

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

Building Owner's Name Eastshore Development		For Insurance Company Use:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2602 Oberon Avenue		Policy Number	
City Longport State NJ ZIP Code 08403		Company NAIC Number	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 28 Lot 6.02			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Three Story Frame Residential House</u>			
A5. Latitude/Longitude: Lat. <u>39°18'48"</u> Long. <u>74°31'34"</u>		Horizontal Datum: <input checked="" type="checkbox"/> NAD 1927 <input 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 crawspace or enclosure(s):		A9. For a building with an attached garage:	
a) Square footage of crawspace or enclosure(s) <u>1347</u> sq ft		a) Square footage of attached garage <u>N/A</u> sq ft	
b) No. of permanent flood openings in the crawspace or enclosure(s) within 1.0 foot above adjacent grade <u>**9</u>		b) No. 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 A8.b <u>**1800</u> sq in		c) Total net area of flood openings in A9.b <u>N/A</u> sq in	
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

new home

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Longport City 345302		B2. County Name Atlantic		B3. State NJ	
B4. Map/Panel Number 345302 / 0001	B5. Suffix B	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) 10.00

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) _____
 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 Private Benchmark/Vertical Datum 1929
 Conversion/Comments _____

Check the measurement used.

a) Top of bottom floor (including basement, crawspace, or enclosure floor) <u>7.00</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor <u>12.05</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) <u>N/A</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) <u>N/A</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>10.10</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG) <u>6.50</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG) <u>7.50</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>6.50</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

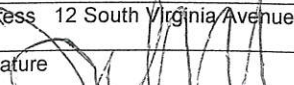
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

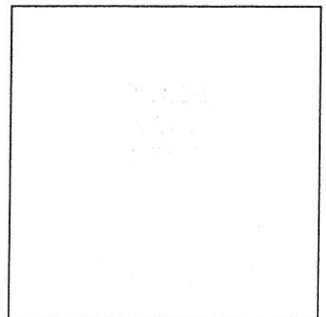
Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Surveyor's Name Robert J. Catalano Professional Land Surveyor and Planner License Number 18612

Title Professional Land Surveyor Company Name Robert J. Catalano and Associates P.A.

Address 12 South Virginia Avenue City Atlantic City State NJ ZIP Code 08401

Signature  Date 11/01/2011 Telephone 609-345-1887

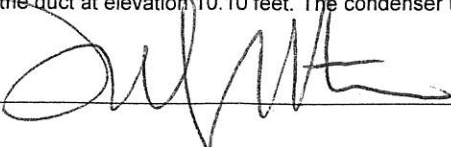


IMPORTANT: In these spaces, copy the corresponding information from Section A.	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1 SOUTH 26 TH AVENUE	Policy Number
City Longport CityState NJ ZIP Code 08403	Company NAIC Number

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 ****All vents are Smart Vents Model # 1540-512 certified for 200 S.F. of coverage each or 1,800 S.F. Total. The lowest HVAC elevation is the bottom of the duct at elevation 10.10 feet. The condenser unit is elevation 16.50'.**

Signature 

Date 11/01/2011

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.

- 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
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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 (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____
- G10. Community's design flood elevation _____ feet meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments HVAC is located in the rear of the building 10 Feet above ground

Check here if attachments

Engineered Flood Openings Certificate for Smart VENT®

To satisfy requirements of the *International Code Series* and the National Flood Insurance Program

This certification must be submitted to, and kept on file by, the local jurisdiction's permit authority. A copy should be retained by the owner to demonstrate compliance in order to receive the correct flood insurance rating.

The Smart VENT® model numbers 1540-510 (available as 1540-511 2-unit stacked and 1540-550 quad assembly), 1540-520 (available as 1540-521 2-unit stacked and 1540-560 quad assembly), 1540-514, 1540-524, 1540-570 and 1540-574 are certified as meeting the flood opening requirements for engineered openings as set forth in the *International Building Code* (2003 and 2006), *International Residential Code* (2003 and 2006), *Flood-Resistant Design and Construction* (ASCE 24-05), and Federal Emergency Management Agency's National Flood Insurance Program regulations (44 CFR 60.3(c)(5)), provided they are installed according to the those references, as summarized in the "Installation Limitations and Instructions" below. Flood openings are required in the walls of enclosures below elevated buildings (including crawlspaces), attached and detached garages, and accessory structures that meet the limitations set forth in the building codes and by the N FIP. For a copy of the report documenting this certification dated July 2007, the ICC ES acceptance criteria AC364, and the ICC ES Legacy Report NER 624, contact Smart VENT, Inc., at 877/441-8368 or visit www.smartvent.com.

I do hereby certify that the Smart VENT® model numbers 1540-510, 1540-520, 1540-514, 1540-524, 1540-570 and 1540-574 are designed for installation in walls of enclosed areas below elevated buildings, will allow for the automatic equalizing of hydrostatic flood forces on exterior walls by allowing for the automatic entry and exit of floodwater during floods. One Smart VENT unit installed for every 200 sq. ft. of enclosed area will provide sufficient hydrostatic pressure equalization provided the installation limitations and instructions are followed as listed below. To calculate the required number of units, determine the square footage of the enclosed area and divide by 200.

Example: A 2000 sq. ft. enclosed area requires

10 Smart VENT units (2000 / 200 = 10 units)

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 11:16:15 -04'00'



Installation Limitations and Instructions

1. The Smart VENT® model numbers 1540-510 (available as 1540-511 2-unit stacked and 1540-550 quad assembly), 1540-520 (available as 1540-521 2-unit stacked and 1540-560 quad assembly), 1540-514, 1540-524, 1540-570 and 1540-574 provide sufficient automatic equalization of hydrostatic pressure on walls and foundations of elevated buildings located in flood hazard areas where the rate of rise is expected to be less than or approximately 5 feet per hour.
2. Enclosed areas below otherwise elevated buildings, non-elevated attached and detached garages, and certain non-elevated accessory structures located in flood hazard areas are to be used solely for parking of vehicles, building access, or storage.
3. Each enclosed area shall have at least two flood openings, installed on different sides of the enclosed area.
4. The bottom of the flood openings shall be no more than one foot above the adjacent finished ground level (interior or exterior).
5. Installation must be in accordance with manufacturer's instructions.
6. The Local Jurisdiction's permit authority may require separate certification of the design of foundations and walls in which Smart VENT® units are to be installed.

** FOR USE BY OWNER/INSTALLER **

Project Address <u>2602 OBERON AVENUE</u> <u>LONGPORT, N.J. 08403</u>	Date Submitted <u>11/1/11</u>
Total Area of Enclosure <u>1,347</u> (sq ft)	Number of Smart Vent Units <u>9</u>

The Smart VENT units are constructed in the U.S. of stainless steel. A rigid frame is designed to be installed in masonry walls, framed walls, or garage doors. A pivoting door assembly is fitted with two patented float devices that release the door with rising water. The door swings open to provide two horizontal slot openings. The pivoting door assembly is available in two configurations – some models have temperature-controlled louvers with vermin-resistant screen and other models have a solid, insulated pivoting door.

Both configurations provide the same effective performance under rising and falling floodwaters. Performance tests were observed and certified by a qualified, third-party test company. The tests examined rising and falling flood conditions with large volumes of water. A separate test was performed to demonstrate that Smart VENT units successfully pass floating debris with no reduction in performance (3" plastic balls, leaves and grass clippings). Contact Smart VENT, Inc., for a copy of the certified engineering report documenting this certification (877/441-8368 or visit www.smartvent.com).

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. 2602 Oberon	For Insurance Company Use: 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 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.	

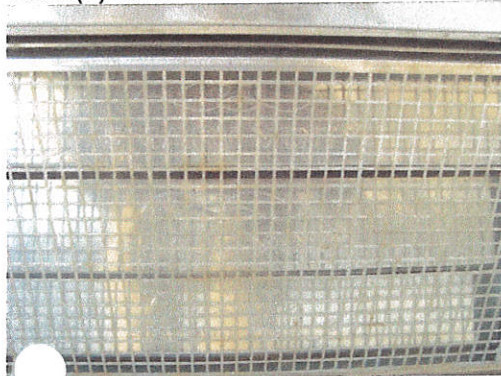
Front view taken 11/01/11



Rear view taken 11/01/11



Vents(9) taken 11/01/11



Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	For Insurance Company Use: Policy Number
City 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."	

Hvac taken 11/01/11

