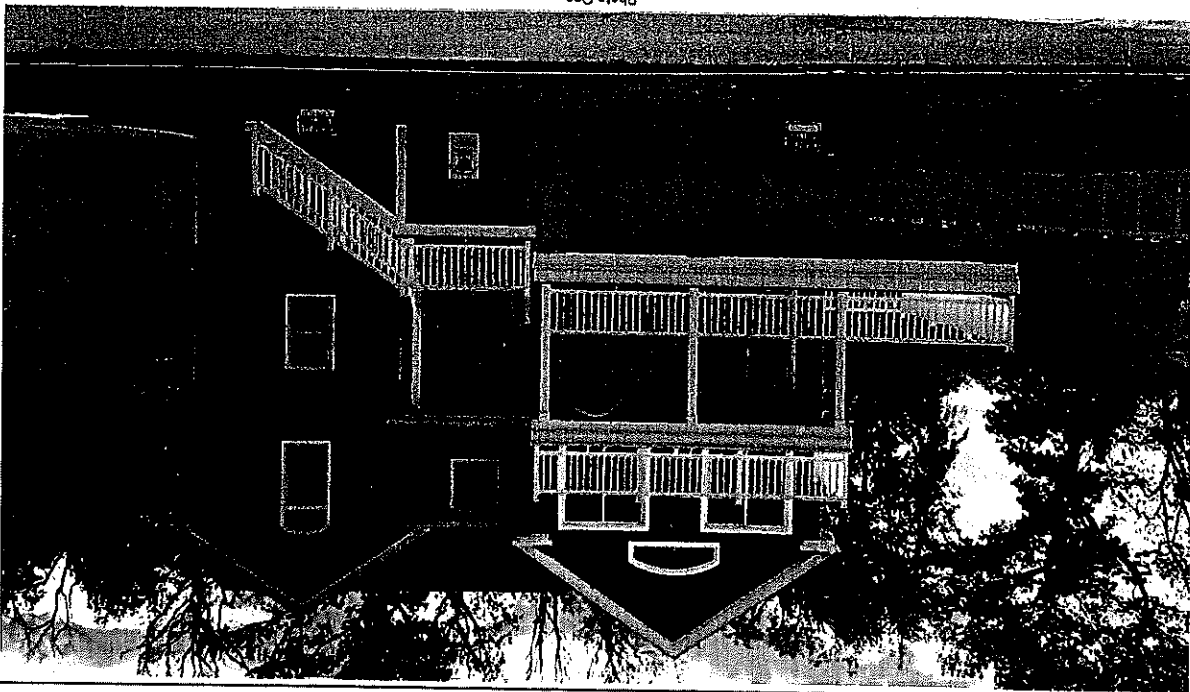


Photo One

Photo One Caption

FRONT 11-04-2016

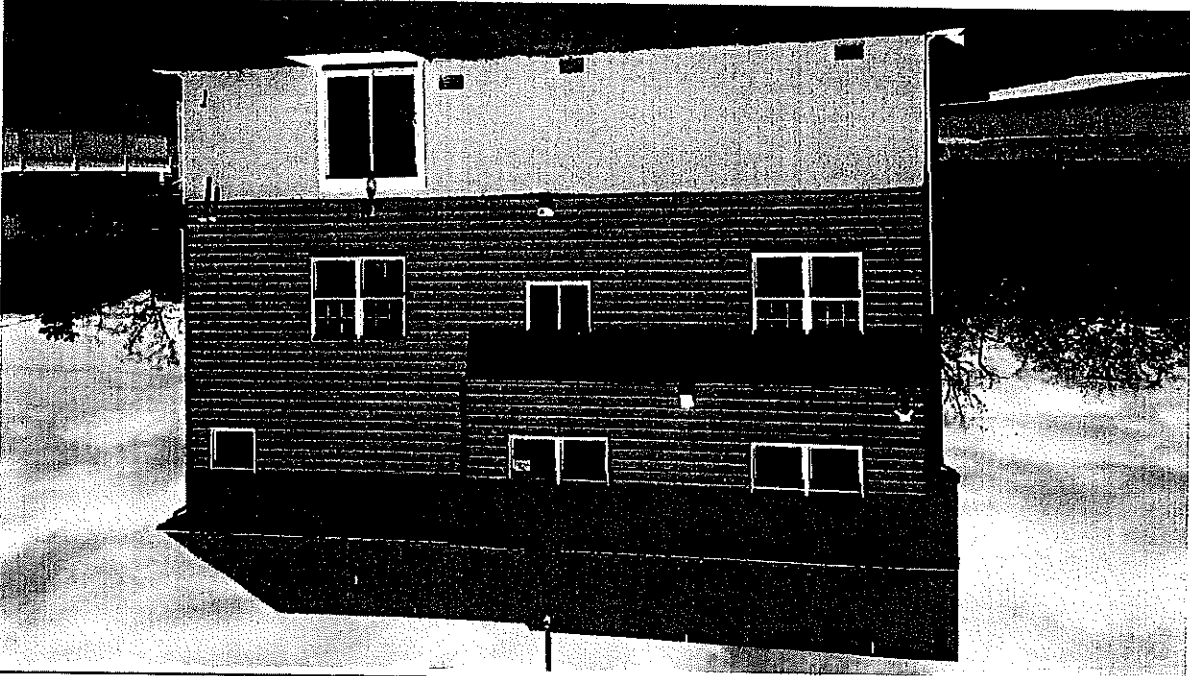


Photo Two

Photo Two Caption

REAR 11-04-2016

Replaces all previous editions.

FEMA Form 086-0-33 (7/15)

# ELEVATION CERTIFICATE

## BUILDING PHOTOGRAPHS

OMB No. 1660-0008

Expiration Date: November 30, 2018

Continuation Page

**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.		106 NORTH RIVERSIDE DR.	
Policy Number:		City		NEPTUNE	
Company NAIC Number		State		New Jersey	
		ZIP Code		07753	

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.

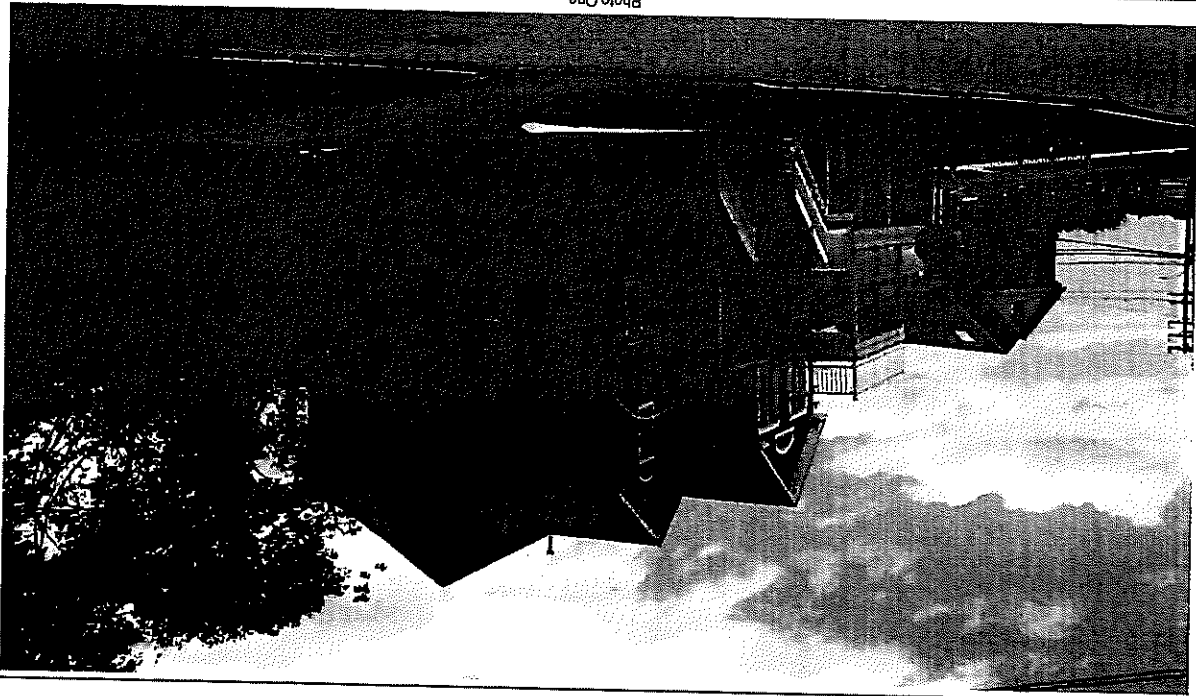


Photo One Caption

RIGHT SIDE 11-04-2016

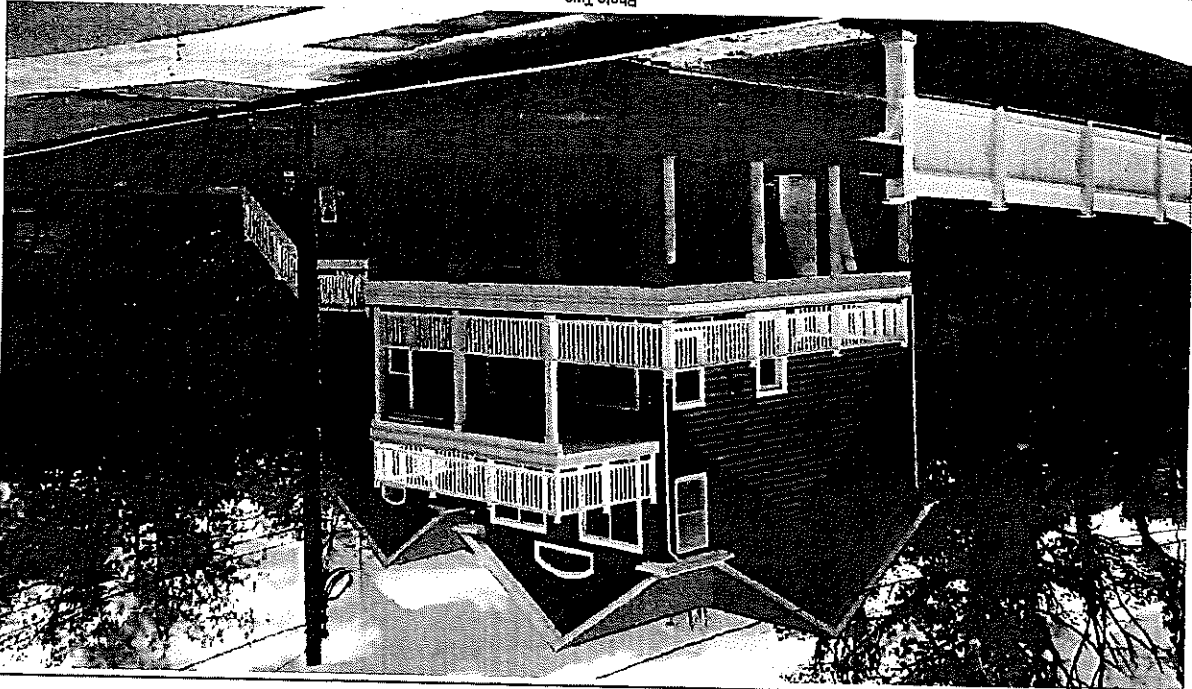


Photo Two Caption

LEFT SIDE 11-04-2016

Replaces all previous editions.

FEMA Form 086-0-33 (7/15)

# 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 TOM AND MICHELLE BAHR				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 114 HILLCREST AVENUE				Company NAIC Number:	
City NEPTUNE TWP.		State New Jersey		ZIP Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 7-10 BLOCK 471 <u>Bj. 5317 Lot 1</u>					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>40 - 11' - 04.326"</u> Long. <u>74 - 02' - 27.431"</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>7</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>1032.00</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>6</u>					
c) Total net area of flood openings in A8.b <u>1200.00</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>N/A</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____					
c) Total net area of flood openings in A9.b _____ sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number NEPTUNE TWP. 340317			B2. County Name MONMOUTH		B3. State New Jersey
B4. Map/Panel Number 34025C0333	B5. Suffix F	B6. FIRM Index Date 09-25-2009	B7. FIRM Panel Effective/ Revised Date 09-25-2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9
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 type="checkbox"/> NGVD 1929 <input checked="" 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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 114 HILLCREST AVENUE			Policy Number:
City NEPTUNE TWP.	State New Jersey	ZIP Code 07753	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: GPS OBSERVATIONS Vertical Datum: NAVD '88

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>6.10</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	<u>14.00</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	_____	<input 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>15.30</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>5.90</u>	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>7.50</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>5.90</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 KENNETH P. FRANK		License Number PLS 36727		Place Seal Here
Title OWNER				
Company Name KF2T PROFESSIONAL LAND SURVEYORS				
Address P.O. BOX 521				
City COLTS NECK	State New Jersey	ZIP Code 07722		
Signature 	Date 05-04-2017	Telephone (908) 692-7853	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)  
LOWEST MACHINERY SERVICING THE DWELLING IS THE AC UNIT ON A WOOD PLATFORM. THE ENCLOSURE HAS A 10' WIDE X 25' LONG SECTION THAT STEP'S UP (2.2') FROM THE LOWEST ENCLOSURE FLOOR MAKING THAT SECTION AT ELEVATION 8.3'. FLOOD VENTS ARE SMART VENT MODEL # 1540-510 CERTIFIED TO COVER 200 SQ. FT.

**ELEVATION CERTIFICATE****BUILDING PHOTOGRAPHS**

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

<b>IMPORTANT:</b> In these spaces, copy the corresponding information from Section A.			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 114 HILLCREST AVENUE			Policy Number:
City NEPTUNE TWP.	State New Jersey	ZIP Code 07753	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.

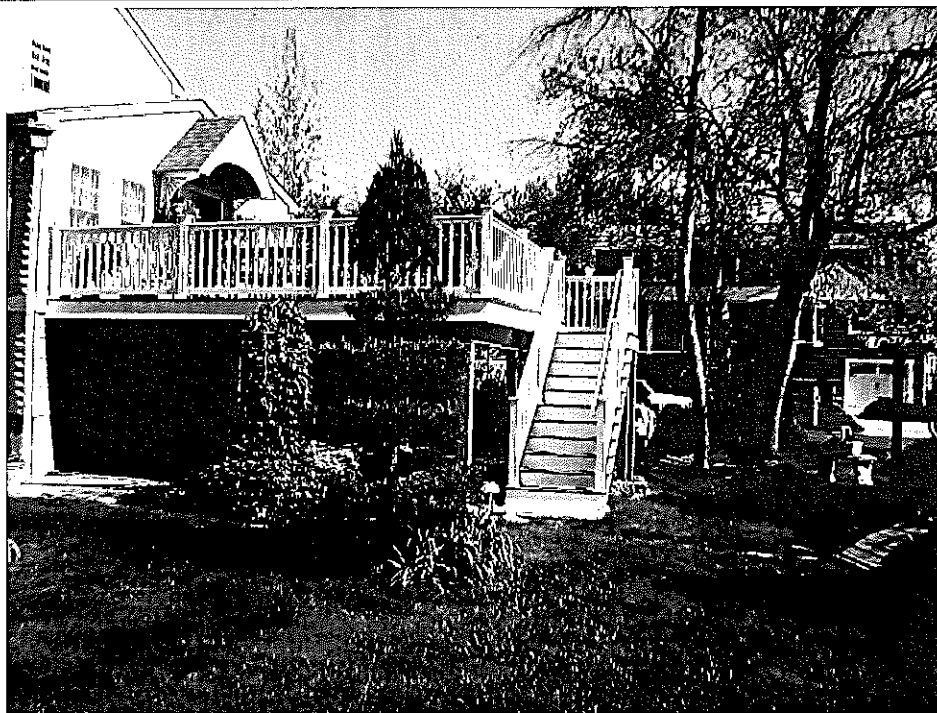


Photo Three

Photo Three Caption LEFT REAR OF HOUSE

Clear Photo Three



Photo Four

Photo Four Caption RIGHT SIDE OF HOUSE AC ON PLATFORM.

Clear Photo Four

**ELEVATION CERTIFICATE****BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 114 HILLCREST AVENUE			Policy Number:
City NEPTUNE TWP.	State New Jersey	ZIP Code 07753	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

Clear Photo One



Photo Two

Photo Two Caption REAR VIEW

Clear Photo Two

## 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 JAMES SPINELLI & JACQUELINE SHARROCK				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 104 MELROSE AVENUE				Company NAIC Number:	
City NEPTUNE		State New Jersey		ZIP Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 5, BLOCK 5321					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>40.19174</u> Long. <u>-74.03982</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>967.20</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>6</u>					
c) Total net area of flood openings in A8.b <u>1230.00</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>N/A</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION <u>16-170</u>					
B1. NFIP Community Name & Community Number TOWNSHIP OF NEPTUNE 340317			B2. County Name MONMOUTH		B3. State New Jersey
B4. Map/Panel Number 34025C0333	B5. Suffix F	B6. FIRM Index Date 09-25-2009	B7. FIRM Panel Effective/ Revised Date 09-25-2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9.0
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 type="checkbox"/> NGVD 1929 <input checked="" 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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 104 MELROSE AVENUE			Policy Number:
City NEPTUNE	State New Jersey	ZIP Code 07753	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: LOCAL BENCH 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>6.32</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>12.10</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 type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  | <u>N/A</u>   | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | <u>12.43</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>5.79</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>6.03</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>5.97</u>  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |

## SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

16-170

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 HOWARD A. TRANSUE		License Number GS33541
Title PROFESSIONAL LAND SURVEYOR		<p>GS 33541 Place Seal Here <i>H.A.T.</i> 11/21/2018</p>
Company Name SCHAEFFER NASSAR SCHEIDEGG, CE, LLC		
Address 1425 CANTILLON BOULEVARD		
City MAYS LANDING	State New Jersey	

Signature *H.A.T.* Date 11-21-2018 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 VENT MODEL 816CS RATED AT 205 SQ. IN. EACH.  
ITEM C2e IS THE A.C. PAD.

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 104 MELROSE AVENUE			Policy Number:	
City NEPTUNE	State New Jersey	ZIP Code 07753	Company NAIC Number	
<b>SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)</b>				
<small>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.</small>				
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 _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG. b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> 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 _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E3. Attached garage (top of slab) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown. The local official must certify this information in Section G.				
<b>SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION</b> <span style="float: right;">16-170</span>				
<small>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.</small>				
Property Owner or Owner's Authorized Representative's Name				
Address	City	State	ZIP Code	
Signature	Date	Telephone		
Comments				
<input type="checkbox"/> Check here if attachments.				

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

FEMA Form 086-0-33 (7/15) Replaces all previous editions. Form Page 4 of 6

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

**ELEVATION CERTIFICATE****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.  
104 MELROSE AVENUE

Policy Number:

City  
NEPTUNEState  
New JerseyZIP Code  
07753

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.

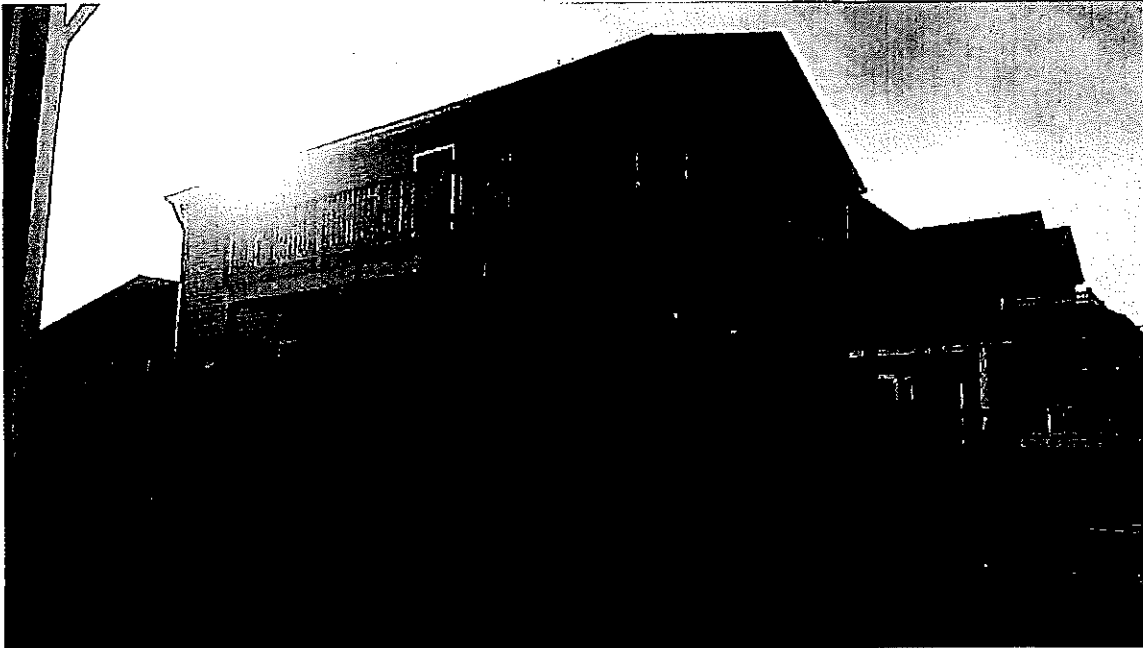


Photo One

Photo One Caption FRONT VIEW AND LEFT SIDE VIEW

16-170

Clear Photo One

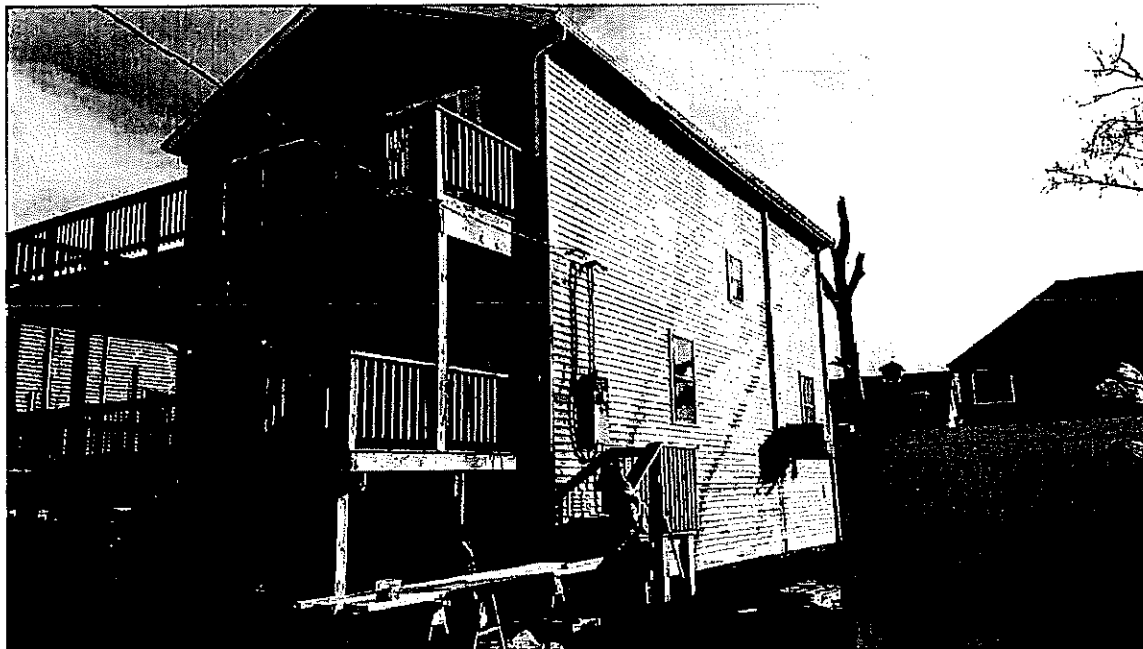


Photo Two

Photo Two Caption FRONT VIEW AND RIGHT SIDE VIEW

Clear Photo Two

# ELEVATION CERTIFICATE

## BUILDING PHOTOGRAPHS

Continuation Page

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.  
104 MELROSE AVENUE

Policy Number:

City  
NEPTUNE

State  
New Jersey

ZIP Code  
07753

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.

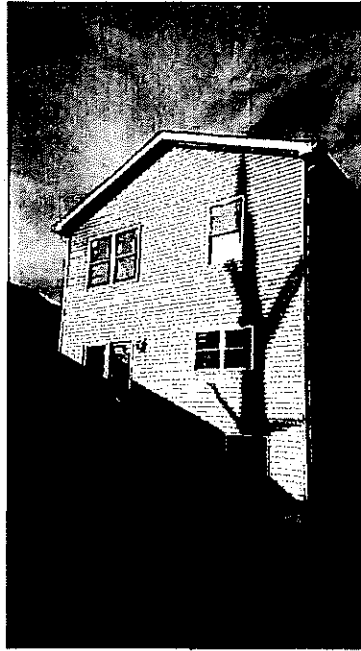


Photo Three

Photo Three Caption REAR VIEW

16-170

Clear Photo Three



Photo Four

Photo Four Caption CRAWL SPACE DOOR SYSTEMS FLOOD VENT MODEL 816CS TYPICAL OF 6

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 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 ( $A_e$ ). 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 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.

## Installation Requirements and Limitations

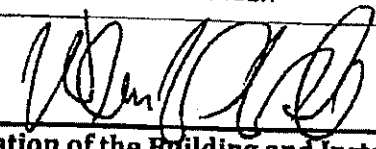
This certification will be voided if the following installation requirements and limitations are not enforced:

- 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 and fall are less than 5 feet per hour.

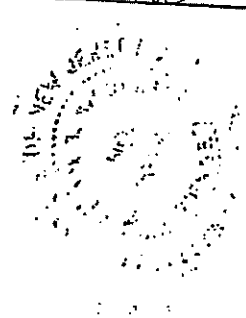
*)	Model	H x W [in]	$A_o$ [in <sup>2</sup> ]	$A_e$ [ft <sup>2</sup> ]
<input checked="" type="checkbox"/>	816CS	8 x 16	105	205
<input type="checkbox"/>	1220CS	12 x 20	235	500
<input type="checkbox"/>	1232CS	12 x 32	305	645
<input type="checkbox"/>	1616CS	16 x 16	180	395
<input type="checkbox"/>	1624CS	16 x 24	310	670
<input type="checkbox"/>	1632CS	16 x 32	405	835
<input type="checkbox"/>	2032CS	20 x 32	630	1240
<input type="checkbox"/>	2424CS	24 x 24	570	1230
<input type="checkbox"/>	2436CS	24 x 36	850	1765

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 ( $A_o$ )

## Certifying Design Professional

Name	WILLIAM S. SWIDERSKI, P.E.	Title	ENGINEER
Company	SWIDERSKI ASSOCIATES		
Address	599 SHORE ROAD SOMERS POINT, NJ		
License	PROFESSIONAL ENGINEER	License No.	24GE02048200
Signature:		Date:	11-10-17

16-170



## Identification of the Building and Installed Flood Vents (By Others)

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

Building Address  
104 MELROSE AVENUE, NEPTUNE, NJ 07753



**Important:** Follow the instructions on pages 1–9.

SECTION A - PROPERTY INFORMATION				FOR INSURANCE COMPANY USE	
A1. Building Owner's Name SHARK RIVER BEACH & YACHT CLUB				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 360 SOUTH RIVERSIDE DR.				Company NAIC Number:	
City NEPTUNE		State New Jersey		ZIP Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 14 IN BLOCK 402					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>NON- RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>40°11'10.7"</u> Long. <u>-74°02'23.6"</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>759</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>3</u>					
c) Total net area of flood openings in A8.b <u>600</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>          </u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>          </u>					
c) Total net area of flood openings in A9.b <u>          </u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number NEPTUNE TOWNSHIP 340317			B2. County Name MONMOUTH		B3. State New Jersey
B4. Map/Panel Number 34025C0341	B5. Suffix F	B6. FIRM Index Date 09/25/2009	B7. FIRM Panel Effective/ Revised Date 09/25/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9
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: <u>          </u>					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: <u>          </u>					
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: <u>          </u> <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.**Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
360 SOUTH RIVERSIDE DR.**FOR INSURANCE COMPANY USE**

Policy Number:

City  
NEPTUNEState  
New JerseyZIP Code  
07753

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

## BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
360 SOUTH RIVERSIDE DR.

**FOR INSURANCE COMPANY USE**

Policy Number:

City  
NEPTUNE

State  
New Jersey

ZIP Code  
07753

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.

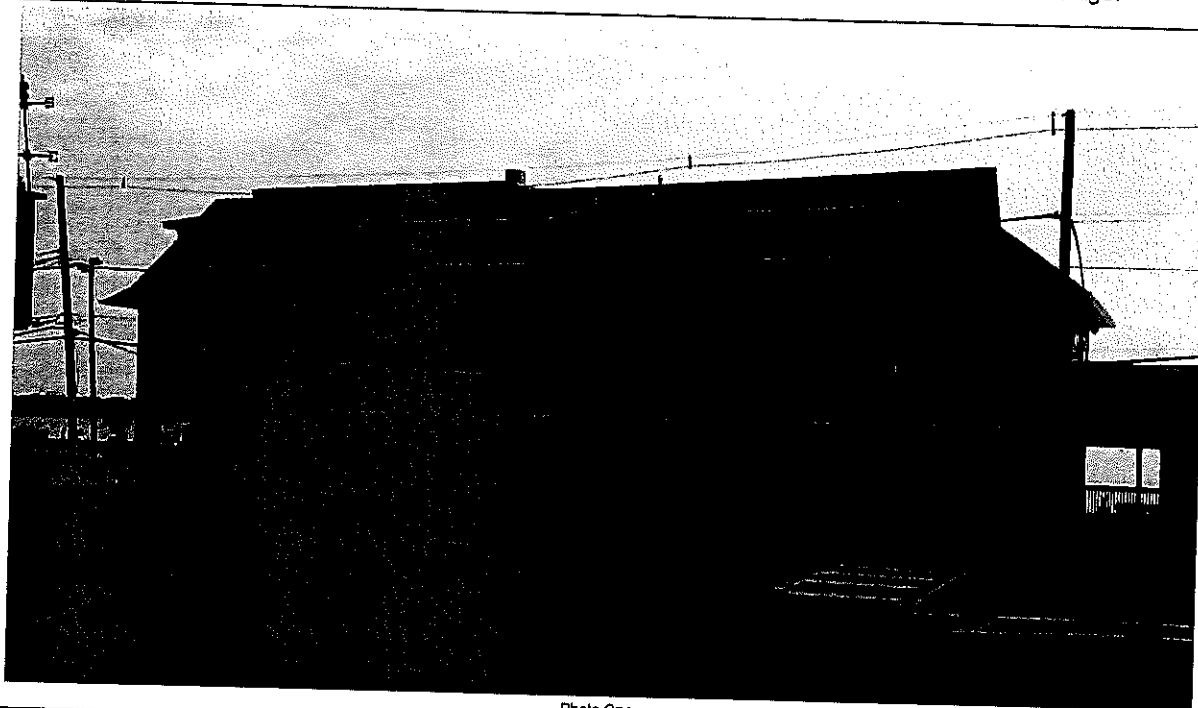


Photo One

Photo One Caption

FRONT 11-04-2016

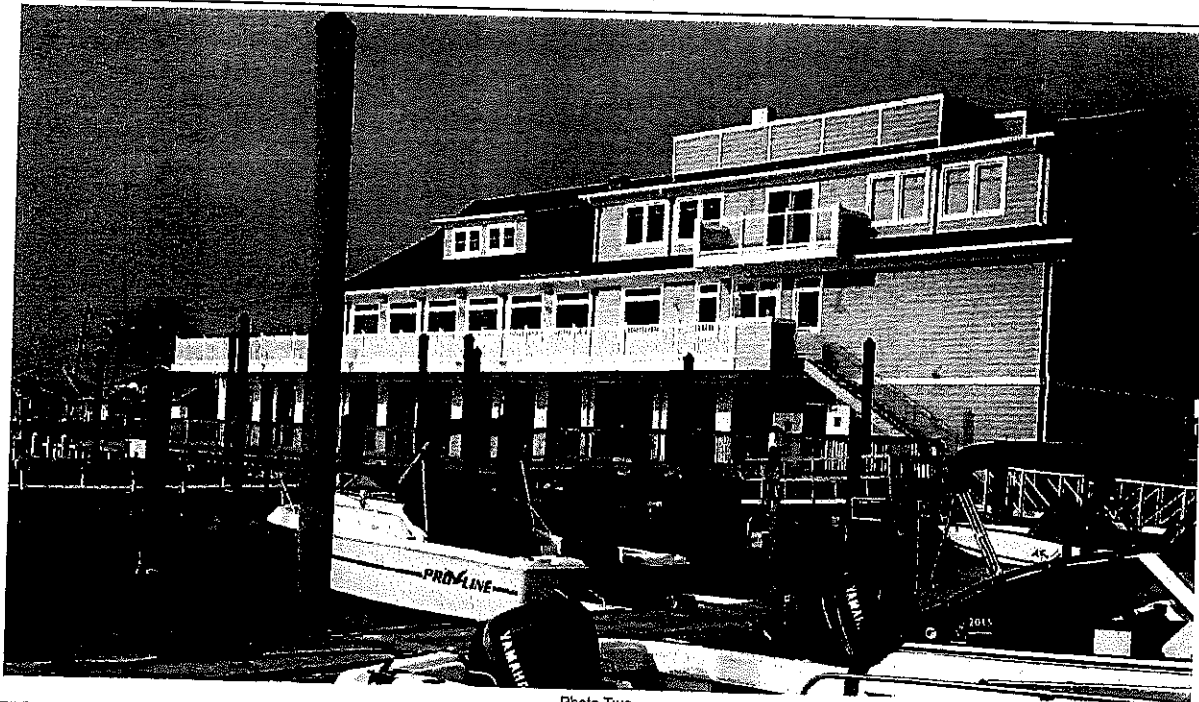


Photo Two

Photo Two Caption

REAR 11-04-2016

## V-ZONE CONSTRUCTION CERTIFICATE

Building Permit No. \_\_\_\_\_ Owner: SRBYC

Street Address: 360 S. Riverside Drive

City: Neptune State: NJ Zip: 07753

\*\*\*\*\*

### Section I - Elevation Information

- |    |   |                          |
|----|---|--------------------------|
| 1. | Bottom of the Lowest Horizontal Structural Member | <u>15.8</u> ft.          |
| 2. | Base Flood Elevation                              | <u>12</u> ft.            |
| 3. | Flood Protection Elevation                        | <u>6.1</u> <u>15</u> ft. |
| 4. | Elevation of Highest Adjacent Grade               | <u>6.1</u> ft.           |
| 5. | Elevation of Lowest Adjacent Grade                | <u>5.3</u> ft.           |
| 6. | Elevation of Bottom of Pilings or Foundation      | <u>      </u> ft.        |

\*\*\*\*\*

### Section II - V-Zone Certification Statement

I certify that based upon development and/or review of structural design, specifications, and plans for construction including consideration of the hydrostatic, hydrodynamic and impact loading involved, that the design and methods of construction are in accordance with accepted standards of practice for meeting the following provisions:

The bottom of the lowest horizontal structural member of the lowest floor (excluding the pilings or columns) is elevated to or above the Flood Protection Elevation (F.P.E.).

The pile or column foundation and structure attached thereto is anchored to resist flotation, collapse and lateral movement due to the effects of wind and water loads acting simultaneously on all building components.

\*\*\*\*\*

### Section III - Breakaway Wall Certification Statement

I certify that based upon development and/or review of structural design, specifications, and plans for construction that the design and methods of construction of the breakaway walls are in accordance with accepted standards of practice for meeting the following provisions:

Breakaway collapse shall result from a safe design loading 20 pounds per square foot. Said walls are capable of resisting a safe design loading of 10 pounds per square foot.

The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all building components.

The space below the lowest floor is useable solely for parking of vehicles, building access and storage.

\*\*\*\*\*

### Section IV - Certification

Check one: Section II \_\_\_\_\_ Section III \_\_\_\_\_ Sections II and III X

Certifier's Name: Jonathan T. Miller, P.E.

Title: Professional Engineer License Number: 24GE05151600

Company Name: R.C. Burdick, P.E., P.C.

Street Address: 1023 Ocean Road

City: Point Pleasant State: N.J. Zip: 08742

Signature:  Telephone: 732-892-5050

## 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 JEFFREY & JUDITH TAKACH				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 411 S. RIVERSIDE DRIVE				Company NAIC Number:	
City NEPTUNE TOWNSHIP		State New Jersey		ZIP Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX MAP LOT 12 BLOCK 5409					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>N 40 11 10.00</u> Long. <u>W 74 02 35.95</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>7</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>605</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>4</u>					
c) Total net area of flood openings in A8.b <u>512</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>400</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>2</u>					
c) Total net area of flood openings in A9.b <u>256</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number NEPTUNE TOWNSHIP 340317			B2. County Name MONMOUTH		B3. State New Jersey
B4. Map/Panel Number 34025C0341	B5. Suffix F	B6. FIRM Index Date 09/25/2009	B7. FIRM Panel Effective/ Revised Date 09/25/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9
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 type="checkbox"/> NGVD 1929 <input checked="" 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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 411 S. RIVERSIDE DRIVE			Policy Number:
City NEPTUNE TOWNSHIP	State New Jersey	ZIP Code 07753	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: R.M. # 28 OLD FIRM 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>8.3</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>16.8</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>8.3</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | <u>16.5</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>8.13</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>9.5</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>8.13</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 K. LYNCH LS

License Number  
GS 35855

Title  
LAND SURVEYOR


Company Name  
PAUL K. LYNCH LS

Address  
P.O. BOX 1453

City  
WALL

State  
New Jersey

ZIP Code  
07719

Signature  


Date  
08/11/2017

Telephone  
(732) 681-4035

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)

A8,A9 TOTAL FOUNDATION OUTLINE IS 1005 SF, OF THAT GARAGE AREA APPROX. 400 SF  
A8c,A9c ALL OPENINGS HAVE "SMART" VENT MODEL 1540-510 INSTALLED, MANUFACTURER CERTIFIES EACH ONE COVERS 200 SF (ENCLOS. AREA COVERAGE 800 SF, GARAGE AREA COVERAGE 400 SF) NET AREAS SHOWN ARE ROUGH OPENINGS 8" x 16" EACH

C2e ELEVATION SHOWN IS A.C. PLATFORM BESIDE STRUCTURE  
PRELIMINARY FIRM 34025C0341G DATED 1-30-2015 SHOWS STRUCTURE IN ZONE AE BFE = 10

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 411 S. RIVERSIDE DRIVE			Policy Number:
City NEPTUNE TOWNSHIP	State New Jersey	ZIP Code 07753	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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 411 S. RIVERSIDE DRIVE			Policy Number:
City NEPTUNE TOWNSHIP	State New Jersey	ZIP Code 07753	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	Title
-----------------------	-------

Community Name	Telephone
----------------	-----------

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.

OMB No. 1660-0008

Expiration Date: November 30, 2018

**ELEVATION CERTIFICATE****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.  
411 S. RIVERSIDE DRIVE

Policy Number:

City  
NEPTUNE TOWNSHIPState  
New JerseyZIP Code  
07753

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 LEFT FRONT



Photo Two

Photo Two Caption RIGHT FRONT

**BUILDING PHOTOGRAPHS****ELEVATION CERTIFICATE**

Continuation Page

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.  
411 S. RIVERSIDE DRIVE

Policy Number:

City  
NEPTUNE TOWNSHIPState  
New JerseyZIP Code  
07753

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.

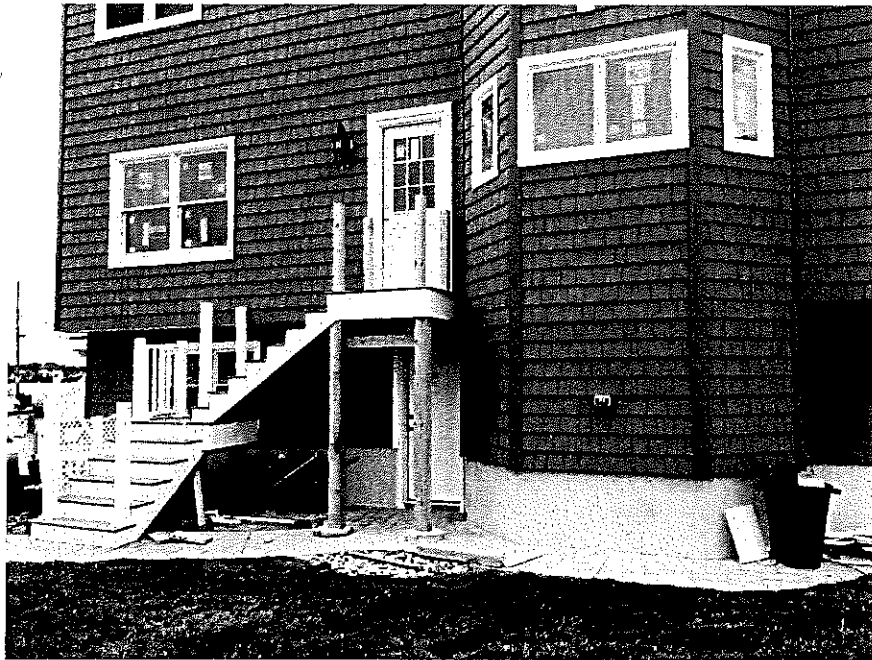


Photo One

Photo One Caption REAR

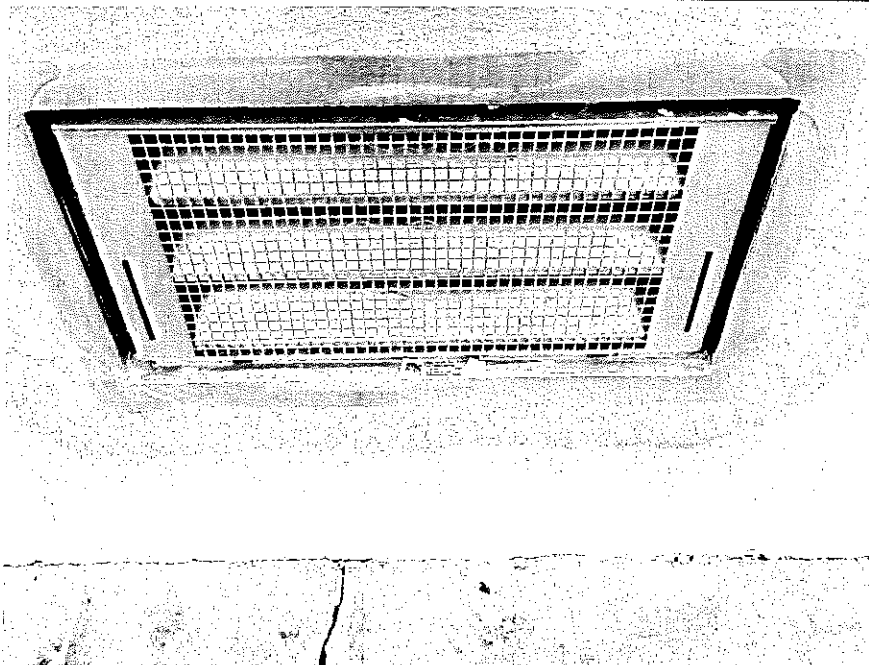


Photo Two

Photo Two Caption FLOOD VENT (TYP.)

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expiration Date: July 31, 2015

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name PATRICK H. & JUDITH M. HUGHES

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
506 WEST CONCOURSE

City NEPTUNE

State NJ

ZIP Code 07753

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
TAX BLOCK 553, TAX LOT 2

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat. 40.191755 N Long. 074.027436 W

Horizontal Datum: ☐ NAD 1927 ☒ 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 2

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) 783 sq ft  
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 5  
c) Total net area of flood openings in A8.b 2,117 sq in  
d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

- a) Square footage of attached garage N/A sq ft  
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  
c) Total net area of flood openings in A9.b N/A sq in  
d) Engineered flood openings? ☐ Yes ☐ No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
NEPTUNE CITY, BOROUGH OF 340316

B2. County Name  
MONMOUTH

B3. State  
NEW JERSEY

B4. Map/Panel Number  
0334

B5. Suffix  
F

B6. FIRM Index Date  
SEPT 25, 2009

B7. FIRM Panel  
Effective/Revised Date  
SEPT. 25, 2009

B8. Flood  
Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
9

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 ☒ NAVD 1988 ☐ Other/Source: \_\_\_\_\_

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 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: KV6262

Vertical Datum: 9.02

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) 3.44 ☒ feet ☐ meters  
b) Top of the next higher floor 10.42 ☒ feet ☐ meters  
c) Bottom of the lowest horizontal structural member (V Zones only) N/A ☐ feet ☐ meters  
d) Attached garage (top of slab) N/A ☐ feet ☐ meters  
e) Lowest elevation of machinery or equipment servicing the building 5.94 ☒ feet ☐ meters  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) 7.30 ☒ feet ☐ meters  
g) Highest adjacent (finished) grade next to building (HAG) 7.45 ☒ feet ☐ meters  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 7.16 ☒ feet ☐ 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.

☐ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a  
☐ Check here if attachments. licensed land surveyor? ☒ Yes ☐ No

Certifier's Name THOMAS M. MURPHY

License Number NJ PLS 17788

Title DIR. OF SURVEYING

Company Name NELSON ENGINEERING ASSOCIATES, INC

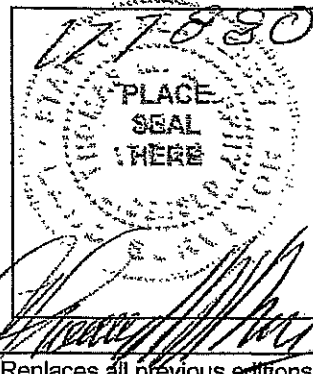
Address 1750 BLOOMSBURY AVENUE, CITY OCEAN

State NJ ZIP Code 07712

Signature

Date 8-13-2013

Telephone 732-918-2180









**Building Photographs**

See Instructions for Item A6.

**IMPORTANT:** In these spaces, copy the corresponding information from Section A.Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
506 WEST CONCOURSE

City NEPTUNE

State NJ

ZIP Code 07753

FOR INSURANCE COMPANY USE

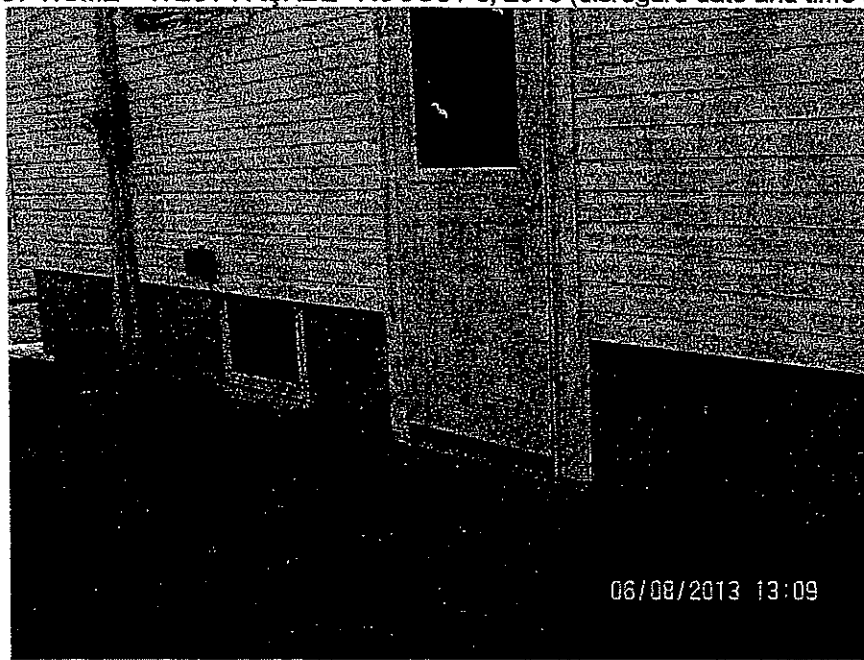
Policy Number

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.



FRONT VIEW OF HOME - WEST FAÇADE AUGUST 5, 2013 (disregard date and time stamp on photo)

LEFT SIDE - NORTH FAÇADE - ENTRY DOORWAY AND TYPICAL WINDOW TO BASEMENT  
AUGUST 5, 2013 (disregard date and time stamp on photo)



**Building Photographs**

Continuation Page

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
506 WET CONCOURSE

City NEPTUNE

State NJ

ZIP Code 07753

FOR INSURANCE COMPANY USE

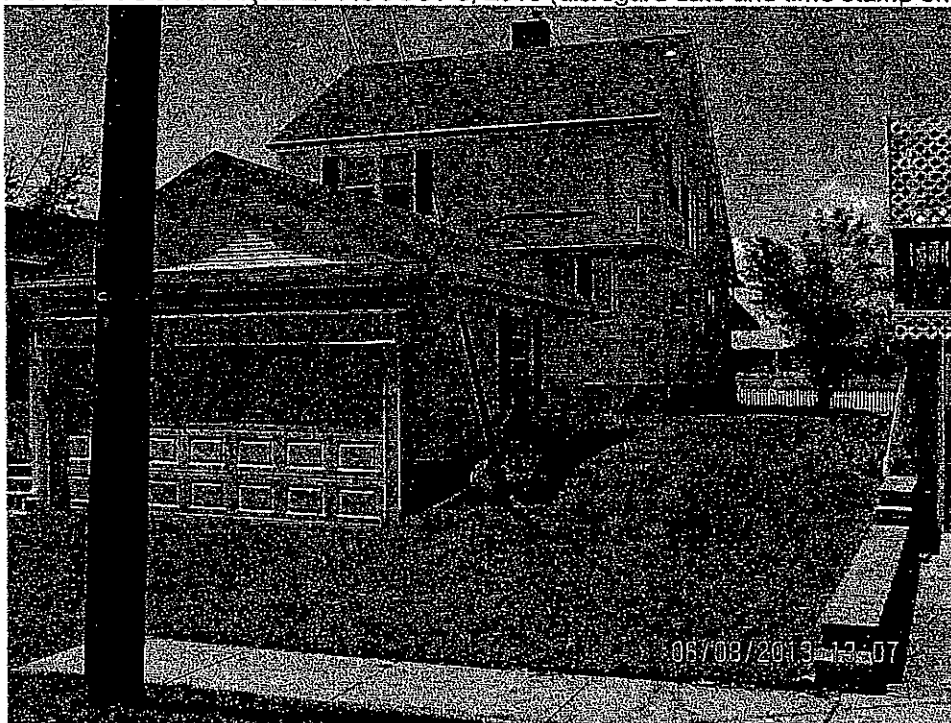
Policy Number

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.



RIGHT SIDE – SOUTH FAÇADE AUGUST 5, 2013 (disregard date and time stamp on photo)



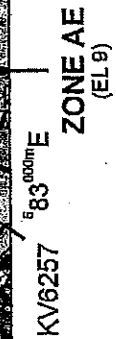
REAR VIEW – DETACHED GARAGE AUGUST 5, 2013 (disregard date and time stamp on photo)





**Federal Emergency Management Agency**

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at [www.msc.fema.gov](http://www.msc.fema.gov).



**Borough of  
Belmar  
345283**

40°11'15" 74°01'52.5"



## 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 Patrick D. Houghton and Paula S. Houghton				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 194 Maple Avenue				Company NAIC Number:	
City Neptune		State New Jersey		ZIP Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 3 Block 1703					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>40°12'35.80"</u> Long. <u>74°03'14.56"</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>2A</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>1,099</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A8.b <u>0</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>450</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 type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Township of Neptune #340317			B2. County Name Monmouth		B3. State New Jersey
B4. Map/Panel Number 34025C0333	B5. Suffix F	B6. FIRM Index Date 09/25/2009	B7. FIRM Panel Effective/ Revised Date 09/25/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 53
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 type="checkbox"/> NGVD 1929 <input checked="" 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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 194 Maple Avenue			Policy Number:
City Neptune	State New Jersey	ZIP Code 07753	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: GPS observations 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.

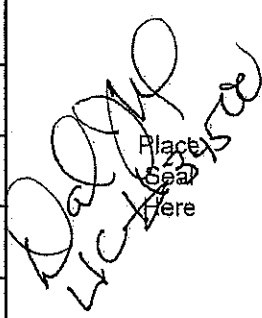
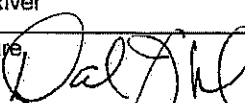
Check the measurement used.

- |  |             |  |
|--|-------------|--|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor)  | <u>51.4</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| b) Top of the next higher floor  | <u>56.9</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>55.1</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments): | <u>52.7</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG):  | <u>52.7</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)  | <u>55.2</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>53.4</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 David J. Von Steenburg, P.L.S.	License Number 34500	 Place Seal Here
Title P.L.S.		
Company Name Morgan Engineering, LLC		
Address P.O. Box 5232		
City Toms River	State New Jersey	
Signature 	Date 06/27/2018	Telephone (732) 270-9690

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)

The dwelling sits on a basement. The furnace is lifted in the basement at elevation 52.7'. The air conditioner unit sits outside at elevation 52.7'. The non-engineered vents are non-compliant (They must be permanently fixed in the 'open' position). Latitude and longitude recorded from Google Earth. Benchmark elevation established through GPS observations and Leica RTK Network. (Preliminary FEMA Zone/Elev - AE 53 [34025C0333G - Revised Preliminary January 30, 2015])

(18-05543)

# ELEVATION CERTIFICATE

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 194 Maple Avenue			Policy Number:
City Neptune	State New Jersey	ZIP Code 07753	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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 194 Maple Avenue			Policy Number:	
City Neptune	State New Jersey	ZIP Code 07753	Company NAIC Number	
<b>SECTION G – COMMUNITY INFORMATION (OPTIONAL)</b>				
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. <input type="checkbox"/> 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. <input type="checkbox"/> 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. <input type="checkbox"/> 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: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement				
G8. Elevation of as-built lowest floor (including basement) of the building: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____				
G9. BFE or (in Zone AO) depth of flooding at the building site: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____				
G10. Community's design flood elevation: _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____				
Local Official's Name		Title		
Community Name		Telephone		
Signature		Date		
Comments (including type of equipment and location, per C2(e), if applicable)				
<input type="checkbox"/> Check here if attachments.				

# ELEVATION CERTIFICATE

## BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 194 Maple Avenue			Policy Number:
City Neptune	State New Jersey	ZIP Code 07753	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 (06/27/2018)



Photo Two

Photo Two Caption Rear view (06/27/2018)

# ELEVATION CERTIFICATE

## BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 194 Maple Avenue			Policy Number:
City Neptune	State New Jersey	ZIP Code 07753	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 Non-compliant non-engineered vent (06/27/2018)

Photo Two

Photo Two

Photo Two Caption

OCT 3 2019

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 David G. Bennett & Laura J. Bennett				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 105 Clinton Place				Company NAIC Number:	
City Neptune		State New Jersey		ZIP Code 07753	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 5414 Lot 8					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>					
A5. Latitude/Longitude: Lat. <u>40°11'17.04"</u> Long. <u>74°02'20.33"</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>7</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>711.00</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>4</u>					
c) Total net area of flood openings in A8.b <u>800.00</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>460.00</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>3</u>					
c) Total net area of flood openings in A9.b <u>600.00</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Township of Neptune - 340317			B2. County Name Monmouth County		B3. State New Jersey
B4. Map/Panel Number 34025C0333	B5. Suffix F	B6. FIRM Index Date 09-25-2009	B7. FIRM Panel Effective/ Revised Date 09-25-2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 9'
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 type="checkbox"/> NGVD 1929 <input checked="" 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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 105 Clinton Place			Policy Number:
City Neptune	State New Jersey	ZIP Code 07753	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: 6.09' (Leica SmartNet) Vertical Datum: NAVD88

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.

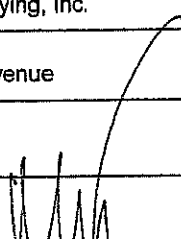
Check the measurement used.

- |   |       |  |                                 |
|---|-------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor)   | 9.68  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | 18.82 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)   | N/A   | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  | 9.20  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | 13.06 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | 8.50  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | 9.23  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | 9.48  | <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 Marc J. Cifone	License Number 24GS04132900	<b>Place Seal Here</b>	
Title President			
Company Name Lakeland Surveying, Inc.			
Address 117 Hibernia Avenue			
City Rockaway	State New Jersey		
	ZIP Code 07866		
Signature 	Date 10-02-2019	Telephone (973) 625-5670	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)

Monmouth County, NJ - Preliminary FIRM Map No. 34025C0333G revised January 30, 2015 - Zone AE / BFE 10' (NAVD88)  
C2. e) AC unit  
Furnace elev. 15.44  
Smart Vent Model No. 1540-520



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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 105 Clinton Place			Policy Number:	
City Neptune	State New Jersey	ZIP Code 07753	Company NAIC Number	
<b>SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)</b>				
<small>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.</small>				
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 _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG. b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> 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 _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E3. Attached garage (top of slab) is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is _____ <input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown. The local official must certify this information in Section G.				
<b>SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION</b>				
<small>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.</small>				
Property Owner or Owner's Authorized Representative's Name				
Address	City	State	ZIP Code	
Signature	Date	Telephone		
Comments				
<input type="checkbox"/> Check here if attachments.				



# ELEVATION CERTIFICATE

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 105 Clinton Place			Policy Number:	
City Neptune	State New Jersey	ZIP Code 07753	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	Title
Community Name	Telephone
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.

OMB No. 1660-0008

Expiration Date: November 30, 2018

## ELEVATION CERTIFICATE

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 105 Clinton Place			Policy Number:
City Neptune	State New Jersey	ZIP Code 07753	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 LEFT - October 1, 2019

Clear Photo One



Photo Two

Photo Two Caption REAR LEFT - October 1, 2019

Clear Photo Two



# BUILDING PHOTOGRAPHS

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

## ELEVATION CERTIFICATE

Continuation Page

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 105 Clinton Place			Policy Number:
City Neptune	State New Jersey	ZIP Code 07753	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 Three

Photo Three Caption FRONT RIGHT - October 1, 2019

Clear Photo Three

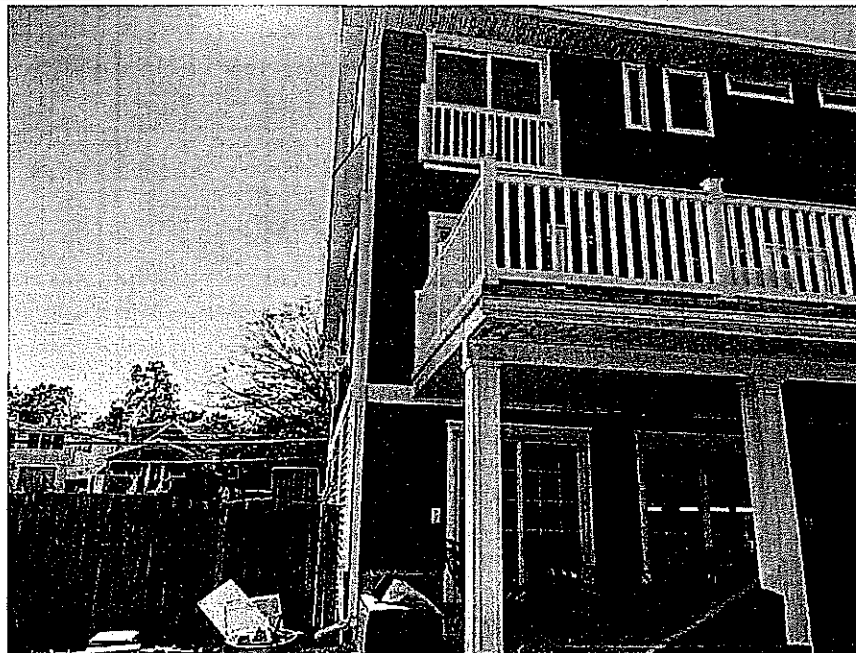


Photo Four

Photo Four Caption REAR RIGHT - October 1, 2019

Clear Photo Four









ICC  
EVALUATION  
SERVICE

In Cooperation with



*Most Widely Accepted and Trusted*

# ICC-ES Evaluation Report

ICC-ES | (800) 423-6587 | (562) 699-0543 | [www.icc-es.org](http://www.icc-es.org)

## ESR-2074

Reissued 02/2017

This report is subject to renewal 02/2019.

DIVISION: 08 00 00—OPENINGS

SECTION: 08 95 43—VENTS/FOUNDATION FLOOD VENTS

REPORT HOLDER:

**SMARTVENT PRODUCTS, INC.**

430 ANDBRO DRIVE, UNIT 1  
PITMAN, NEW JERSEY 08071

EVALUATION SUBJECT:

**SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS: MODELS #1540-520;  
#1540-521; #1540-510; #1540-511; #1540-570; #1540-574; #1540-524; #1540-514**



Look for the trusted marks of Conformity!

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# ICC-ES Evaluation Report

**ESR-2074**

Reissued February 2017

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A Subsidiary of the International Code Council®

DIVISION: 08 00 00—OPENINGS

Section: 08 95 43—Vents/Foundation Flood Vents

## REPORT HOLDER:

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## EVALUATION SUBJECT:

SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS;  
MODELS #1540-520; #1540-521; #1540-510; #1540-511;  
#1540-570; #1540-574; #1540-524; #1540-514

## 1.0 EVALUATION SCOPE

Compliance with the following codes:

- 2015, 2012, 2009 and 2006 *International Building Code*® (IBC)
- 2015, 2012, 2009 and 2006 *International Residential Code*® (IRC)
- 2013 *Abu Dhabi International Building Code* (ADIBC)<sup>†</sup>

<sup>†</sup>The ADIBC is based on the 2009 IBC. 2009 IBC code sections referenced in this report are the same sections in the ADIBC.

Properties evaluated:

- Physical operation
- Water flow

## 2.0 USES

The Smart Vent® units are engineered mechanically operated flood vents (FVs) employed to equalize hydrostatic pressure on walls of enclosures subject to rising or falling flood waters. Certain models also allow natural ventilation.

## 3.0 DESCRIPTION

### 3.1 General:

When subjected to rising water, the Smart Vent® FVs internal floats are activated, then pivot open to allow flow in either direction to equalize water level and hydrostatic pressure from one side of the foundation to the other. The FV pivoting door is normally held in the closed position by a buoyant release device. When subjected to rising water,

the buoyant release device causes the unit to unlatch, allowing the door to rotate out of the way and allow flow. The water level stabilizes, equalizing the lateral forces. Each unit is fabricated from stainless steel. Smart Vent® Automatic Foundation Flood Vents are available in various models and sizes as described in Table 1. The SmartVENT® Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 units each contain two vertically arranged openings per unit.

### 3.2 Engineered Opening:

The FVs comply with the design principle noted in Section 2.7.2.2 and Section 2.7.3 of ASCE/SEI 24-14 [Section 2.6.2.2 of ASCE/SEI 24-05 (2012, 2009, 2006 IBC and IRC)] for a maximum rate of rise and fall of 5.0 feet per hour (0.423 mm/s). In order to comply with the engineered opening requirement of ASCE/SEI 24, Smart Vent FVs must be installed in accordance with Section 4.0.

### 3.3 Ventilation:

The SmartVENT® Model #1540-510 and SmartVENT® Overhead Door Model #1540-514 both have screen covers with 1/4-inch-by-1/4-inch (6.35 by 6.35 mm) openings, yielding 51 square inches (32 903 mm<sup>2</sup>) of net free area to supply natural ventilation. The SmartVENT® Stacking Model #1540-511 consists of two Model #1540-510 units in one assembly, and provides 102 square inches (65 806 mm<sup>2</sup>) of net free area to supply natural ventilation. Other FVs recognized in this report do not offer natural ventilation.

## 4.0 DESIGN AND INSTALLATION

SmartVENT® and FloodVENT® are designed to be installed into walls or overhead doors of existing or new construction from the exterior side. Installation of the vents must be in accordance with the manufacturer's instructions, the applicable code and this report. Installation clips allow mounting in masonry and concrete walls of any thickness. In order to comply with the engineered opening design principle noted in Section 2.7.2.2 and 2.7.3 of ASCE/SEI 24-14 [Section 2.6.2.2 of ASCE/SEI 24-05 (2012, 2009, 2006 IBC and IRC)], the Smart Vent® FVs must be installed as follows:

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one FV for every 200 square feet (18.6 m<sup>2</sup>) of enclosed area, except that the SmartVENT® Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 must be



Installed with a minimum of one FV for every 400 square feet (37.2 m<sup>2</sup>) of enclosed area.

- Below the base flood elevation.
- With the bottom of the FV located a maximum of 12 inches (305.4 mm) above the higher of the final grade or floor and finished exterior grade immediately under each opening.

## 5.0 CONDITIONS OF USE

The Smart Vent® FVs described in this report comply with, or are suitable alternatives to what is specified in, those codes listed in Section 1.0 of this report, subject to the following conditions:

- 5.1 The Smart Vent® FVs 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 Smart Vent® FVs must not be used in the 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 Smart VENT® models recognized in this report must be identified by a label bearing the manufacturer's name (Smartvent Products, Inc.), the model number, and the evaluation report number (ESR-2074).

TABLE 1—MODEL SIZES

MODEL NAME	MODEL NUMBER	MODEL SIZE (in.)	COVERAGE (sq. ft.)
FloodVENT®	1540-520	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
SmartVENT®	1540-510	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
FloodVENT® Overhead Door	1540-524	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
SmartVENT® Overhead Door	1540-514	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
Wood Wall FloodVENT®	1540-570	14" X 8 <sup>3</sup> / <sub>4</sub> "	200
Wood Wall FloodVENT® Overhead Door	1540-574	14" X 8 <sup>3</sup> / <sub>4</sub> "	200
SmartVENT® Stacker	1540-511	16" X 16"	400
FloodVent® Stacker	1540-521	16" X 16"	400

For SI: 1 inch = 25.4 mm; 1 square foot = m<sup>2</sup>



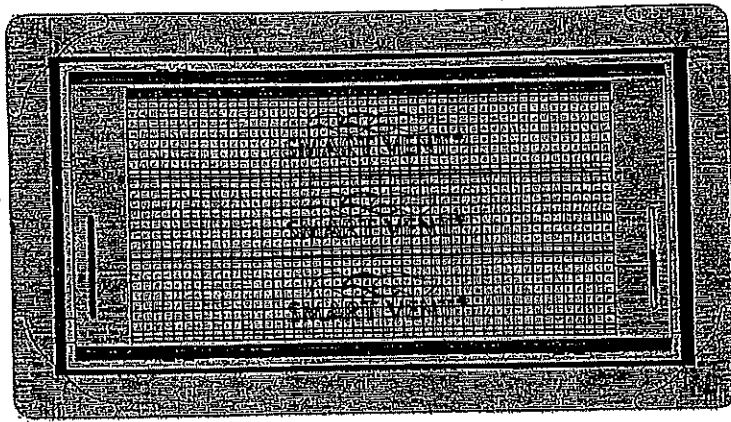


FIGURE 1—SMART VENT: MODEL 1540-510

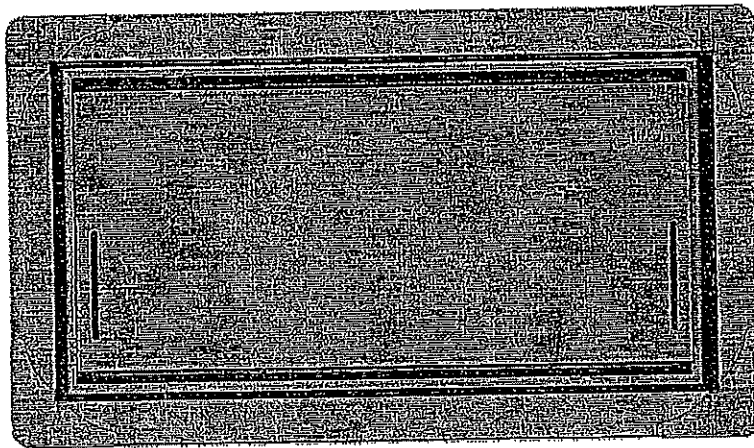


FIGURE 2—SMART VENT MODEL 1540-520

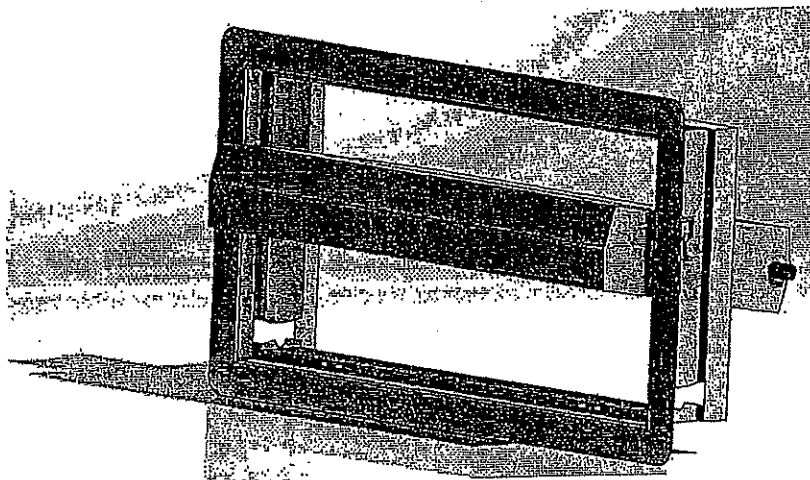


FIGURE 3—SMART VENT: SHOWN WITH FLOOD DOOR PIVOTED OPEN



## ICC-ES Evaluation Report

## ESR-2074 CBC and CRC Supplement

Issued February 2017

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### EVALUATION SUBJECT:

SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS: MODELS #1540-520; #1540-521; #1540-510; #1540-511; #1540-570; #1540-574; #1540-524; #1540-514

### 1.0 REPORT PURPOSE AND SCOPE

#### Purpose:

The purpose of this evaluation report supplement is to indicate that Smart Vent® Automatic Foundation Flood Vents, recognized in ICC-ES master evaluation report ESR-2074, have also been evaluated for compliance with codes noted below.

#### Applicable code edition:

- 2016 California Building Code (CBC)
- 2016 California Residential Code (CRC)

### 2.0 CONCLUSIONS

#### 2.1 CBC:

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the master evaluation report ESR-2074, comply with 2016 CBC Chapter 12, provided the design and installation are in accordance with the 2015 *International Building Code*® (IBC) provisions noted in the master report and the additional requirements of CBC Chapters 12, 16 and 16A, as applicable.

The products recognized in this supplement have not been evaluated under CBC Chapter 7A for use in the exterior design and construction of new buildings located in any Fire Hazard Severity Zone within State Responsibility Areas or any Wildland-Urban Interface Fire Area.

#### 2.2 CRC:

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the master evaluation report ESR-2074, comply with the 2016 CRC, provided the design and installation are in accordance with the 2015 *International Residential Code*® (IRC) provisions noted in the master report.

The products recognized in this supplement have not been evaluated under 2016 CRC Chapter R337, for use in the exterior design and construction of new buildings located in any Fire Hazard Severity Zone within State Responsibility Areas or any Wildland-Urban Interface Fire Area.

The products recognized in this supplement have not been evaluated for compliance with the International Wildland-Urban Interface Code®.

This supplement expires concurrently with the master report, reissued February 2017 and revised November 2017.



**ICC-ES Evaluation Report****ESR-2074 FBC Supplement**

Reissued February 2017

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**EVALUATION SUBJECT:**

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**1.0 REPORT PURPOSE AND SCOPE****Purpose:**

The purpose of this evaluation report supplement is to indicate that Smart Vent® Automatic Foundation Flood Vents, recognized in ICC-ES master report ESR-2074, have also been evaluated for compliance with the codes noted below.

**Applicable code editions:**

- 2017 *Florida Building Code—Building*
- 2017 *Florida Building Code—Residential*

**2.0 CONCLUSIONS**

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the master evaluation report ESR-2074, comply with the *Florida Building Code—Building* and the FRC, provided the design and installation are in accordance with the 2015 *International Building Code®* provisions noted in the master report.

Use of the Smart Vent® Automatic Foundation Flood Vents has also been found to be in compliance with the High-Velocity Hurricane Zone provisions of the *Florida Building Code—Building* and the *Florida Building Code—Residential*.

For products falling under Florida Rule 9N-3, verification that the report holder's quality assurance program is audited by a quality assurance entity approved by the Florida Building Commission for the type of inspections being conducted is the responsibility of an approved validation entity (or the code official when the report holder does not possess an approval by the Commission).

This supplement expires concurrently with the master report, reissued February 2017 and revised November 2017.

