

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

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

## SECTION A - PROPERTY INFORMATION

FOR INSURANCE COMPANY USE

A1. Building Owner's Name Margaret Stammen

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
 121 North 32<sup>nd</sup> Avenue

Company NAIC Number:

City Longport

State NJ ZIP Code 08403

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
 Block 85, Lot 6

OCT -7 2014

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

Horizontal Datum:  NAD 1927  NAD 1983

A5. Latitude/Longitude: Lat. N 39° 19' 11.6" Long. W 074° 31' 24.2"

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 6

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

A9. For a building with an attached garage:

- a) Square footage of crawlspace or enclosure(s) 1475 sq ft
- b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 1\*
- c) Total net area of flood openings in A8.b 1860\* sq in
- d) Engineered flood openings?  Yes  No

- a) Square footage of attached garage N/A sq ft
- b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A
- c) Total net area of flood openings in A9.b N/A 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

B3. State  
 New Jersey

B4. Map/Panel Number  
 345302 0001 B

B5. Suffix  
 B

B6. FIRM Index Date  
 Only One Panel

B7. FIRM Panel  
 Effective/Revised Date  
 8/15/1983

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/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: PID JU0474 Vertical Datum: NAVD 1988\*

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) 6.55\*  feet  meters
- b) Top of the next higher floor 13.63\*  feet  meters
- c) Bottom of the lowest horizontal structural member (V Zones only) N/A, \_\_\_\_\_  feet  meters
- d) Attached garage (top of slab) N/A, \_\_\_\_\_  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) See Note\*  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) 6.27  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) 6.81  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A, \_\_\_\_\_  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. 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 Michael W. Hyland, P.E & L.S.

License Number 20509

Title Prof. Land Surveyor

Company Name Hyland Design Group, Inc

Address 701 West Ave., Suite 301

City Ocean City

State NJ

ZIP Code 08226

Signature *Michael W. Hyland*

Date 10/03/2014

Telephone 609-398-4477

PLACE  
 SEAL  
 HERE

**ELEVATION CERTIFICATE, page 2**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 121 North 32nd Avenue	Policy Number:
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 A8b 1"(+/-) gap along bottom of skirt wall A8c 1" gap x 12"=12 sq in opening /lf ; perimeter = 155 lf ; Net Free Area = 155 lf x 12 sq in/lf = 1860 sq in NOTE: Finished Grade Not Completed  
 C2 BM for Cert "JU0474 USC&GS 4812" Elev = 4.64 (NAVD 1988). Datum Conversion to NGVD 1929 per attachment; see www.agc.army.mil/corpscon for info on methodology  
 C2a Encl Floor Elev 6.55  
 C2b Main Floor Elev 13.63  
 C2e Bottom of Lowest Ductwork Elev 10.82; Low Mechs Main Floor Elev 13.63

Signature Date 10/03/2014

**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.

G4. Permit Number _____	G5. Date Permit Issued _____	G6. Date Certificate Of Compliance/Occupancy Issued _____
-------------------------	------------------------------	---

37. This permit has been issued for:  New Construction  Substantial Improvement

38. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

39. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

310. Community's design flood elevation: \_\_\_\_\_  feet  meters Datum \_\_\_\_\_

Local Official's Name _____	Title _____
Community Name _____	Telephone _____
Signature _____	Date _____

Comments \_\_\_\_\_  Check here if attachments.

Replaces all previous editions.

# 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. 121 North 32nd Avenue			FOR INSURANCE COMPANY USE	
City Longport			State NJ	ZIP Code 08403
			Policy Number:	
			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.



View: Front / Left Side



# 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.  
121 North 32nd Avenue

Policy Number:

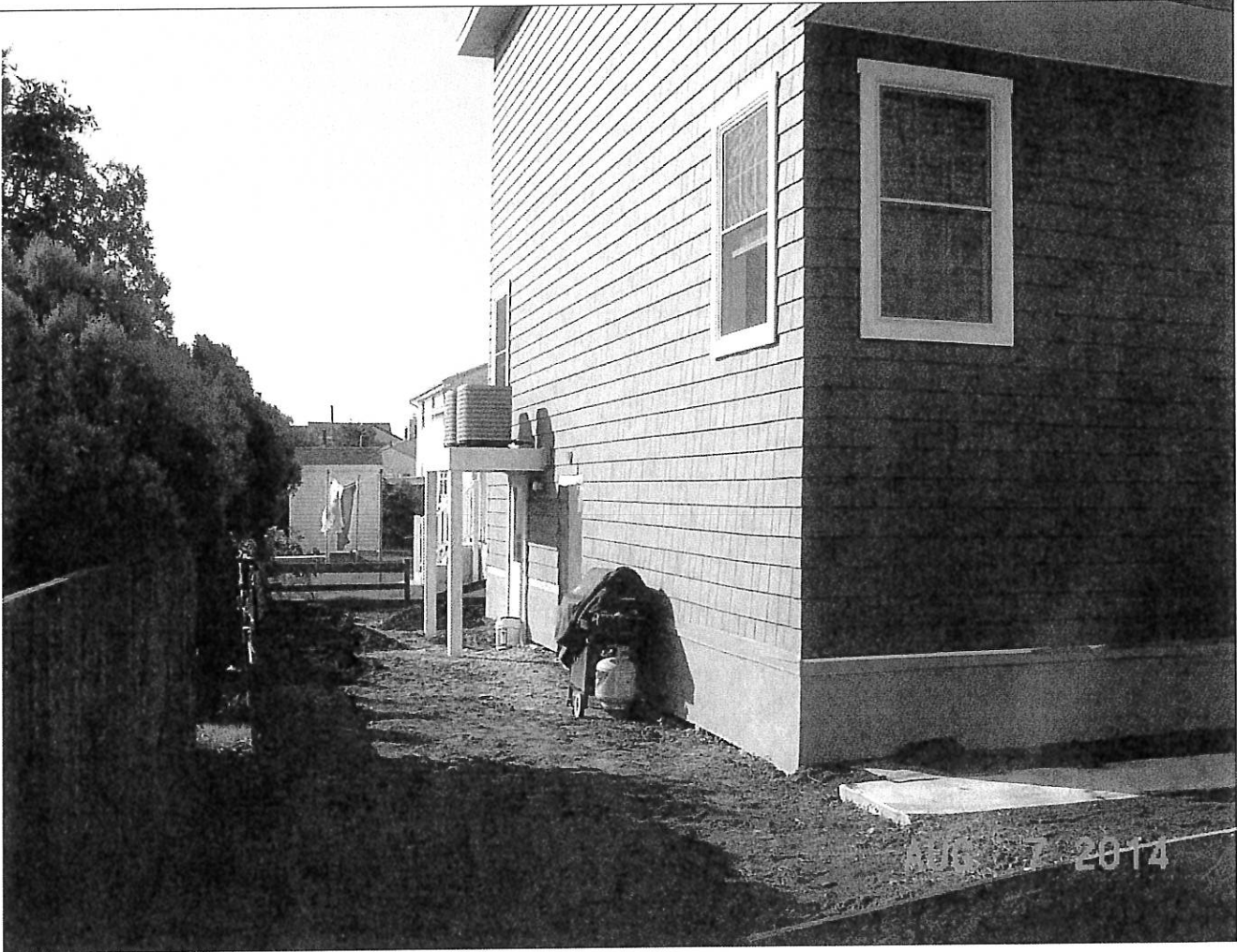
City Longport

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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



View: Rear

HDG #0161.02 Book 1106 / Page 71