U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

JUL -6 2020

BOROUGH OF LONGPORT

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent company, and (3) building owner.

SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE			
A1. Building Owner's Name JAMES AND CYNTHIA KOEHLER Policy Number:				
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Company NAIC Number:			
16 N. MANOR AVENUE				
City State LONGPORT New Jersey	ZIP Code 08403			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 19, BLOCK 55				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL				
A5. Latitude/Longitude: Lat. 39.31667 Long74.52472 Horizontal Datu	ım: ☐ NAD 1927 区 NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insu	rance.			
A7. Building Diagram Number7	e ex			
A8. For a building with a crawlspace or enclosure(s):				
a) Square footage of crawlspace or enclosure(s) 1237.10 sq ft				
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot abov	e adjacent grade 7			
c) Total net area of flood openings in A8.b sq in				
d) Engineered flood openings? Yes No				
A9. For a building with an attached garage:	2. *			
a) Square footage of attached garageN/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?				
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORM	ATION 19-303			
B1. NFIP Community Name & Community Number B2. County Name	B3. State			
BOROUGH OF LONGPORT 345392 ATLANTIC	New Jersey			
Number Date Effective/ Zone(s)	Base Flood Elevation(s) (Zone AO, use Base Flood Depth)			
34001C0434 F 08-28-2018 Revised Date 08-28-2018 AE 9.0				
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 DPA				

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rou 16 N. MANOR AVENUE	Policy Number:				
City State ZIP LONGPORT New Jersey 0840	Code 03	Company NAIC Number			
SECTION C – BUILDING ELEVATION INFORMAT	ION (SURVEY RI	EQUIRED)			
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on:					
g) Highest adjacent (finished) grade next to building (HAG)h) Lowest adjacent grade at lowest elevation of deck or stairs, including	ľ-	6.4 X feet meters			
structural support					
SECTION D – SURVEYOR, ENGINEER, OR ARC This certification is to be signed and sealed by a land surveyor, engineer, or arch I certify that the information on this Certificate represents my best efforts to interpretate the statement may be punishable by fine or imprisonment under 18 U.S. Code, Section Were latitude and longitude in Section A provided by a licensed land surveyor?	hitect authorized by pret the data availa tion 1001.	law to certify elevation information.			
Certifier's Name HOWARD A. TRANSUE GS33451 Title		G533541			
PROFESSIONAL LAND SURVEYOR Company Name SCHAEFFER NASSAR SCHEIDEGG, CE, LLC Address 1425 CANTILLON BOULEVARD City State MAYS LANDING New Jersey	ZIP Code 08330	Place Seal Here			
Signature Date 06-29-2020	Telephone (609) 625-7400	Ext.			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. Comments (including type of equipment and location, per C2(e), if applicable) ITEM A8b VENTS ARE CRAWL SPACE DOOR SYSTEMS FLOOD VENTS MODEL 816CS RATED AT 205 SQ. IN. EACH. ITEM C2e IS THE A.C. PAD.					

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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. 16 N. MANOR AVENUE			Policy Number:		
	State New Jersey	ZIP Code 08403	Company NAIC Number		
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 b) Top of bottom floor (including basement,		feet _ met	ers above or below the HAG.		
crawlspace, or enclosure) is		feet _ met			
E2. For Building Diagrams 6–9 with permanent flood o the next higher floor (elevation C2.b in the diagrams) of the building is	penings provided in S	Section A Items 8 and/o			
E3. Attached garage (top of slab) is	entities of their views	feet _ met	ers above or below the HAG.		
E4. Top of platform of machinery and/or equipment servicing the building is		feet _ met	ers above or below the HAG.		
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	e, is the top of the bo	ttom floor elevated in a The local official mus	accordance with the community's t certify this information in Section G.		
SECTION F - PROPERTY OWN	NER (OR OWNER'S	REPRESENTATIVE)	CERTIFICATION 19-307		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	re who completes Sec ne statements in Sect	ctions A, B, and E for Z ions A, B, and E are co	one A (without a FEMA-issued or or or or other to the best of my knowledge.		
Property Owner or Owner's Authorized Representative'	s Name				
Address	City	S	State ZIP Code		
Signature	Date	Т	elephone		
Comments					
			Check here if attachments.		

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 16 N. MANOR AVENUE			Policy Number:		
City LONGPORT	State New Jersey	ZIP Code 08403	Company NAIC Number		
SECTION	ON G - COMMUNITY INFOR	MATION (OPTIONAL)	19-363		
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 tak engineer, or architect who is authoriz data in the Comments area below.)					
G2. A community official completed Section or Zone AO.	on E for a building located in	Zone A (without a FEM)	A-issued or community-issued BFE)		
G3. The following information (Items G4-	-G10) is provided for commun	nity floodplain managem	ent purposes.		
G4. Permit Number	G5. Date Permit Issued		Date Certificate of compliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction Subs	stantial Improvement			
G8. Elevation of as-built lowest floor (including of the building:	g basement)	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	Tele	ephone			
Signature Date					
Comments (including type of equipment and loc	cation, per C2(e), if applicable	e)			
·					
0			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

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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. 16 N. MANOR AVENUE			FOR INSURANCE COMPANY USE Policy Number:
LONGPORT	New Jersey	08403	

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.



Photo One

Photo One Caption FRONT VIEW AND LEFT SIDE VIEW

19-303

Clear Photo One



Photo Two

Photo Two Caption FRONT VIEW AND RIGHT SIDE VIEW

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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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. 16 N. MANOR AVENUE			Policy Number:
City LONGPORT	State New Jersey	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.



Photo Three Caption REAR VIEW

19-303

Clear Photo Three



Photo Four Caption CRAWL SPACE DOOR SYSTEMS FLOOD VENT MODEL 816CS TYPICAL OF 7

Clear Photo Four

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

19-303

Section 2.6.2.2 of ASCE 24 provides an equation to determine the required <u>net area</u> of engineered openings (A_o) for a given <u>enclosed area</u> (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.

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Installation	Dann	iramante	and	Limitations
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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 105 8 x 16 205 1220CS 12 x 20 235 500 1232CS 12 x 32 305 645 П 1616CS 16 x 16 180 395 П 1624CS 16 x 24 310 670 1632CS 16 x 32 405 835 П 2032CS 20 x 32 630 1240 2424CS 24 x 24 570 1230 2436CS 24 x 36 850 1765

Table 1 Maximal total <u>enclosed area</u> (A_e) that can be served by each individual model based on the given <u>net area</u> 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

I'G NI MANOR AVENUE, LONGPORT, NJ 08403

Certifying Design Professional

Title ENGINEER

Address 599 SHORE ROAD, SOMERS POINT, NJ 08244

Type of License PROFESSIONAL ENGINEER

License # 20482 Signature

Issuing State NEW JERSEY

