

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

514
 OMB No. 1660-0008
 Expiration Date: July 31, 2015

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name PIRAINO BUILDERS LLC

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

City BOROUGH OF LONGPORT State NJ ZIP Code 08403

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
BLOCK 51 LOT 4

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

A5. Latitude/Longitude: Lat. 39.3155 Long. -74.5235 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 g

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

- a) Square footage of crawlspace or enclosure(s) 1120* 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 1128* sq in
 d) Engineered flood openings? Yes No

A9. For a building with an attached garage:

- a) Square footage of attached garage 400** 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
BOROUGH OF LONGPORT 345302

B2. County Name
ATLANTIC COUNTY

B3. State
NJ

B4. Map/Panel Number
345302/ 0001

B5. Suffix
B

B6. FIRM Index Date
No Index Printed

B7. FIRM Panel Effective/Revised Date
08/15/1983

B8. Flood Zone(s)
A8***

B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
10***

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: private

Vertical Datum: NGVD29

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>9.5****</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | <u>13.3</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>9.2</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>11.0*****</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>8.3</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>9.7</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 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 Paul M. Koelling, PLS, CFM

License Number NJ24GS 04328800

Title Licensed Land Surveyor

Company Name Paul H. Koelling & Associates, LLC

Address 2161 Shore Road

City Linwood

State NJ ZIP Code 08221

Signature [Signature]

Date 7-16-15

Telephone (609) 927-0279

PLACE
 SEAL
 HERE

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

#2 SOUTH MANOR AVENUE

City BOROUGH OF 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

- *A8.) 1120 sq. ft. crawlspace is vented with 5 Smart Vents Model #1540-510 engineered for 200 square inches of net area PLUS 1 block opening
**A9.) 363 sq. ft. garage is vented with 2 Smart Vents Model #1540-510 engineered for 200 sq. inches.....37 sq. ft. elevator shaft
***B8 & B9.) FEMA Flood Hazard Resources Map Zone "AE".....Base Flood Elevation 9 ft. (NAVD88) converted = 10.3 ft. (NGVD29)
****C2a.) crawlspace
*****C2e.) ductwork (elev 11.0).....air units (elev 12.4 and 18.3).....furnace (elev 12.7)

Signature

[Handwritten Signature]

Date

7-16-15

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.

Table with 3 columns: 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

Continuation Page

For Insurance Company Use:

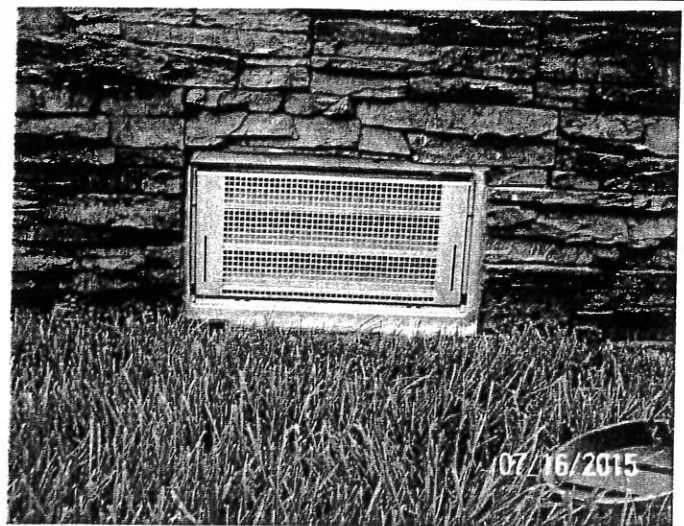
Building Street Address (including Apt., Unit, Suite, and/or Bldg.) No. or P.O. Route and Box No. 2 S. Manor Ave.			Policy Number
City Longport	State NJ	ZIP Code 08403	Company NAIC Number

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."



Front View – Date of Photograph: (See Photo Stamp)

Rear View – Date of Photograph: (See Photo Stamp)



Right Side View – Date of Photograph: (See Photo Stamp)

Vent View – Date of Photograph: (See Photo Stamp)

