ELEVATION CERTIFICATE

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

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July

SECTION A – PROPERTY INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name JAMES & MAUREEN BRENNAN	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1804 ATLANTIC AVENUE	Company NAIC Number:
City LONGPORT State NJ ZIP Code 08403	Control Marie Control
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 14 LOT 13	SEP -3 2015
 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 atta a) Square footage of crawlspace or enclosure(s) 900 sq ft a) Square footage of attach 	iched garage — <u>NA</u> sq ft flood openings in the attached garage idjacent grade <u>NA</u> openings in A9.b <u>NA</u> sq in ings?
B1. NFIP Community Name & Community Number LONGPORT 345302 B2. County Name ATLANTIC	B3. State NJ
B4. Map/Panel Number 345302 0001 B5. Suffix B6. FIRM Index Date 8/15/83 B7. FIRM Panel Effective/Revised Date 8/15/83 B8. Flood Zone(s) A8	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10
☐ 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* *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: NGVD 1929 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 bosons of	ine measurement used. ☑ feet □ meters
b) Top of the next higher floor 16.52	☑ feet ☐ meters
	feet meters
Land Land Land Land Land Land Land Land	☐ feet ☐ meters ☐ feet ☐ meters
f) Lowest adjacent (finished) grade next to building (LAG) 6.13	₫ feet ☐ meters
b) I overest addressed and a state of the st	☐ feet ☐ meters ☐ 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. '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 ROBERT R. STOUT License Number 38421 Title PLS, PE Company Name STOUT & CALDWELL ENGINEERS	
Address 705 ROUTE 130 SOUTH City CINNAMINSON State NJ ZIP Code 08077	
Date 9/2/18 Telephone 8567862202	

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: 1804 ATLANTIC AVENUE City LONGPORT State NJ ZIP Code 08403 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) - AIR CONDITIONING UNIT LOCATED OUTSIDE ON RAISED PLATFORM. A8(b-d) - FLOOD OPENINGS ARE SMART VENTS ENGINEERED TO PROVIDE COVERAGE FOR 200 SQUARE FEET EACH. Signature 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. 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. ☐ feet ☐ meters ☐ above or ☐ below the LAG. b) Top of bottom floor (including basement, crawlspace, or enclosure) is 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. 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. 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. 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.) A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO. The following information (Items G4-G10) is provided for community floodplain management purposes. G3. 🗌 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 Elevation of as-built lowest floor (including basement) of the building: ☐ meters ☐ feet 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, page 3

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. 1804 ATLANTIC AVENUE

Policy Number:

City LONGPORT

State NJ

ZIP Code 08403

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.



ELEVATION CERTIFICATE, page 4

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. 1804 ATLANTIC AVENUE

Policy Number:

City LONGPORT

State

ZIP Code

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.

