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

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SECTION A – PROPERTY INFORMATION A1. Building Owner's Name COHEN				NSURANCE COMPANY USE
				Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 101 SOUTH 15 TH AVENUE			Compa	any NAIC Number:
City LONGPORT		IP Code 08403		10/6
A3. Property Description (Lot and Block Numbers, Tax Parce BLOCK 10 LOT 6	l Number, Legal Description	n, etc.)		SFO
 A4. Building Use (e.g., Residential, Non-Residential, Addition A5. Latitude/Longitude: Lat. 39°18'24" Long. 74°32' 00" F A6. Attach at least 2 photographs of the building if the Certific A7. Building Diagram Number 8/A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) 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 d) Engineered flood openings?	forizontal Datum: NAD sate is being used to obtain 1100 sq ft 2 7 1435 sq in	1927 NAD 1983 flood insurance. 9. For a building with an a) Square footage of b) Number of permar within 1.0 foot abo c) Total net area of fl d) Engineered flood	attached ganent flood op ve adjacent ood opening openings?	rage <u>n/a</u> sq ft enings in the attached garage grade <u>n/a</u>
SECTION B – FLOOI	INSURANCE RATE M	AP (FIRM) INFORMA	TION	
B1. NFIP Community Name & Community Number LONGPORT 345302	B2. County Name ATLANTIC		B3. Sta	
B4. Map/Panel Number B5. Suffix B6. FIRM Index 8/12/70	Date B7. FIRM Pa Effective/Revise 8/15/83		B9. I	Base Flood Elevation(s) (Zone AO, use base flood depth) 10.00
 B11. Indicate elevation datum used for BFE in Item B9: \(\simeq \) NG B12. Is the building located in a Coastal Barrier Resources System Designation Date: 		rise Protected Area (OPA		☐ Yes No
SECTION C - BUILDING	ELEVATION INFORMA	TION (SURVEY REQ	UIRED)	
 C1. Building elevations are based on: Construction D *A new Elevation Certificate will be required when construct C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1- below according to the building diagram specified in Item A7 Benchmark Utilized: RM-3 Indicate elevation datum used for the elevations in items a) Datum used for building elevations must be the same as tha 	ion of the building is comple -V30, V (with BFE), AR, AR 7. In Puerto Rico only, enter Vertical Datum: <u>NGVD</u> through h) below. ☑ NGVI	/A, AR/AE, AR/A1–A30, A meters. <u>1929</u> D 1929 □ NAVD 1988 □	AR/AH, AR/A	rce:
a) Top of bottom floor (including basement, crawlspace, or e	inclosure floor)			surement used.
b) Top of the next higher floor	nciosare noor)	<u>8.02</u> <u>13.44</u>	⊠ feet ⊠ feet	☐ meters ☐ meters
c) Bottom of the lowest horizontal structural member (V Zon	es only)	N/A	⊠ feet	meters
d) Attached garage (top of slab)		<u>N/A</u>		meters
 e) Lowest elevation of machinery or equipment servicing the (Describe type of equipment and location in Comments) 	building	<u>13.44</u>		☐ meters
f) Lowest adjacent (finished) grade next to building (LAG)		<u>7.62</u>		meters
g) Highest adjacent (finished) grade next to building (HAG)h) Lowest adjacent grade at lowest elevation of deck or stair.	s, including structural suppo	8.38 ort 8.38	⊠ feet ⊠ feet	☐ meters ☐ meters
SECTION D - SURVEYO	R, ENGINEER, OR ARG	CHITECT CERTIFICA	TION	
This certification is to be signed and sealed by a land surveyor, a information. I certify that the information on this Certificate represent understand that any false statement may be punishable by fine. Check here if comments are provided on back of form. Check here if attachments.	sents my best efforts to inte	rpret the data available. U.S. Code, Section 1001.		PLACE SEAL
Certifier's Name PANIEL J. PONZIO SR.		umber GS37603		SEAL HERE
	ARTHUR W. PONZIO COM			
Address 400 NOWTH DOVER AVENUE City ATLANTIC CI		ZIP Code 08401		
Signature Date 8/5/15	Telephone	609-344-8194		

IMPORTANT: In these spaces, copy the corresponding information from Section A.				FOR INSURANCE COMPANY USE
Building Street Address (includin 101 SOUTH 15 TH AVENUE	or P.O. Route and Box No.		Policy Number:	
City LONGPORT		State NJ ZIP Code 0	8403	Company NAIC Number:
SEC ⁻	TION D – SURVEYOR, ENGINE	ER, OR ARCHITECT CER	TIFICATION (C	ONTINUED)
Copy both sides of this Elevation	Certificate for (1) community official,	(2) insurance agent/company	, and (3) building o	owner.
6/	BOTTOM OF DUCT WORK ELEVIRM MAP FLOOD ZONE AE-9.00'		L SPACE DOOR	SYSTEMFLOOD VENT MODEL
Signature		Date 8/5/15		
SECTION E - BUILDING	ELEVATION INFORMATION (S	URVEY NOT REQUIRED)	FOR ZONE AO	AND ZONE A (WITHOUT BFE)
	E), complete Items E1–E5. If the Certural grade, if available. Check the me			
grade (HAG) and the lowes a) Top of bottom floor (inclu b) Top of bottom floor (inclu	at adjacent grade (LAG). Iding basement, crawlspace, or encloiding basement, crawlspace, or encloiding basement, crawlspace, or encloiding	osure) is	feet meters [
(elevation C2.b in the diagra	ams) of the building is	☐ feet ☐ meters ☐ abo	ove or \square below the	-9 of Instructions), the next higher floo he HAG.
E3. Attached garage (top of slalE4. Top of platform of machiner	b) is feet	meters above or below		have or Thelaw the HAC
E5. Zone AO only: If no flood d	epth number is available, is the top o	of the bottom floor elevated in a	ccordance with th	ne community's floodplain manageme
ordinance? Tes N	o i i Unknown, i ne local official m	ust certify this information in S	ection G.	
SECT	o ☐ Unknown. The local official m	OR OWNER'S REPRESEN	ITATIVE) CERT	
SECT The property owner or owner's au or Zone AO must sign here. The s	TON F – PROPERTY OWNER (Control of thorized representative who complete tatements in Sections A, B, and E are	OR OWNER'S REPRESEN	ITATIVE) CERT	TIFICATION EMA-issued or community-issued BFI
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SECT The property owner or owner's autor Zone AO must sign here. The seroperty Owner's or Owner's Authorized Owner's Authorized Signature Comments e local official who is authorized by this Elevation Certificate. Complete is authorized by law to certain is authorized by law to certain in Acommunity official compound in The following information of A. Permit Number This permit has been issued for Elevation of as-built lowest flootoness. BFE or (in Zone AO) depth of file	SECTION G – COMMI SECTION G – COMMI Value or ordinance to administer the complete of the applicable item(s) and sign below to the applicable item(s) and sign below to the applicable item(s) and sign below to the applicable item (s) and si	City Date UNITY INFORMATION (OF DIAMETICAL CONTROLL CON	PTIONAL) ment ordinance cand in Items G8–G10 sealed by a licens ation data in the Cosued or communicular purposes. Certificate Of Communication meters meters	ZIP Code Check here if attachment Check here if attachment Check here if attachment Complete Sections A, B, C (or E), and Complete Sections Complete Sect

ELEVATION CERTIFICATE, page 3

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. 101 SOUTH 15TH AVENUE

Policy Number:

City LONGPORT

State NJ

ZIP Code 08403

Company NAIC Number:

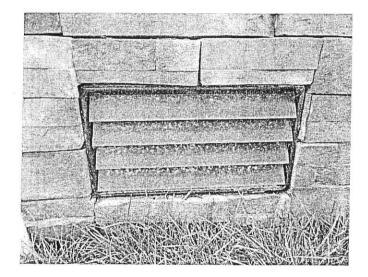
FOR INSURANCE COMPANY USE

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.

PHOTOS TAKE ON 7/7/15







Certification of Engineered Flood Openings

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

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

Design Characteristics

Section 2.6.2.2 of ASCE 24 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 respected flow rate through the individual openings between louvers; 2) the flow rate through the main frame opening in case the louver is blown out during a flood event; and 3) the flow rate of water flowing through louver blades following hydraulic short tube theory. The ultimate maximum total enclosed area (A_e) that can be serviced by a single vent has then been determined by utilizing the lowest flow rate of the three assessed scenarios for each vent and is listed in Table 1.

These values are based on the following assumptions:

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

Installation Requirements and Limitations

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

- There shall be a minimum of two openings on different sides of each enclosed area;
- The bottom of each required opening shall be no more than 1ft above the adjacent ground level;
- HxW *) Model [ft2] [in2] [in] 816CS 8 x 16 105 205 1220CS 12 x 20 235 500 1232CS 12 x 32 305 645 1616CS 16 x 16 180 395 1624CS 16 x 24 310 670 1632CS 16 x 32 405 835 2032CS 20 x 32 630 1240 2424CS 24 x 24 570 1230 2436CS 24 x 36 850 1765

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

- No temporary (e.g. during cold weather) or permanent solid cover may be placed into or over the flood vent that would block the automatic entry or exit of floodwaters at any time;
- Where analysis indicates rates of rise and fall greater than 5 ft/hr, the total enclosed area as given in Table 1 shall be reduced accordingly to account for the higher rates of rise and fall.

Identification of the Building and Installed Flood Vents

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

Certifying Design Professional

Name	WILLIAM S. SWIDERSKI, P.E.	
Title	ENGINEER	
Address	599 SHORE ROAD, SOMERS POINT, NJ 08244	
Type of License	PROFESSIONAL ENGINEER	1
License #	20482 Signature	11.
Issuing State	NEW JERSEY	4/18

