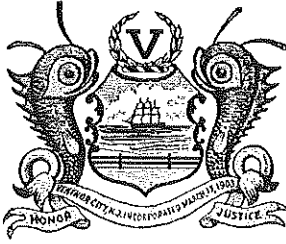


DEPARTMENT OF BUILDING SAFETY
&
FLOOD PLAIN MANAGEMENT

VENTNOR CITY HALL
6201 ATLANTIC AVENUE
ROOM 4
823-7987
823-7966 FAX



VENTNOR CITY, N.J. 08406

Memo of Review For Correctness and Completion

The attached FEMA Elevation Certificate has been reviewed by this office.
The items noted below are not correct on the attached form and should read as entered on this page.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use
A1. Building Owner's Name <u>Subach Chakraborty</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>131 N. Newport</u>		Company NAIC Number
City <u>Ventnor</u> State <u>NJ</u> ZIP Code <u>08406</u>		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>169 27</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) _____		
A5. Latitude/Longitude: Lat. _____ Long. _____ Horizontal Datum: <input 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>7</u>		
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) <u>780</u> sq ft		a) Square footage of attached garage <u>0</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>4</u>		b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>0</u>
c) Total net area of flood openings in A8.b <u>820</u> sq in		c) Total net area of flood openings in A9.b <u>0</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

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>Ventnor 345326</u>		B2. County Name <u>Atlantic</u>		B3. State <u>New Jersey</u>	
B4. Map/Panel Number <u>345326 0001</u>	B5. Suffix <u>B</u>	B6. FIRM Index Date <u>6/18/1971</u>	B7. FIRM Panel Effective/Revised Date <u>9/15/1983</u>	B8. Flood Zone(s) <u>A-B</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>10</u>

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) _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
Designation Date _____ CBRS OPA

Local Official's Name <u>Dino Cavalieri</u>	Title <u>C.F.M.</u>
Community Name <u>Ventnor</u>	Telephone <u>609 823-7987</u>
Signature <u>[Signature]</u>	Date <u>2-3-2020</u>
Comments	

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 Subach Ckakraorty				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 131 North Newport Avenue				Company NAIC Number:	
City Ventnor		State New Jersey		ZIP Code 08406	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK: 169 LOT: 27					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential 2-Story over Walk-Thru</u>					
A5. Latitude/Longitude: Lat. <u>39°20'24.18"</u> Long. <u>74°29'06.24"</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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>7</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>0</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A8.b <u>0</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>780</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>4</u>					
c) Total net area of flood openings in A9.b <u>820</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number Ventnor 345326			B2. County Name Atlantic		B3. State New Jersey
B4. Map/Panel Number 345326-0001	B5. Suffix B	B6. FIRM Index Date 06/18/1971	B7. FIRM Panel Effective/Revised Date 09/15/1983	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: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

ELEVATION CERTIFICATE

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, Suite, and/or Bldg. No.) or P.O. Route and Box No. 131 North Newport Avenue			Policy Number:
City Ventnor	State New Jersey	ZIP Code 08406	Company NAIC Number

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: Private Benchmarks Vertical Datum: NGVD 1929

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.

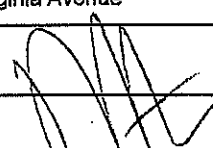
Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 7.0 feet meters
- b) Top of the next higher floor 14.60 feet meters
- c) Bottom of the lowest horizontal structural member (V Zones only) N/A feet meters
- d) Attached garage (top of slab) 7.0 feet meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 14.60 feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) 6.80 feet meters
- g) Highest adjacent (finished) grade next to building (HAG) 7.0 feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 6.80 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.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments.

Certifier's Name Robert J. Catalano ~ Land Surveyor	License Number 18612	Place Seal Here
Title Owner		
Company Name Catalano Surveys		
Address 12 South Virginia Avenue		
City Atlantic City	State New Jersey	
Signature 	Date 05/29/2019	Telephone (609) 345-1887

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)
All elevations refer to N.G.V.D. (1929 Datum) maintained benchmarks by Catalano Surveys. Flood openings shown in sections A8 and A9, if any are gross opening area. These values may be increased in accordance with FEMA Technical Bulletin I-93 or decreased as shown on Field Notes by Catalano Surveys.
Lowest part of machinery is the H.V.A.C. unit.
Engineered Flood Vents are Crawl Space Door Systems LLC model#816CS

ELEVATION CERTIFICATE

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, Suite, and/or Bldg. No.) or P.O. Route and Box No. 131 North Newport Avenue			Policy Number:
City Ventnor	State New Jersey	ZIP Code 08406	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 _____ 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 1–2 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 or Owner's Authorized Representative's Name

Address _____ City _____ State _____ ZIP Code _____

Signature _____ Date _____ Telephone _____

Comments

Check here if attachments.

ELEVATION CERTIFICATE

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, Suite, and/or Bldg. No.) or P.O. Route and Box No. 131 North Newport Avenue			Policy Number:
City Ventnor	State New Jersey	ZIP Code 08406	Company NAIC Number

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
-------------------	------------------------	---

- 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 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 <i>Dino Cavaliere</i>	Title <i>C.F.W.</i>
Community Name <i>Ventnor</i>	Telephone <i>609 823-7287</i>
Signature <i>[Signature]</i>	Date <i>6-2-19</i>

Comments (including type of equipment and location, per C2(e), if applicable)

Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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

ELEVATION CERTIFICATE

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. 131 North Newport Avenue			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 5/31/2019

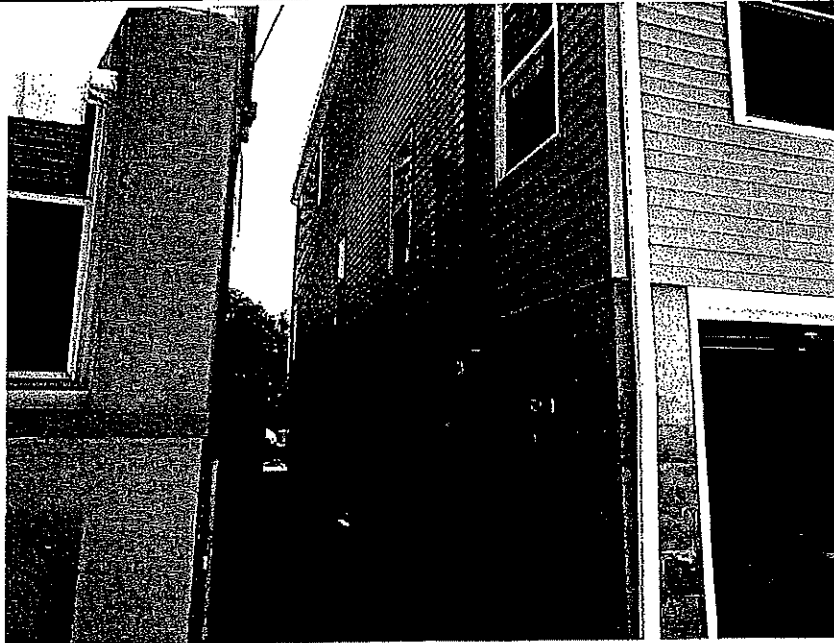


Photo Two

Photo Two Caption Side View 5/31/2019

BUILDING PHOTOGRAPHS

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

ELEVATION CERTIFICATE

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. 131 North Newport Avenue	Policy Number:
City Ventnor	Company NAIC Number
State New Jersey	ZIP Code 08406

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 Rear View 5/31/2019

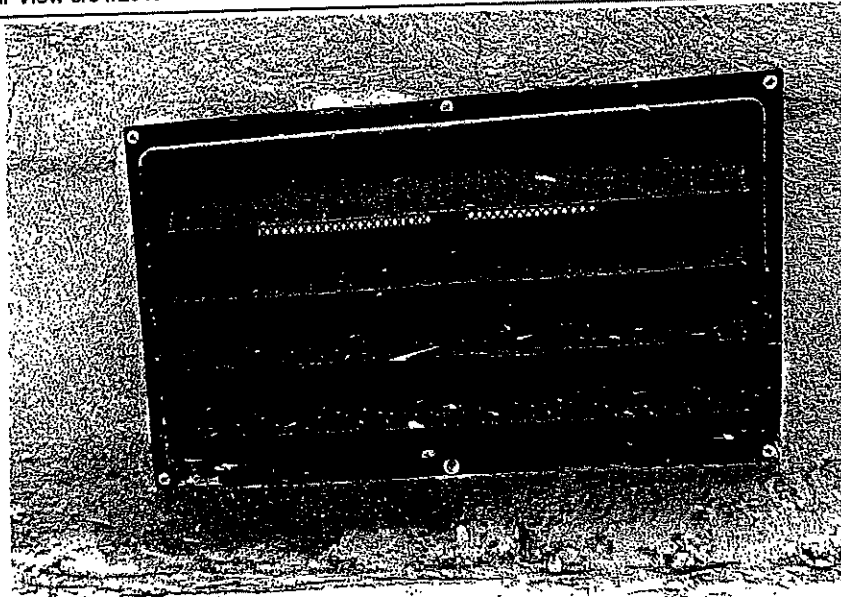


Photo Two

Photo Two Caption Engineered Flood Vent Crawl Space Door Systems LLC 816CS

Certification of Engineered Flood Openings

In accordance with the Code of Federal Regulations for the National Flood Insurance Program

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 Code of Federal Regulations for the National Flood Insurance Program (NFIP) 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. Vent opening measurements were measured and certified by Mr. Christopher Mark Loney, Virginia P.E. NO. 029000. Detailed calculations were prepared as outlined in "Review of certification of Engineered Flood Openings," prepared by Dr. Georg Reichard, Associate Professor of Building Construction, Virginia Tech (available upon request from Crawl Space Door Systems, Inc. billy@crawlspacedoors.com)

Design Characteristics

Section 2.6.2.2 of ASCE/SEI 24-14 provides an equation to determine the required net area of engineered openings (A_o) for a given enclosed area (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 restricted flow rate through the main frame opening in case the louver is blown out during a flood event; 2) the flow rate through the individual openings between louver blades; and 3) the flow rate through projected openings between louver blades following hydraulic short-tube theory. The 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 at a minimum rate of 5 feet/hour;
- The (maximum) difference between the exterior and interior floodwater levels shall not exceed 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.

*)	Model	H x W [in]	A_o [in ²]	A_e [ft ²]
XX <input type="checkbox"/>	816CS	8 x 16	105	205
<input type="checkbox"/>	1220CS	12 x 20	235	500
<input type="checkbox"/>	1232CS	12 x 32	305	645
<input type="checkbox"/>	1616CS	16 x 16	180	395
<input type="checkbox"/>	1624CS	16 x 24	310	670
<input type="checkbox"/>	1632CS	16 x 32	405	835
<input type="checkbox"/>	2032CS	20 x 32	630	1240
<input type="checkbox"/>	2424CS	24 x 24	570	1230
<input type="checkbox"/>	2436CS	24 x 36	850	1765


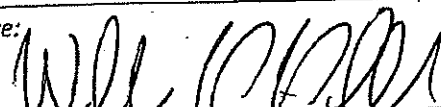
Installation Requirements and Limitations

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 subject to flooding;
- The bottom of all openings shall be no higher than one foot above the higher of the interior or exterior grade that is immediately under each opening;
- 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 data or analyses indicate more rapid rates of rise and fall, the required number of openings shall be increased to account for those different conditions. The number or size of the openings may be decreased if data or analyses indicate rates of rise and fall are less than 5 feet per hour.

Table 1 Maximum total enclosed area (A_e) that can be serviced by each individual model based on the given net area of engineered openings (A_o)

Certifying Design Professional

Name WILLIAM S. SWIDERSKI, P.E.	Title ENGINEER	
Company SWIDERSKI ASSOCIATES		
Address 599 SHORE ROAD, SOMERS POINT, NJ 08244		
License PROFESSIONAL ENGINEER	License No. 24GE02048200	
Signature: 	Date: 06/06/19	

Identification of the Building and Installed Flood Vents (By Others)

The flood vent models marked in Table 1*) are being installed at the following building: Four (4) Model 816CS

Building Address **131 N NEWPORT AVE ATLANTIC CITY, NJ 08401**