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

OMB No. 1660-0008 Expiration Date: November 30, 2018

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	Policy Number:
STEVE MENTO	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and	Company NAIC Number:
Box No. 116 NORTH NEW HAVEN AVENUE	
City State	ZIP Code
VENTNOR New Jersey	08406
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	
BLOCK 174 LOT 21	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIA	AL .
A5. Latitude/Longitude: Lat. 39 20' 20.5" Long. 74 29' 08.8" Horizontal D	atum: ☐ NAD 1927 区 NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood i	nsurance.
A7. Building Diagram Number 8	
A8. For a building with a crawlspace or enclosure(s):	•
a) Square footage of crawlspace or enclosure(s)1,236 sq ft	
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot a	bove adjacent grade13
c) Total net area of flood openings in A8.b 1,261 sq in	
d) Engineered flood openings? 🗵 Yes 🗌 No 🚜 🗘	
A9. For a building with an attached garage:	LP .
a) Square footage of attached garage 1) A sq ft	$\mathcal{D}_{\mathcal{D}_{i}}$
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacents.	ent grade
d) Engineered flood openings?	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFO	RMATION
B1. NFIP Community Name & Community Number B2. County Name	B3. State
VENTNOR 345326 ATLANTIC	New Jersey
B4. Map/Panel B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood Zc	ne(s) B9. Base Flood Elevation(s) (Zone AO, use Base
Number Date Effective/ Revised Date	Flood Depth)
345326/0001 B 06/18/1971 09/15/1983 A-8	10.00'
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in	Item B9:
	<u> </u>
	1 04 40
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 区 No
	Protected Area (OPA)? ☐ Yes 区 No
	Protected Area (OPA)? ☐ Yes 区 No

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or 116 NORTH NEW HAVEN AVENUE	Policy Number:		
City State VENTNOR New	Company NAIC Number		
SECTION C – BUILDING ELE	VATION INFORMAT	ION (SURVEY R	EQUIRED)
*A new Elevation Certificate will be required when co	/E: V1–V30, V (with BI	ng is complete. =E), AR, AR/A, AR	/AE. AR/A1–A30, AR/AH, AR/AO.
Complete Items C2.a–h below according to the build Benchmark Utilized; RM-3	ing diagram specified i Vertical Datum:		o Kico only, enter meters.
Indicate elevation datum used for the elevations in ite NGVD 1929 NAVD 1988 Other/S Datum used for building elevations must be the same	ems a) through h) below	N.	
-			Check the measurement used.
a) Top of bottom floor (including basement, crawlspa	ace, or enclosure floor)	13 82	X feet meters meters
b) Top of the next higher floor	017	N/A	X feet meters
c) Bottom of the lowest horizontal structural member	(v Zones only)	N/A	X feet meters
d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Comi	icing the building	13. 82	X feet meters
f) Lowest adjacent (finished) grade next to building		6.33	X feet meters
g) Highest adjacent (finished) grade next to building (HAG) 6. 44		X feet ☐ meters	
g/ Trightout dal/door (initiative) 3.220 (1.22)		<u>6</u> . <u>54</u>	x feet meters
SECTION D - SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIF	ICATION
This certification is to be signed and sealed by a land survice of the certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und	mv best efforts to inter	pret the data availa	y law to certify elevation information. able. I understand that any false
Were latitude and longitude in Section A provided by a lice			⊠ Check here if attachments.
Certifier's Name DANIEL J. PONZIO, SR.	License Number GS37603		
Title PROFESSIONAL LAND SURVEYOR			
Company Name ARTHUR W. PONZIO CO. & ASSOC., INC.		Place Seal Here	
Address 400 NORTH DOVER AVENUE			FICIO
City ATLANTIC CITY	State New Jersey	ZIP Code 08401	
Signature	Date 03/21/2018	Telephone (609) 344-8194	
Copy all passor this Elevation Certificate and U attachmen		ficial, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, per	C2(e), if applicable)		
PROJECT #33982-29 A/C UNIT ELEV = 13.82' FLOC	D SOLUTIONS MODI	EL FS-1608 HEAT	ER = 13.82' DUCT WORK=22.82'

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the correspond	ling informatio	n from Section A.		FOR INSURANC	E COMPANY USE
Building Street Address (including Apt., Unit, Suite, and 116 NORTH NEW HAVEN AVENUE	d/or Bldg. No.) o	or P.O. Route and Box	- 1	Policy Number:	
City	State	ZIP Code	1	Company NAIC N	lumber
	New Jersey	. 08406	L		
SECTION E – BUILDING EL FOR ZON	EVATION INF E AO AND ZO	ORMATION (SURVE NE A (WITHOUT BF	EY NOT F E)	REQUIRED)	
For Zones AO and A (without BFE), complete Items E-complete Sections A, B,and C. For Items E1–E4, use enter meters.	1–E5. If the Cer natural grade, if	tificate is intended to s available. Check the r	support a l measurem	OMA or LOMR-Fent used. In Pue	request, rto Rico only,
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowesta) Top of bottom floor (including basement,	i check the app adjacent grade	opriate boxes to show (LAG).	v whether		
crawlspace, or enclosure) is	,	feet	meters 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 of	openings provid	ed in Section A Items	8 and/or 9	(see pages 1-2	of Instructions),
the next higher floor (elevation C2.b in the diagrams) of the building is		[] feet			below the HAG.
E3. Attached garage (top of slab) is		feet	meters 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 floodplain management ordinance? Yes	ole, is the top of No Dunk	the bottom floor eleva nown. The local offic	ited in acc cial must c	ordance with the ertify this informa	community's tion in Section G.
SECTION F - PROPERTY OW	NER (OR OWN	IER'S REPRESENTA	TIVE) CE	RTIFICATION	
		toe Coetions A. B. and	NE for Zon	— e Δ (without a Fi	MA-issued or
community-issued BFE) or Zone AO must sign here. T	he statements	n Sections A, B, and I	E are corre	ect to the best of	my knowleage.
The property owner or owner's authorized representation community-issued BFE) or Zone AO must sign here. The property Owner or Owner's Authorized Representative Community Commu	ne statements	n Sections A, B, and I	E are corre	ect to the best of	my knowledge.
community-issued BFE) or Zone AO must sign here. I	ne statements	in Sections A, B, and I	E are corre	sot to the bost of	ZIP Code
community-issued BFE) or Zone AO must sign here. I Property Owner or Owner's Authorized Representative	ne statements	n Sections A, B, and t	Sta	sot to the bost of	,
community-issued BFE) or Zone AO must sign here. I Property Owner or Owner's Authorized Representative Address Signature	ne statements	City	Sta	te	,
community-issued BFE) or Zone AO must sign here. I Property Owner or Owner's Authorized Representative Address	ne statements	City	Sta	te	,
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community-issued BFE) or Zone AO must sign here. I Property Owner or Owner's Authorized Representative Address Signature	ne statements	City	Sta	te	,
community-issued BFE) or Zone AO must sign here. I Property Owner or Owner's Authorized Representative Address Signature	ne statements	City	Sta	te	,
community-issued BFE) or Zone AO must sign here. I Property Owner or Owner's Authorized Representative Address Signature	ne statements	City	Sta	te ephone	,

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2018

A section A.			FOR INSURANCE COMPANY USE
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.			Policy Number:
116 NORTH NEW HAVEN AVENUE	_		
City VENTNOR	State New Jersey	ZIP Code 08406	Company NAIC Number
SECTIO	N G - COMMUNITY INF	ORMATION (OPTIONA	L)
The local official who is authorized by law or ord Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, ent	dinance to administer the Certificate. Complete the er meters.	e community's floodplain e applicable item(s) and s	management ordinance can complete sign below. Check the measurement
I data in the Comments area below.)	ed by law to certify eleva	adoli lillorittadoss. (massass	
or Zone AO.			EMA-issued or community-issued BFE)
G3. The following information (Items G4-	G10) is provided for con	nmunity floodplain manag	gement purposes.
G4. Permit Number	G5. Date Permit Issue	ed G	Date Certificate of Compliance/Occupancy Issued
G8. Elevation of as-built lowest floor (including		Substantial Improvement	feet meters
of the building: G9. BFE or (in Zone AO) depth of flooding at			feet meters Datum
G10. Community's design flood elevation:			feet meters Datum
Local Official's Name		Title	
Dino Cavalieni		C-F-W.	
Dino Cavalieni Community Name Van took		•	23-7487
Vantnor		Date	
Signature		4-9-1	8
Comments (including type of equipment and lo	ocation, per C2(e), if app		
Comments (Including type of equipment and is	,oadon, por ==(-);	•	
·			
	•		
			-
	•		
			Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, S 116 NORTH NEW HAVEN AVENUE	buite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:	
City VENTNOR	State New Jersey	ZIP Code 08406	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.



Photo One

Photo One Caption FRONT VIEW 3/19/18

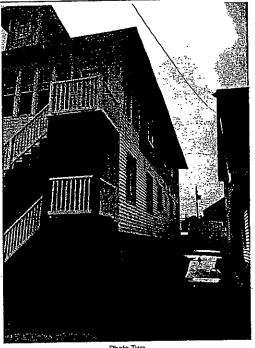


Photo Two

BUILDING PHOTOGRAPHS

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE Continuation Page FOR INSURANCE COMPANY USE 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. 116 NORTH NEW HAVEN AVENUE

Policy Number:

City VENTNOR State New Jersey ZIP Code 08406

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.

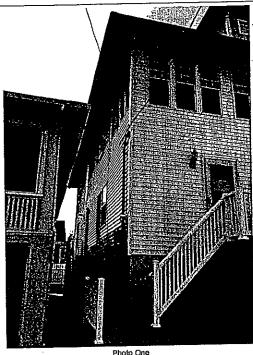


Photo One

Photo One Caption FRONT/LEFT SIDE VIEW 3/19/18

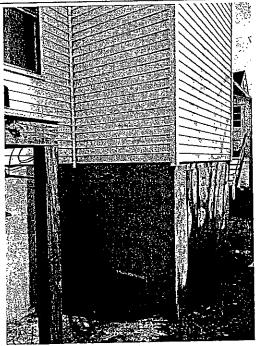


Photo Two Caption REAR VIEW 3/19/18



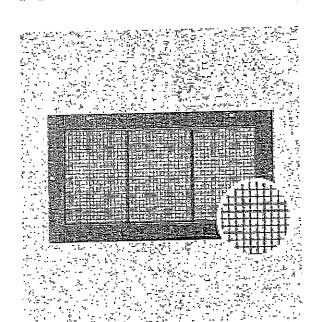
info@floodsolutions.com

Toll Free: 800.325.9775

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FS-1608



Add to cart \$30.00

Size: Opening Req'd in wall: 16" x 8"H

Tip to Tip: 18-1/2"W x 10-1/2"

Covers: 97 sq ft

Free area of vent: 80.7 sq inches

- All Flood Solutions flood vents are ICC-ES Certified, engineered, FEMA compliant and proudly made in the U.S.A from heavy duty aluminum.
- They are easy to install with predrilled screw holes, a 1-1/4" front mounting flange and no finish for easy painting if desired.
- Vents are always in the open position, allowing for fresh air ventilation to help keep crawl space dry while protecting you from insects and rodents.
- Ideal for new block construction, poured concrete walls, wood frame walls, doors. No finish for easy field painting (or may be left unfinished).

Shipping Information:

Orders received by 2:30 PM EST will ship the same business day.

Orders received after 2:30 PM EST will ship the next business day.

Orders are shipped UPS GROUND SERVICE. For Air Service or shipments to Hawaii or Alaska please contact us at 1-800-325-9775.



Click on above map to expand

Please refer to the map to determine number of business days in transit* for standard ground shipments.

*Please note: Business days in transit do NOT include the day the order is placed, holidays or weekends.

Freight charges: 8% of total order cost or \$17.75 minimum, whichever is higher.

info@floodsolutions.com

Toll Free: 800.325.9775

Privacy

Refunds/Returns

Warranty

Disclaimer

Flood Solutions LLC

1 Industrial Park Drive, Bldg. 27 Pelham, NH 03076



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