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

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1–9.

OMB No. 1660-0008
Expiration Date: July 31, 2015

SECTION A – PROPERTY INFORMATION

FOR INSURANCE COMPANY USE
Policy Number:
Company NAIC Number:

A1. Building Owner's Name: Brandywine Construction

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 322 99th Street

City: Stone Harbor State: NJ ZIP Code: 08247

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): Block: 96.04 Lots: 180 & 181

SUBSTANTIAL IMPROVEMENT

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

A5. Latitude/Longitude: Lat. 39° 03' 11" Long. 74° 45' 45" 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: 8

A8. For a building with a crawlspace or enclosure(s):
- a) Square footage of crawlspace or enclosure(s): 1228 sq ft
- b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: 7
- c) Total net area of flood openings in A8.b: see back sq in
- d) Engineered flood openings? ☒ Yes ☐ No

A9. For a building with an attached garage:
- a) Square footage of attached garage: _____ sq ft
- b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: _____
- c) Total net area of flood openings in A9.b: _____ sq in
- d) Engineered flood openings? ☐ Yes ☐ No

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number	B2. County Name	B3. State
Borough of Stone Harbor 345323	Cape May	New Jersey

B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/ Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
345323 0001	C	7/15/92	07/15/1992	A7	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: _____ 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)	6.3	☒ feet	☐ meters
b) Top of the next higher floor	12.6	☒ 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)	11.4	☒ feet	☐ meters
f) Lowest adjacent (finished) grade next to building (LAG)	5.9	☒ feet	☐ meters
g) Highest adjacent (finished) grade next to building (HAG)	6.9	☒ feet	☐ meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	5.9	☒ 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.
☒ Check here if attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☒ No

Certifier's Name	License Number		
Gary Lee Thomas	23921		
Title: Professional Land Surveyor	Company Name: Thomas*Amey*Shaw, Inc.		
Address: 2900 Dune Drive, Ste. 8	City: Avalon	State: NJ	ZIP Code: 08202
Signature	Date: 07/21/2015	Telephone: (609) 967-3999	

NJ Lic. No. 23921
PLACE SEAL HERE
7-21-15

ELEVATION CERTIFICATE, page 2

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. 322 99th Street			Policy Number
City Stone Harbor	State NJ	ZIP Code 08247	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 *Subtract 1.3 feet from NGVD 1929 to convert to NAVD 1988
A8.c. 7 Smartvents (Model #1540-510) were installed to cover 200 square feet each. See attached.
C2.e. HVAC Platform

Signature [signature] Date 07/21/2015

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)

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–G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
14-11291	12/16/14	8/5/15

G7. This permit has been issued for: ☐ New Construction ☒ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: 12.6 ☒ feet ☐ meters Datum NGVD 1929

G9. BFE or (in Zone AO) depth of flooding at the building site: 10.0 ☒ feet ☐ meters Datum NAVD 1988

G10. Community's design flood elevation: 11.0 ☒ feet ☐ meters Datum NGVD 1929

Local Official's Name MICHEAL KOOCHEMBERE Title CONSTRUCTION OFFICIAL

Community Name BOROUGH OF STONE HARBOR Telephone 609.368.6814

Signature [signature] Date 8/10/15

Comments

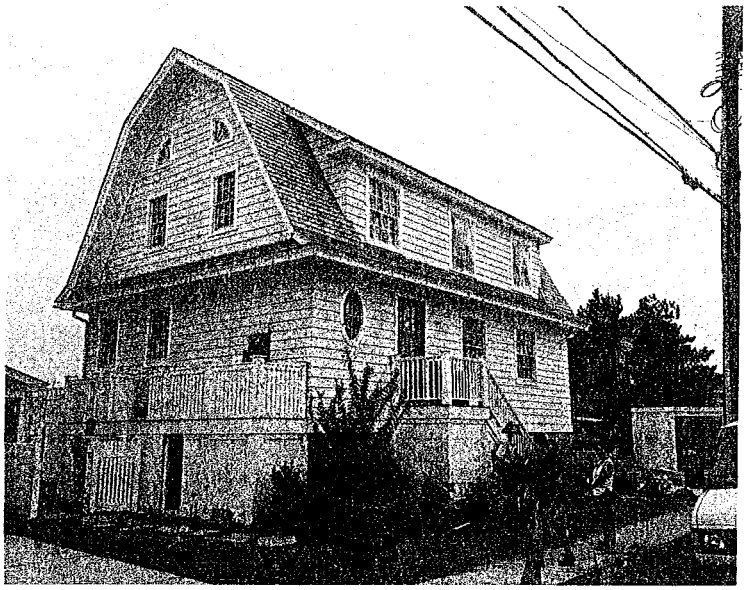
☐ Check here if attachments.

Building Photographs

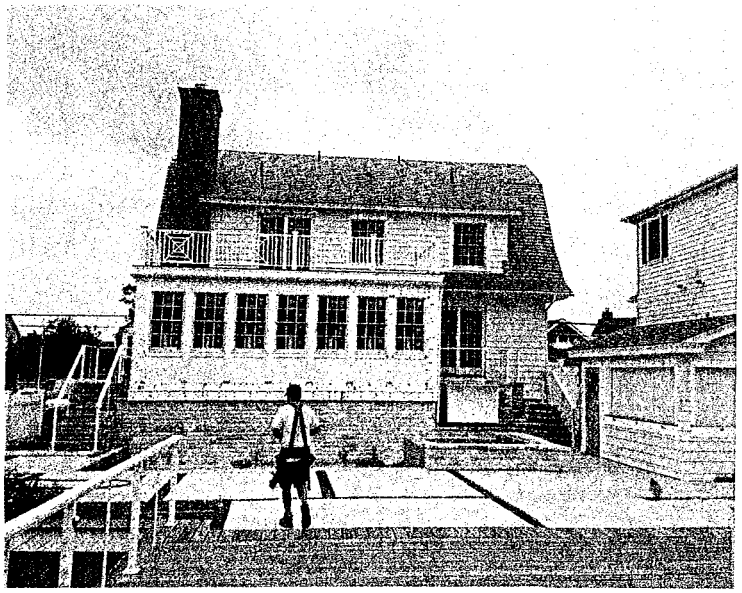
See Instructions for Item A6

			For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box 322 99th Street			Policy Number
City Stone Harbor	State NJ	ZIP Code 08247	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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". If submitting more photographs than will fit on this page, use the Continuation Page, following.



DATE: July 21, 2015 – Front View of House



DATE: July 21, 2015 – Rear View of House

ICC EVALUATION SERVICE
Most Widely Accepted and Trusted

ICC-ES Evaluation Report

ESR-2074*

Reissued December 1, 2012

This report is subject to renewal February 1, 2015.

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

REPORT HOLDER:

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

EVALUATION SUBJECT:

SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS: FLOODVENT™ MODEL #1540-520; FLOODVENT™ STACKING MODEL #1540-521; SMARTVENT™ MODEL #1540-510; SMARTVENT™ STACKING MODEL #1540-511; WOOD WALL FLOOD MODEL #1540-570; WOOD WALL FLOOD OVERHEAD DOOR MODEL #1540-574; FLOODVENT™ OVERHEAD DOOR MODEL #1540-524; SMARTVENT™ OVERHEAD DOOR MODEL #1540-514

1.0 EVALUATION SCOPE

Compliance with the following codes:

- 2009 and 2006 *International Building Code®* (IBC)
- 2009 and 2006 *International Residential Code®* (IRC)

Properties evaluated:

- Physical operation
- Water flow

2.0 USES

The Smart Vent® units are automatic foundation flood vents (AFFVs) employed to equalize hydrostatic pressure on nonfire-resistance-rated foundation walls, rolling-type overhead doors and building walls subject to rising or falling flood waters. The Smart Vent® units are intended for use where flood hazard areas have been established in accordance with IBC Section 1612.3 or IRC Section R3222.1. Certain models also allow natural ventilation in accordance with Section 1203 of the IBC or Section 408.1 of the IRC.

3.0 DESCRIPTION

3.1 General:

When subjected to pressure from rising water, the Smart Vent® AFFVs disengage, 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 AFFV 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 plate to rotate out of the way and allow flow. The water level stabilizes, equalizing the lateral forces. Each unit is fabricated from stainless steel. 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 AFFVs comply with the design principle noted in Section 2.6.2.2 of ASCE/SEI 24 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 AFFVs must be installed in accordance with Section 4.0.

3.3 Model Sizes:

The FloodVENT™ Model #1540-520, SmartVENT™ Model #1540-510, FloodVENT™ Overhead Door Model #1540-524, and SmartVENT™ Overhead Door Model #1540-514 units measure $15^3/_4$ inches wide by $7^3/_4$ inches high (400 by 196.9 mm). The Wood Wall Flood Model #1540-570 and Wood Wall Flood Overhead Door Model #1540-574 units measure 14 inches wide by $8^3/_4$ inches high (355.6 by 222.25 mm). The SmartVENT™ Stacking Model #1540-511 and FloodVENT™ Stacking Model #1540-521 units measure 16 inches wide by 16 inches high (406.4 by 406.4 mm).

3.4 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 mm^2) 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 mm^2) of net free area to supply natural ventilation. Other AFFVs recognized in this report do not offer natural ventilation.

4.0 INSTALLATION

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. The mounting straps allow mounting in wood, masonry and

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concrete walls up to 12 inches (305 mm) thick. In order to comply with the engineered opening design principle noted in Section 2.6.2.2 of ASCE/SEI 24, the Smart Vent® AFFVs must be installed as follows:

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one AFFV for every 200 square feet (18.6 m^2) 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 AFFV for every 400 square feet (37.2 m^2) of enclosed area.
- Below the base flood elevation.
- With the bottom of the AFFV located a maximum of 12 inches (305.4 mm) above grade.

5.0 CONDITIONS OF USE

The Smart Vent® AFFVs 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® AFFVs 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® AFFVs 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

Data in accordance with the ICC-ES Acceptance Criteria for Automatic Foundation Flood Vents (AC364), dated October 2007.

7.0 IDENTIFICATION

The Smart VENT® models 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).

BOROUGH OF STONE HARBOR
9508 SECOND AVENUE
STONE HARBOR, NJ 08247

Date Issued 08/05/15
Control #
Permit # 14-11291

UCC NEW JERSEY
CERTIFICATE

IDENTIFICATION

Block 96.04 Lot 180 Qual ALT
Work Site Location 322 99TH STREET

Owner in Fee/Occupant ROBERT FALESE
Address 3 BROOKWOOD DR
MEDFORD, NJ 08055-
Telephone ( ) -
Contractor BRANDYWINE DEVELOPERS
Address PO BOX 373
AVALON, NJ 08202-
Telephone ( ) - Fax ( ) -
Lic. No. or Bldrs. Reg. No.
Federal Emp. No. -

Home Warranty No.
[ ] State [ ] Private
Use Group R-5
Maximum Live Load 0
Construction Classification
Maximum Occupancy Load 0
Description of Work/Use:

RENO
RENOVATIONS TO SFH

[X] CERTIFICATE OF OCCUPANCY

This serves notice that said building or structure has been constructed in accordance with the New Jersey Uniform Construction Code and is approved for occupancy.

[ ] CERTIFICATE OF CLEARANCE - LEAD ABATEMENT 5:17

This serves notice that based on written certification, lead abatement was performed as per NJAC 5:17, to the following extent:
[ ] Total removal of lead-based paint hazards in scope of work
[ ] Partial or limited time period (____ years); see file

[ ] CERTIFICATE OF APPROVAL

This serves notice that the work completed has been constructed or installed in accordance with the New Jersey Uniform Construction Code and is approved. If the permit was issued for minor work, this certificate was based upon what was visible at the time of inspection.

[ ] CERTIFICATE OF CONTINUED OCCUPANCY

This serves notice that based on a general inspection of the visible parts of the building there are no imminent hazards and the building is approved for continued occupancy.

[ ] TEMPORARY CERTIFICATE OF OCCUPANCY/COMPLIANCE

If this is a Temporary Certificate of Occupancy or Compliance, the following conditions must be met no later than _____, ____ or the owner will be subject to fine or order to vacate:

[ ] CERTIFICATE OF COMPLIANCE

This serves notice that said potentially hazardous equipment has been installed and/or maintained in accordance with the New Jersey Uniform Construction Code and is approved for use until _____, ____.

Fee $ 918
Paid [X] Check No. 33088
Collected by: SMB

Construction Official

U.C.C. F260 (rev. 3/96)