S. DEPARTMENT OF HOMELAND SECURITY :DERAL EMERGENCY MANAGEMENT AGENCY ational Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

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

Vine two Parks		SECT	ON A - PRO	PERTY INFO	ORMATION	FOR INS	SURANCE COMPANY USE
1. Building Owner's Name The Sciolla's						umber:	
A2. Building Street Address	(including Apt.,	Unit, Suite, and/or B	ldg. No.) or P.	O. Route and E	Box No.	Compan	y NAIC Number.
City BOROUGH OF LO			State N		ode 08403		
A3. Property Description (L BLOCK 110 LOT 4	ot and Block Nur	nbers, Tax Parcel N	umber, Legal I	Description, etc	:.)	Access to the second	
A4. Building Use (e.g., Res A5. Latitude/Longitude: Lat A6. Attach at least 2 photog A7. Building Diagram Numl A8. For a building with a cr a) Square footage of c b) Number of permans or enclosure(s) with c) Total net area of flo d) Engineered flood of	N 39.3196 Lor graphs of the builder 8 wwlspace or enclarawlspace o	ng. W 074.5202 Hor ding if the Certificate cosure(s): closure(s) s in the crawlspace adjacent grade 8.b	izontal Datum: e is being used 1400 sq ft 8 1600 sq in	NAD 1927 to obtain flood A9. F a b	7 ⋈ NAD 1983 Hinsurance. For a building with an Square footage of Number of perma within 1.0 foot about Total net area of Engineered flood	f attached gar inent flood ope ove adjacent g flood openings openings?	age <u>N/A</u> sq ft enings in the attached garage grade <u>N/A</u>
	SECT	ION B – FLOOD	INSURANCE	RATE MAP	(FIRM) INFORMA	ATION	
B1. NFIP Community Name BOROUGH OF LONGPOR	& Community N T 345302	umber	B2. County Na ATLANTIC CO			B3. Stat	e .
B4. Map/Panel Number 345302/ 0001	B5. Suffix	B6. FIRM Index D	Effec	7. FIRM Panel tive/Revised D 08/15/1983	ate B8. Floo Zone(s A8		Base Flood Elevation(s) (Zone AO, use base flood depth) 10
10. Indicate the source of FIS Profile 11. Indicate elevation datu 12. Is the building located Designation Date:	he Base Flood E FIRM m used for BFE in a Coastal Barr	levation (BFE) data ☐ Community Dete	or base flood of ermined /D 1929	☐ Other/Sot ☐ NAVD 19	urce: 88		☐ Yes ⊠ No
		N C - BUILDING	ELEVATION	INFORMATI	ION (SURVEY RE	QUIRED)	
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) 21. 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. *A new 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: NGVD 1929* Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929* Datum used for building elevations must be the same as that used for the BFE.							
						7 <u>222</u> 7 7	asurement used.
a) Top of bottom floor (i b) Top of the next highe c) Bottom of the lowest d) Attached garage (top e) Lowest elevation of r	er floor horizontal struct of slab) nachinery or equ	ural member (V Zon	وع (es only	3812	7.0 13.3 N/A. N/A. ****	⊠ feet ⊠ feet ⊠ feet ⊠ feet ⊠ feet ⊠ feet	meters meters meters
(Describe type of eq f) Lowest adjacent (fini g) Highest adjacent (fin h) Lowest adjacent gra	shed) grade nex ished) grade nex	t to building (LAG)	rs, including st	ructural suppor	<u>6.5</u> 7.1 t <u>N/A</u> .	⊠ feet ⊠ feet ⊠ feet	☐ meters
					HITECT CERTIFIC		
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 Paul M. Koelling, PLS, CFM License Number NJ24GS 04328800						PLACE SEAL HERE	
Title Licensed Land Surve		Company Name	Paul H. Koell	ing & Associate	es, LLC		
Address 2161 Shore Roa	ad	City Linwood		State NJ	ZIP Code 08221		
Signature	Zelle	Date 8/4/14		Telephone	(609) 927-0279		

LLAVIION OFKIII IOVIE, bad	5 A	(: A	· Property	NSURANCE COMPANY USE	
IMPORTANT: In these spaces, cop	by the corresponding information from S	ection A.	4 CONTROL OF CO.	Number:	
11 N. 34 th Ave.	Jnit, Suite, and/or Bldg. No.) or P.O. Route and B			ny NAIC Number:	
City BOROUGH OF LONGPORT	otato no	State NJ ZIP Code 08403			
	- SURVEYOR, ENGINEER, OR ARCHITE			UED)	
Copy both sides of this Elevation Certification	ate for (1) community official, (2) insurance agent	company, and	(3) building owner.		
Comments *A8b.) Smart Vents Model #1540-510 er **B8 & B9.) FEMA Flood Hazard Resou ***C2a.) crawlspace ****C2e.) exterior air unit elevation is 15	ngineered for 200 square inches of net area irces Map Zone AE9Base Flood Elevation 9 ft 5.3, ductwork elevation 11.3	. (NAVD88) con	overted = 10.3 ft. (N	GVD29)	
Signature	Date 8/	4/14			
PLUI DING ELEV	ATION INFORMATION (SURVEY NOT RE	DUIRED) FOR	ZONE AO AND	ZONE A (WITHOUT BFE)	
 and C. For Items E1–E4, use natural grade E1. Provide elevation information for the grade (HAG) and the lowest adjace a) Top of bottom floor (including be b) Top of bottom floor (including be celevation C2.b in the diagrams) of the celevation C2.b in the diagrams) of E3. Attached garage (top of slab) is E4. Top of platform of machinery and/of the celevation C2.b in flood depth in ordinance?	asement, crawlspace, or enclosure) isasement, crawlspace, or enclosure) isermanent flood openings provided in Section A Ite f the building is feet meter above or equipment servicing the building is umber is available, is the top of the bottom floor e Unknown. The local official must certify this informations.	how whether th feet feet ms 8 and/or 9 (ers above cor below the feet feet levated in accommation in Section	e elevation is above meters above meters above see pages 8–9 of In below the HAG HAG. meters above ordance with the com-	or below the highest adjacent ve or below the HAG. ve or below the LAG. structions), the next higher floor G. r below the HAG. smunity's floodplain management	
SECTION F	- PROPERTY OWNER (OR OWNER'S R	EPRESENTA	TIVE) CERTIFICA	ATION	
or Zone AO must sign here. The statemer Property Owner's or Owner's Authorized	ed representative who completes Sections A, B, a ents in Sections A, B, and E are correct to the beat Representative's Name	st of my knowle	dge.	ZIP Code	
Address			Telephone	2	
Signature	Date		relephone		
Comments				☐ Check here if attachmen	
	SECTION G - COMMUNITY INFORM	IATION (OPT	IONAL)		
of this Elevation Certificate. Complete the G1. The information in Section C w is authorized by law to certify e G2. A community official completed	or ordinance to administer the community's floodpl applicable item(s) and sign below. Check the meas as taken from other documentation that has beer elevation information. (Indicate the source and day of Section E for a building located in Zone A (withouts of the community floodplain	ain managemen surement used in a signed and sea te of the elevation out a FEMA-issumanagement pu	at ordinance can come natems G8–G10. In alled by a licensed so on data in the Community-is arposes.	urveyor, engineer, or architect who ments area below.) sued BFE) or Zone AO.	
G4. Permit Number	G5. Date Permit Issued	G6. Date Ce	rtificate Of Compliar	nce/Occupancy Issued	
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (in G9. BFE or (in Zone AO) depth of flood G10. Community's design flood elevation	ing at the building site:	☐ feet [meters Da	tum tum tum	
Local Official's Name	Titl	e			
Community Name Telephone					
Signature	Da	te '			
Comments					
				Check here if attachm	

Building Photographs

	For Insurance Company Use: Policy Number		
Building Street Address (inclu			
City	State	ZIP Code	Company NAIC Number
Longport	NJ	08403	

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 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)