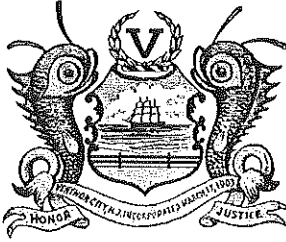


DEPARTMENT OF BUILDING SAFETY
&
FLOOD PLAIN MANAGEMENT

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>Anthony Miranda</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>310 N. OXFORD</u>		Company NAIC Number
City <u>Ventnor</u> State <u>N.J.</u> ZIP Code <u>08406</u>		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>211 114</u>		

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

A5. Latitude/Longitude: Lat. _____ Long. _____ Horizontal Datum: NAD 1927 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 6

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

a) Square footage of crawlspace or enclosure(s)	<u>396</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	<u>2</u>
c) Total net area of flood openings in A8.b	<u>400</u> sq in
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

A9. For a building with an attached garage:

a) Square footage of attached garage	<u>0</u> sq ft
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 A9.b	<u>0</u> sq in
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-8</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 Cavaliere</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	



Most Widely Accepted and Trusted

ICC-ES Evaluation Report

ESR-2074

Reissued 02/2019

This report is subject to renewal 02/2021.

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DIVISION: 08 00 00—OPENINGS

SECTION: 08 95 43—VENTS/FOUNDATION FLOOD VENTS

REPORT HOLDER:

SMART VENT PRODUCTS, INC.

EVALUATION SUBJECT:

**SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS:
MODELS #1540-520; #1540-521; #1540-510; #1540-511; #1540-570; #1540-574;
#1540-524; #1540-514
FLOOD VENT SEALING KIT #1540-526**



"2014 Recipient of Prestigious Western States Seismic Policy Council (WSSPC) Award in Excellence"



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ICC-ES Evaluation Report

ESR-2074

Reissued February 2019

This report is subject to renewal February 2021.

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A Subsidiary of the International Code Council®

DIVISION: 08 00 00—OPENINGS
Section: 08 95 43—Vents/Foundation Flood Vents

REPORT HOLDER:

SMART VENT PRODUCTS, INC.

EVALUATION SUBJECT:

SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS: MODELS #1540-520; #1540-521; #1540-510; #1540-511; #1540-570; #1540-574; #1540-524; #1540-514
FLOOD VENT SEALING KIT #1540-526

1.0 EVALUATION SCOPE

Compliance with the following codes:

- 2018, 2015, 2012, 2009 and 2006 *International Building Code*® (IBC)
- 2018, 2015, 2012, 2009 and 2006 *International Residential Code*® (IRC)
- 2018 *International Energy Conservation Code*® (IECC)
- 2013 *Abu Dhabi International Building Code* (ADIBC)[†]

[†]The ADIBC is based on the 2009 IBC. 2009 IBC code sections referenced in this report are the same sections in the ADIBC.

Properties evaluated:

- Physical operation
- Water flow

2.0 USES

The Smart Vent® units are engineered mechanically operated flood vents (FVs) employed to equalize hydrostatic pressure on walls of enclosures subject to rising or falling flood waters. Certain models also allow natural ventilation.

3.0 DESCRIPTION

3.1 General:

When subjected to rising water, the Smart Vent® FVs internal floats are activated, then pivot open to allow flow in either direction to equalize water level and hydrostatic pressure from one side of the foundation to the other. The FV pivoting door is normally held in the closed position by a buoyant release device. When subjected to rising water, the buoyant release device causes the unit to unlatch, allowing the door to rotate out of the way and allow flow. The water level stabilizes, equalizing the lateral forces.

Each unit is fabricated from stainless steel. Smart Vent® Automatic Foundation Flood Vents are available in various models and sizes as described in Table 1. The SmartVENT® Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 units each contain two vertically arranged openings per unit.

3.2 Engineered Opening:

The FVs comply with the design principle noted in Section 2.7.2.2 and Section 2.7.3 of ASCE/SEI 24-14 [Section 2.6.2.2 of ASCE/SEI 24-05 (2012, 2009, 2006 IBC and IRC)] for a maximum rate of rise and fall of 5.0 feet per hour (0.423 mm/s). In order to comply with the engineered opening requirement of ASCE/SEI 24, Smart Vent FVs must be installed in accordance with Section 4.0.

3.3 Ventilation:

The SmartVENT® Model #1540-510 and SmartVENT® Overhead Door Model #1540-514 both have screen covers with 1/4-inch-by-1/4-inch (6.35 by 6.35 mm) openings, yielding 51 square inches (32 903 mm²) of net free area to supply natural ventilation. The SmartVENT® Stacking Model #1540-511 consists of two Model #1540-510 units in one assembly, and provides 102 square inches (65 806 mm²) of net free area to supply natural ventilation. Other FVs recognized in this report do not offer natural ventilation.

3.4 Flood Vent Sealing Kit:

The Flood Vent Sealing Kit Model #1540-526 is used with SmartVENT® Model #1540-520. It is a Homasote 440 Sound Barrier® (ESR-1374) insert with 21 – 2-inch-by-2-inch (51 mm x 51 mm) squares cut in it. See Figure 4.

4.0 DESIGN AND INSTALLATION

4.1 SmartVENT® and FloodVENT®:

SmartVENT® and FloodVENT® are designed to be installed into walls or overhead doors of existing or new construction from the exterior side. Installation of the vents must be in accordance with the manufacturer's instructions, the applicable code and this report. Installation clips allow mounting in masonry and concrete walls of any thickness. In order to comply with the engineered opening design principle noted in Section 2.7.2.2 and 2.7.3 of ASCE/SEI 24-14 [Section 2.6.2.2 of ASCE/SEI 24-05 (2012, 2009, 2006 IBC and IRC)], the Smart Vent® FVs must be installed as follows:

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one FV for every 200 square

feet (18.6 m²) of enclosed area, except that the SmartVENT[®] Stacking Model #1540-511 and FloodVENT[®] Stacking Model #1540-521 must be installed with a minimum of one FV for every 400 square feet (37.2 m²) of enclosed area.

- Below the base flood elevation.
- With the bottom of the FV located a maximum of 12 inches (305.4 mm) above the higher of the final grade or floor and finished exterior grade immediately under each opening.

4.2 Flood Vent Sealing Kit

The Flood Vent Sealing Kit Model 1540-526 is used in conjunction with FloodVENT[®] Model #1540-520. When installed and tested in accordance with ASTM E283, the FV and Flood Vent Sealing Kit assembly have an air leakage rate of less than 0.2 cubic feet per minute per lineal foot (18.56 l/min per lineal meter) at a pressure differential of 1 pound per square foot (50 Pa) based on 12.58 lineal feet (3.8 lineal meters) contained by the Flood Vent Sealing Kit.

5.0 CONDITIONS OF USE

The Smart Vent[®] FVs described in this report comply with, or are suitable alternatives to what is specified in, those codes listed in Section 1.0 of this report, subject to the following conditions:

- 5.1 The Smart Vent[®] FVs must be installed in accordance with this report, the applicable code and the manufacturer's installation instructions. In the event of a conflict, the instructions in this report govern.

- 5.2 The Smart Vent[®] FVs must not be used in the place of "breakaway walls" in coastal high hazard areas, but are permitted for use in conjunction with breakaway walls in other areas.

6.0 EVIDENCE SUBMITTED

- 6.1 Data in accordance with the ICC-ES Acceptance Criteria for Mechanically Operated Flood Vents (AC364), dated August 2015 (editorially revised October 2017).
- 6.2 Test report on air infiltration in accordance with ASTM E283.

7.0 IDENTIFICATION

- 7.1 The Smart VENT[®] models and the Flood Vent Sealing Kit recognized in this report must be identified by a label bearing the manufacturer's name (Smartvent Products, Inc.), the model number, and the evaluation report number (ESR-2074).
- 7.2 The report holder's contact information is the following:

SMART VENT PRODUCTS, INC.
 430 ANDBRO DRIVE, UNIT 1
 PITMAN, NEW JERSEY 08071
 (877) 441-8368
www.smartvent.com
info@smartvent.com

TABLE 1—MODEL SIZES

MODEL NAME	MODEL NUMBER	MODEL SIZE (in.)	COVERAGE (sq. ft.)
FloodVENT [®]	1540-520	15 ³ / ₄ " X 7 ³ / ₄ "	200
SmartVENT [®]	1540-510	15 ³ / ₄ " X 7 ³ / ₄ "	200
FloodVENT [®] Overhead Door	1540-524	15 ³ / ₄ " X 7 ³ / ₄ "	200
SmartVENT [®] Overhead Door	1540-514	15 ³ / ₄ " X 7 ³ / ₄ "	200
Wood Wall FloodVENT [®]	1540-570	14" X 8 ³ / ₄ "	200
Wood Wall FloodVENT [®] Overhead Door	1540-574	14" X 8 ³ / ₄ "	200
SmartVENT [®] Stacker	1540-511	16" X 16"	400
FloodVent [®] Stacker	1540-521	16" X 16"	400

For SI: 1 inch = 25.4 mm; 1 square foot = m²

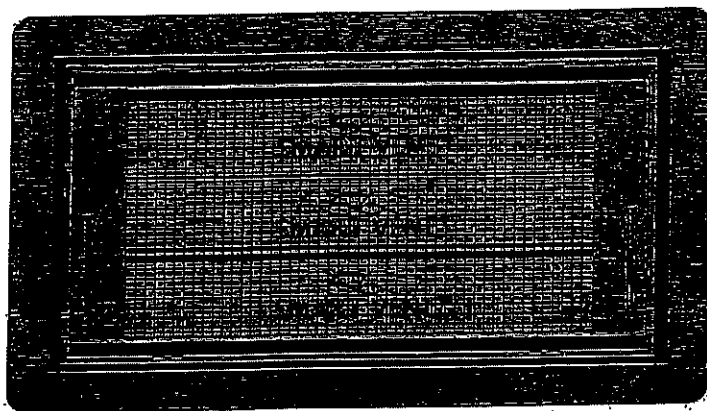


FIGURE 1—SMART VENT: MODEL 1540-510

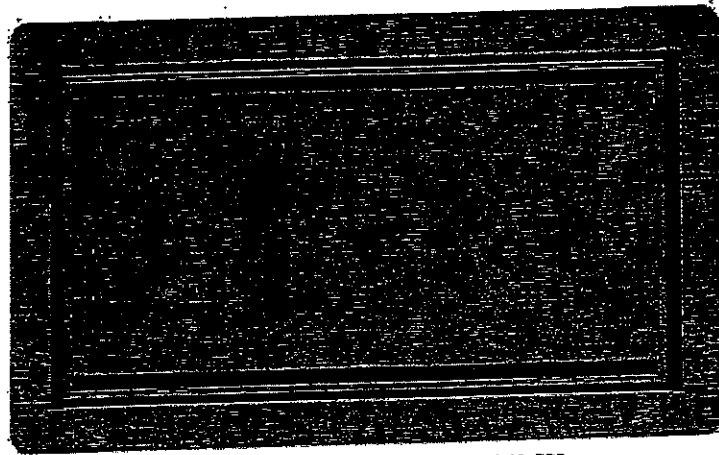


FIGURE 2—SMART VENT MODEL 1540-520

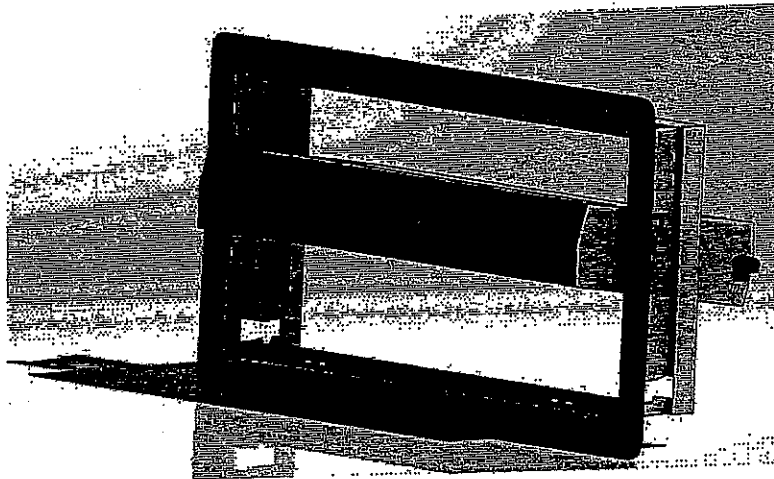


FIGURE 3—SMART VENT: SHOWN WITH FLOOD DOOR PIVOTED OPEN

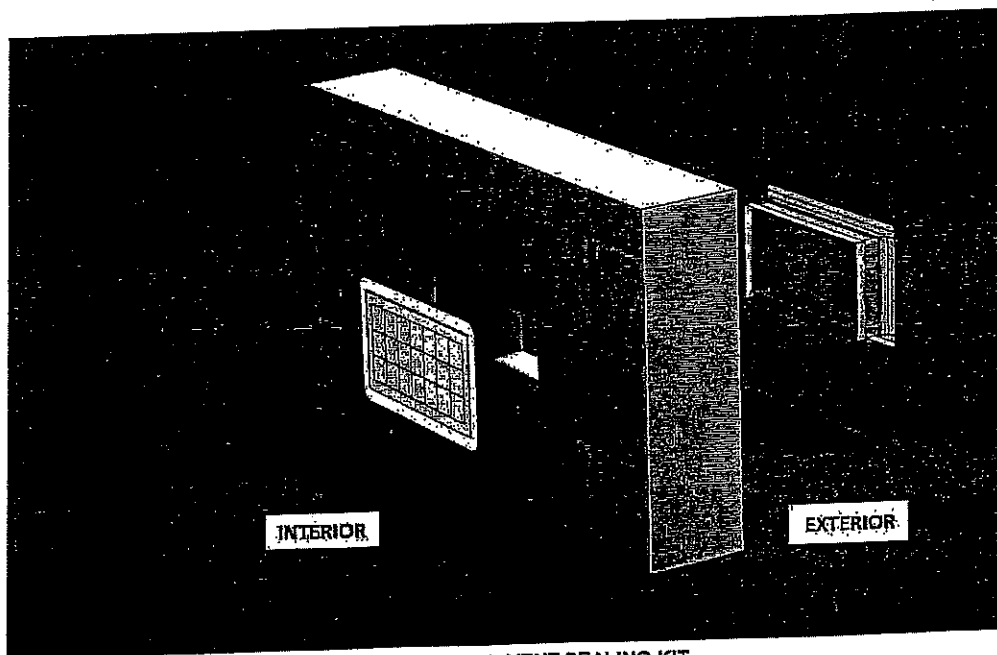


FIGURE 4—FLOOD VENT SEALING KIT

ICC-ES Evaluation Report

ESR-2074 CBC and CRC Supplement

Reissued February 2019

This report is subject to renewal February 2021.

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A Subsidiary of the International Code Council®

DIVISION: 08 00 00—OPENINGS

Section: 08 95 43—Vents/Foundation Flood Vents

REPORT HOLDER:

SMART VENT PRODUCTS, INC.

EVALUATION SUBJECT:

SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS: MODELS #1540-520; #1540-521; #1540-510; #1540-511; #1540-570; #1540-574; #1540-524; #1540-514
FLOOD VENT SEALING KIT #1540-526

1.0 REPORT PURPOSE AND SCOPE

Purpose:

The purpose of this evaluation report supplement is to indicate that Smart Vent® Automatic Foundation Flood Vents, recognized in ICC-ES master evaluation report ESR-2074, have also been evaluated for compliance with codes noted below.

Applicable code edition:

- 2016 California Building Code (CBC)
- 2016 California Residential Code (CRC)

2.0 CONCLUSIONS

2.1 CBC:

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the master evaluation report ESR-2074, comply with 2016 CBC Chapter 12, provided the design and installation are in accordance with the 2015 *International Building Code*® (IBC) provisions noted in the master report and the additional requirements of CBC Chapters 12, 16 and 16A, as applicable.

The products recognized in this supplement have not been evaluated under CBC Chapter 7A for use in the exterior design and construction of new buildings located in any Fire Hazard Severity Zone within State Responsibility Areas or any Wildland-Urban Interface Fire Area.

2.2 CRC:

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the master evaluation report ESR-2074, comply with the 2016 CRC, provided the design and installation are in accordance with the 2015 *International Residential Code*® (IRC) provisions noted in the master report.

The products recognized in this supplement have not been evaluated under 2016 CRC Chapter R337, for use in the exterior design and construction of new buildings located in any Fire Hazard Severity Zone within State Responsibility Areas or any Wildland-Urban Interface Fire Area.

The products recognized in this supplement have not been evaluated for compliance with the International Wildland-Urban Interface Code®.

This supplement expires concurrently with the master report, reissued February 2019.

ICC-ES Evaluation Report

ESR-2074 FBC Supplement

Reissued February 2019

This report is subject to renewal February 2021.

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DIVISION: 08 00 00—OPENINGS

Section: 08 95 43—Vents/Foundation Flood Vents

REPORT HOLDER:

SMART VENT PRODUCTS, INC.

EVALUATION SUBJECT:

SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS: MODELS #1540-520; #1540-521; #1540-510; #1540-511;
#1540-570; #1540-574; #1540-524; #1540-514
FLOOD VENT SEALING KIT #1540-526

1.0 REPORT PURPOSE AND SCOPE

Purpose:

The purpose of this evaluation report supplement is to indicate that Smart Vent® Automatic Foundation Flood Vents, recognized in ICC-ES master report ESR-2074, have also been evaluated for compliance with the codes noted below.

Applicable code editions:

- 2017 Florida Building Code—Building
- 2017 Florida Building Code—Residential

2.0 CONCLUSIONS

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the master evaluation report ESR-2074, comply with the Florida Building Code—Building and the FRC, provided the design and installation are in accordance with the 2015 International Building Code® provisions noted in the master report.

Use of the Smart Vent® Automatic Foundation Flood Vents has also been found to be in compliance with the High-Velocity Hurricane Zone provisions of the Florida Building Code—Building and the Florida Building Code—Residential.

For products falling under Florida Rule 9N-3, verification that the report holder's quality assurance program is audited by a quality assurance entity approved by the Florida Building Commission for the type of inspections being conducted is the responsibility of an approved validation entity (or the code official when the report holder does not possess an approval by the Commission).

This supplement expires concurrently with the master report, reissued February 2019.

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 HARVEY MENDELSON

Policy Number:

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
 310 NORTH OXFORD AVENUE

Company NAIC Number:

City VENTNOR

State NJ

ZIP Code 08406

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
 BLOCK 214 LOT 17

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

A5. Latitude/Longitude: Lat. 39 - 20.726 Long. 74 - 28.761 Horizontal Datum: NAD 1927 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 7

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) 784 sq ft
- b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 4
- c) Total net area of flood openings in A8.b 800 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 0
- c) Total net area of flood openings in A9.b 0 sq in
- d) Engineered flood openings? Yes No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number
 CITY OF VENTNOR 345326

B2. County Name
 ATLANTIC

B3. State
 NJ

B4. Map/Panel Number
 345326 / 0001

B5. Suffix
 B

B6. FIRM Index Date
 JUNE 18, 1971

B7. FIRM Panel Effective/Revised Date
 SEPT. 15, 1983

B8. Flood Zone(s)
 A-8

B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
 10

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: RM # 2

Vertical Datum: 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) 6.0 feet meters
- b) Top of the next higher floor 15.6 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) 15.6 feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) 5.8 feet meters
- g) Highest adjacent (finished) grade next to building (HAG) 5.9 feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 5.8 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 STEVEN GLASSER PLS

License Number GS34853

Title PRESIDENT

Company Name PRICE GLASSER ASSOCIATES INC.

Address 331 TILTON ROAD

City NORTHFIELD

State NJ

ZIP Code 08225

Signature

Date 10.12.2016


Telephone 609 646 8757

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. 310 NORTH OXFORD AVENUE	Policy Number:
City VENTNOR State NJ ZIP Code: 08406	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 C2e ARE UTILITIES AT 15.6 THERE IS NO DUCT WORK IN THE ENCLOSURE AREA THIS PROPERTY HAS BEEN DESIGNATED TO BE IN FLOOD ZONE AE8 AS SHOWN ON FEMA PRELIMINARY FIRM MAP 34001CO451F BASED ON NAVD 1988 DATUM.

 Signature	Date 10.12.2016
--	-----------------

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.

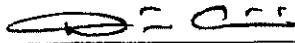
SECTION G – COMMUNITY INFORMATION (OPTIONAL)

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 _____
-------------------------	------------------------------	---

- 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 <u>Dino Cavalieri</u>	Title <u>C.P.M.</u>
Community Name <u>Ventnor</u>	Telephone <u>609 823-7987</u>
Signature 	Date <u>10-27-16</u>

Comments _____ Check here if attachments.

Building Photographs

See Instructions for Item A6.

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.
310 NORTH OXFORD AVENUE

Policy Number:

City VENTNOR

State NJ

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.



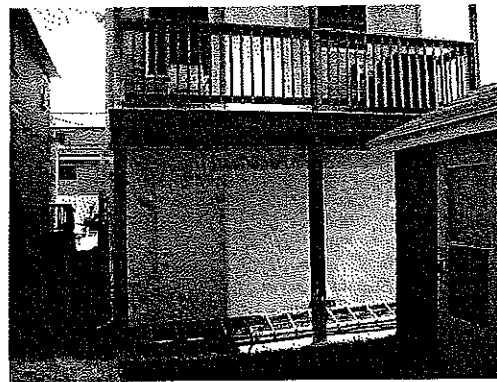
FRONT VIEW
10.12.2016



RIGHT SIDE VIEW FROM FRONT
10.12.2016



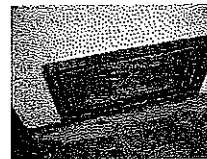
LEFT SIDE FROM FRONT VIEW
10.12.2016



REAR VIEW
10.12.2016



Smart Vent
Model 1540-520
Net Area = 200 sq. in.



Smart Vent
Model 1540-510
Net Area = 200 sq. in.

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number: 1680-0008
Expiration: 11/30/2018

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				FORM INSURANCE COMPANY USE	
A1. Building Owner's Name ANTHONY MIRANDA				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 310 N SURREY AVE				Company NAIC Number:	
City VENTNOR CITY		State NJ		Zip Code 08406	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 211 LOT 14					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL					
A5. Latitude/Longitude: Lat. N39°20'48" Long. W74°28'41" Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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>6</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>396</u> sq ft			a) Square footage of attached garage <u>N/A</u> sq ft		
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>2</u>			b) Number 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>400</u> sq ft			c) Total net area of flood openings in A9.b <u>N/A</u> sq ft		
d) Engineered flood openings? <input checked="" type="radio"/> Yes <input type="radio"/> No			d) Engineered flood openings? <input checked="" type="radio"/> Yes <input type="radio"/> No <i>John</i>		
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION				5-5-16	
B1. NFIP Community Name & Community Number VENTNOR 345326		B2. County Name ATLANTIC		B3. State NJ	
B4. Map/Panel Number 345326/0001	B5. Suffix B	B6. FIRM Index Date 6/18/71	B7. FIRM Panel Effective/Revised Date 9/15/83	B8. Flood Zone(s) A-8	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="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA					
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> Finished Construction					
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. * A new Elevation Certificate will be required when construction of the building is complete.					
Benchmark Utilized: GPS			Vertical Datum: NGVD 1929		
Indicate elevation datum used for the elevations in Items a) through h) below. <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> 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)	<u>7.5</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters
b) Top of the next higher floor	<u>15.79</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	-	_____	<input type="radio"/> feet	<input type="radio"/> meters
d) Attached garage (top of slab)	<u>N/A</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>15.8</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>7.0</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>7.5</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>7.0</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters

ELEVATION CERTIFICATE

OMB Control Number: 1680-0008
Expiration: 11/30/2018

310 N SURREY AVE

VENTNOR CITY

NJ

08406

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?
 Check here if attachments. Yes No

PLACE
SEAL
HERE

Certifier's Name JAMES R. BONEY, PLS		License Number 24GS03126400	
Title PROFESSIONAL LAND SURVEYOR	Company Name JAMES R. BONEY & ASSOC., LLC		
Address 13 STONE MILL CT	City EGG HARBOR TWP	State NJ	Zip Code 08234
Signature	Date MAY 3, 2016	Telephone +1 (609) 788-8013	

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)
TWO STORY FRAME DWELLING ELEVATED ON PILING WITH A PARTIAL ENCLOSURE. MECHANICALS ARE AT OR ABOVE THE FF ELEV. THE ENCLOSURE IS VENTED WITH 'SMARTVENTS' MODEL 1540-510.
BOTTOM OF DUCTWORK IS AT ELEVATION 15.45 *J. Boney* MAY 5, 2016

Signature _____ Date MAY 3, 2016

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 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)		
<p>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.</p>		
<p>G1. <input type="checkbox"/> 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.)</p>		
<p>G2. <input type="checkbox"/> A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.</p>		
<p>G3. <input type="checkbox"/> The following information (Items G4 -G10) is provided for community floodplain management purposes.</p>		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
<p>G7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement</p>		
G8. Elevation of as-built lowest floor (including basement) of the building:	_____ - _____	<input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____
G9. BFE or (in Zone AO) depth of flooding at the building site:	_____ - _____	<input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____
G10. Community's design flood elevation:	_____ - _____	<input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____
Local Official's Name	Dino Cavalieri	Title C.F.M.
Community Name	Ventnor	Telephone 609 823-7987
Signature		Date 5-6-16
<p>Comments</p>		
<input type="checkbox"/> Check here if attachments.		

BUILDING PHOTOGRAPHS

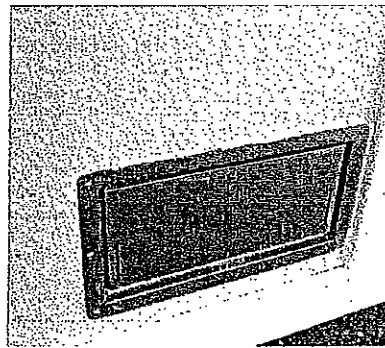
See Instructions for Item A6

OMB Control Number: 1680-0008
Expiration: 11/30/2018

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. 310 N SURREY AVE		Policy Number:	
City VENTNOR CITY	State NJ	Zip Code 08406	Company NAIC Number:

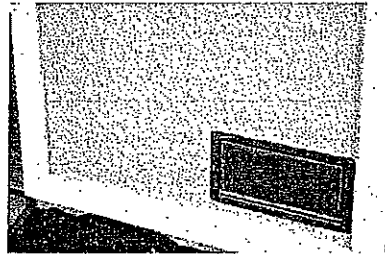
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front view" and "Rear view"; and, if required, "Right Side View" and "Left Side View." When applicable, 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.

5-4-16 FRONT



VENTS 5-4-16

5-4-16 REAR



DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number: 1680-0008
Expiration: 11/30/2018

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		FORM INSURANCE COMPANY USE	
A1. Building Owner's Name REBECCA VARATUNGARAJAN & JONATHAN CABNET		Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 20 N BUFFALO AVE		Company NAIC Number:	
City VENTNOR CITY	State NJ	Zip Code 08406	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) BLOCK 126 LOT 7			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)			
A5. Latitude/Longitude: Lat. 39-20-15 Long. 74-29-27 Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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 8			
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) 950SF sq ft	b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 6	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 A8.b 1200SI sq ft	d) Engineered flood openings? <input checked="" type="radio"/> Yes <input type="radio"/> No	c) Total net area of flood openings in A9.b N/A sq ft	d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION			
B1. NFIP Community Name & Community Number VENTNOR CITY 345326		B2. County Name ATLANTIC	B3. State NJ
B4. Map/Panel Number 345326/0001	B5. Suffix B	B6. FIRM Index Date 6-18-71	B7. FIRM Panel Effective/Revised Date 9-15-83
B8. Flood Zone(s) A8		B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____			
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____			
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA			
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)			
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> Finished Construction			
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. * A new Elevation Certificate will be required when construction of the building is complete.			
Benchmark Utilized: GPS		Vertical Datum: NGVD 1929	
Indicate elevation datum used for the elevations in items a) through h) below. <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> 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)	8.5	-	<input checked="" type="radio"/> feet <input type="radio"/> meters
b) Top of the next higher floor	13.47	-	<input checked="" type="radio"/> feet <input type="radio"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	-	<input type="radio"/> feet <input type="radio"/> meters
d) Attached garage (top of slab)	N/A	-	<input type="radio"/> feet <input type="radio"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	13.80	-	<input checked="" type="radio"/> feet <input type="radio"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	8.5	-	<input checked="" type="radio"/> feet <input type="radio"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	8.8	-	<input checked="" type="radio"/> feet <input type="radio"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	8.5	-	<input checked="" type="radio"/> feet <input type="radio"/> meters

ELEVATION CERTIFICATE

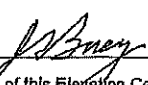

OMB Control Number: 1680-0008
Expiration: 11/30/2018


20 N BUFFALO AVE

VENTNOR CITY

NJ

08406

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION				
<p>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.</p>				
<input checked="" type="checkbox"/> Check here if attachments.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="radio"/> Yes <input type="radio"/> No		
Certifier's Name JAMES R BONEY PLS		License Number 24GS03126400		
Title PROFESSIONAL LAND SURVEYOR		Company Name JAMES R BONEY & ASSOC.,LLC		
Address 13 STONE MILL COURT		City EGG HARBOR TWP.	State NJ	Zip Code 08234
Signature 		Date 8-7-16	Telephone +1 (609) 788-8013	
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.				
Comments (including type of equipment and location, per C2(e), if applicable) TWO STORY FRAME DWELLING A/C IS OUTSIDE ON PLATFORM. ALL OTHER MECHANICALS ARE AT OR ABOVE THE FF ELEVATION. THE CRAWLSPACE IS EQUIPPED WITH SMARTVENTS MODEL 1504-510. THERE IS NO DUCTWORK IN THE CRAWLSPACE.				
Signature 		Date 6-7-16		
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 <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet _____ meters <input type="checkbox"/> above or <input type="checkbox"/> 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 <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E3. Attached garage (top of slab) is _____ feet _____ meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is _____ feet _____ meters <input type="checkbox"/> above or <input type="checkbox"/> 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? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> 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				
<input type="checkbox"/> Check here if attachments.				

SECTION G - COMMUNITY INFORMATION (OPTIONAL)		
<p>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.</p>		
<p>G1. <input type="checkbox"/> 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.)</p>		
<p>G2. <input type="checkbox"/> A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.</p>		
<p>G3. <input type="checkbox"/> The following information (Items G4 - G10) is provided for community floodplain management purposes.</p>		
G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
<p>G7. This permit has been issued for: <input type="checkbox"/> New Construction <input type="checkbox"/> Substantial Improvement</p>		
<p>G8. Elevation of as-built lowest floor (including basement) of the building: _____ - _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p>		
<p>G9. BFE or (in Zone AO) depth of flooding at the building site: _____ - _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p>		
<p>G10. Community's design flood elevation: _____ - _____ <input type="checkbox"/> feet <input type="checkbox"/> meters Datum _____</p>		
Local Official's Name	Dino Cavalieri	Title C.F.M.
Community Name	Ventnor	Telephone 609 823-7987
Signature		Date 6-9-16
<p>Comments</p>		
<p><input type="checkbox"/> Check here if attachments.</p>		

BUILDING PHOTOGRAPHS
See Instructions for Item A6

OMB Control Number: 1660-0008
Expiration: 11/30/2018

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. 20 N BUFFALO AVE		Policy Number:	
City VENTNOR CITY	State NJ	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.

FRONT 5-25-16



REAR 5-25-16

