U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

	and the meaner of the series		
SECTION A – PROPERTY INFORMATION			FOR INSURANCE COMPANY USE
A1. Building Owner's Name: Adam Sherer			Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 482 EastBay Avenue			Company NAIC Number:
City: Barnegat	State: NJ ZIP Code: (08005-2471	
A3. Property Description (Lot and Block Numbers, Tax Parcel Lots 1, 2,2.01, 3 & 4, Block 207, Barnegat Township	Number, Legal Description, etc.)		
 A4. Building Use (e.g., Residential, Non-Residential, Addition, A5. Latitude/Longitude: Lat. 39°44'50.37" Long. 74°12'00.80 A6. Attach at least 2 photographs of the building if the Certification A7. Building Diagram Number: 6 A8. For abuilding with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b d) Eigineered flood openings? Yes \(\subseteq \) No 	0" Horizontal I ate is being used to obtain flood insur A9. For a b 466 sq ft a) Sqi e b) Nui 3 witl 600 sq in c) Tot	ouilding with an attac uare footage of attac mber of permanent i hin 1.0 foot above ac	ched garage: ched garage N/A sq ft flood openings in the attached garage djacent grade 0 openings in A9.b 0 sq in
SECTION B - FLOOD	INSURANCE RATE MAP (FIRM	M) INFORMATION	1
B1. NFIP Community Name & Community Number: Barnegat, Township of 340396	B2. County Name: Ocean	L i	B3. State: New Jersey
B4. Map/Panel Number 30429C0502 B5. Suffix F B6. FIRM Index September 29, 2		B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
☐ FIS Profile ☐ FIRM ☐ Community De 311. Indicate elevation datum used for BFE in Item B9: ☐ NG 312. Is the building located in a Coastal Barrier Resources Syst Designation Date:	VD 1929 ⊠ NAVD 1988	Other/Source: Cted Area (OPA)?	☐ Yes ☒ No
SECTION C - BUILDING	ELEVATION INFORMATION (S	SURVEY REQUIR	ED)
 Building elevations are based on: Construction D *A new Elevation Certificate will be required when construction: Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–below according to the building diagram specified in Item A7 Benchmark Utilized: RTCM-ID 0245 Indicate elevation datum used for the elevations in items a) Datum used for building elevations must be the same as that 	rawings*	Construction* E, AR/A1–A30, AR/A I NAVD 1988 □ Oti	Finished Construction SH, AR/AO. Complete Items C2.a-h
a) Top of bottom floor (including basement, crawlspace, or e	enclosure floor) 3.8		⊠ feet ☐ meters
b) Top of the next higher floor	12.9		☑ feet ☐ meters
 c) Bottom of the lowest horizontal structural member (V Zond) Attached garage (top of slab) 	The state of the s	40	feet meters
e) Lowest elevation of machinery or equipment servicing the (Describe type of equipment and location in Comments)	building N/A 12.2*		☐ feet ☐ meters ☑ feet ☐ meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>3.6</u>		
 g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stair 	s, including structural support 3.0		
This certification is to be signed and sealed by a land surveyor, nformation. I certify that the information on this Certificate representation and that any false statement may be punishable by fine	sents my best efforts to interpret the	aw to certify elevation data available.	
Check here if comments are provided on back of form.	Were latitude and longitude in Section		
Check here if attachments.	licensed land surveyor?	s 🗌 No	
Certifier's Name: Jay F. Pierson	License Number: 2		
	East Coast Engineering, Inc. (201	10-0302)	
Address: 508 Main Street City: Toms River	State: NJ ZIP C	Code: 08753	
Signature: Date: 02 2	Telephone: 732-24	44-3030	

ELEVATION CERTIFICATE, page 2 IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY USE Policy Number: Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 482 East Bay Avenue City: Barnegat State: NJ ZIP Code: 08005 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: Lowest utility is a/c deck (condensers not installed) at elevation 12.2. Electric outlets at elevation 7.1. Electric meter at elevation 9.0. Water purifying tanks on wood deck at elevation 6.0. There are (3) Smart Vent Model No. 1540-570 in enclosure wall certified to cover 200 s.f. each. Property located in Flood Zone AB (EL 8) and within an Area of Moderate Wave Action as shown on Preliminary FIRM No. 34029C0502G, released January 30, 2015. Latitude & Longitude obtained by GPS. Signature: 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. 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. ☐ feet ☐ meters ☐ above or ☐ below the HAG. E3. Attached garage (top of slab) is 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: ZIP Code: State: City: Signature: Telephone: Date: 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. 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. \Box 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: Datum _ meters l feet 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: Telephone: Signature: Date: Comments

Check here if attachments.

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 482 East Bay Avenue

Policy Number:

City: Barnegat

State: NJ ZIP Code: 08005

Company NAIC Number:

FOR INSURANCE COMPANY USE

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.



482 East Bay Avenue, Left Front, 03/10/15



482 East Bay Avenue, Right Rear, 03/10/15

Building Photographs Continuation Page

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE Policy Number:
Building Street Address (including Apt., Unit, Suite, and/ 482 East Bay Avenue			
City: Barnegat	State: NJ	ZIP Code: 08005	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.





482 East Bay Avenue, Smart Vent, 03/10/15



482 East Bay Avenue, Water Purifying Equipment, 03/10/15