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: November 30, 2022

JUN 26 2023

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

						BORDIGE	THE STONE HARROR
SECTION A - PROPERTY INFORMATION					FOR INSU	JRANCE COMPANY USE	
A1. Building Own						Policy Nu	mber:
Harbaugh Custom							
A2. Building Stree Box No. 249 110th Street	t Address (in	cluding Apt., Unit, Sui	te, and/o	r Bldg. No.)	or P.O. Route and	Company	NAIC Number:
City				State		ZIP Code	
Stone Harbor				New Je	rsey	08247	
A3. Property Desc Block 110.31 Lots	-	nd Block Numbers, Ta	ax Parce	l Number, Le	gal Description, e	etc.)	
		ntial, Non-Residential,	Addition	, Accessory,	etc.) Resident	tial	
A5. Latitude/Longi	tude: Lat N	39°02'40.32"	Lona, V	V 074°46'04.2	24" Horizont	al Datum: NAD	1927 X NAD 1983
_		hs of the building if th	_			_	
A7. Building Diagr	am Number	8					
		pace or enclosure(s):					
		space or enclosure(s)			882.00 sq ft		
b) Number of	permanent flo	ood openings in the cr	awlspace	e or enclosur	e(s) within 1.0 foo	ot above adjacent g	rade 5
			•	000.00 sq ii			
d) Engineered	flood openir	ngs? 🛛 Yes 🗌 N	No				=
A9. For a building v	vith an attach	ned garage:					
		ed garage		N/A sq f	ŀ		
		ood openings in the at	tached d			liacent grade N/A	•
		penings in A9.b	aonoa g	N/A so		jacont grado 1471	
d) Engineered		-	lo.				
		ger					
	SE	CTION B - FLOOD	NSURA	NCE RATE	MAP (FIRM) IN	FORMATION	
B1. NFIP Commun	ity Name & C	ommunity Number		B2. County	Name		B3. State
Borough of Stone H	larbor #3453	23		Cape May			New Jersey
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	M Panel ective/ rised Date	B8. Flood Zone(s)	B9. Base Flood I (Zone AO, us	Elevation(s) se Base Flood Depth)
34009C0242	F	10-05-2017	10-05-2		AE	8	
		Base Flood Elevation			•	d in Item B9:	
FIS Profile	⊠ FIRM	Community Determent	mined [Other/Sou	rce:		
B11. Indicate eleva	ition datum u	sed for BFE in Item B	9: 🗌 N	GVD 1929	X NAVD 1988	Other/Source:	
B12. Is the building	located in a	Coastal Barrier Reso	urces Sy	stem (CBRS) area or Otherwi	se Protected Area (OPA)? Yes × No
Designation D	ate:		CBRS	☐ OPA			

ELEVATION CERTIFICATE

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cy Number:
npany NAIC Number
RED)
o certify elevation information. understand that any false Check here if attachments.
Place Seal Here company, and (3) building owner. mart Flood Vents Model

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the correspond	ding information	from Section A.	FOR INSUF	RANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, an 249 110th Street	nd/or Bldg. No.) or	P.O. Route and Box No	D. Policy Num	ber:
City Stone Harbor	State New Jersey	ZIP Code 08247	Company N	AIC Number
SECTION E – BUILDING EI FOR ZON		RMATION (SURVEY) E A (WITHOUT BFE)	NOT REQUIRED)
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.	1–E5. If the Certifinatural grade, if a	icate is intended to supp vailable. Check the mea	port a LOMA or LO surement used. In	MR-F request, Puerto Rico only,
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest	d check the appropage (L adjacent grade (L	priate boxes to show wh AG).	nether the elevation	n is above or below
a) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet n	neters above	or Delow the HAG.
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is 		feetn	neters	or Delow the LAG.
E2. For Building Diagrams 6–9 with permanent flood of	openings provided	l in Section A Items 8 ar	nd/or 9 (see pages	1-2 of Instructions),
the next higher floor (elevation C2.b in the diagrams) of the building is	-	feet 🔲 n	neters 🔲 above	or below the HAG.
E3. Attached garage (top of slab) is		feetn	neters 🔲 above	or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		feet n	neters □ above	or Delow the HAG.
E5. Zone AO only: If no flood depth number is availab floodplain management ordinance? Yes	le, is the top of the	e bottom floor elevated i	in accordance with	the community's
SECTION F - PROPERTY OW	NER (OR OWNE	R'S REPRESENTATIVE	E) CERTIFICATIO	N
The property owner or owner's authorized representati community-issued BFE) or Zone AO must sign here. T	ve who completes he statements in S	Sections A, B, and E for Sections A, B, and E are	or Zone A (without e correct to the bes	a FEMA-issued or st of my knowledge.
Property Owner or Owner's Authorized Representative	's Name			
Address	C	City	State	ZIP Code
Signature	С	ate	Telephone	
Comments				

ELÉVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the core	responding information fro	m Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, S 249 110th Street	Suite, and/or Bldg. No.) or P.0	D. Route and Box No.	Policy Number:
City Stone Harbor	State New Jersey	ZIP Code 08247	Company NAIC Number
SECTION	ON G - COMMUNITY INFOR	RMATION (OPTIONAL)	
The local official who is authorized by law or o Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, er	n Certificate. Complete the ag		
G1. The information in Section C was takengineer, or architect who is authorized data in the Comments area below.)	ken from other documentation zed by law to certify elevation	n that has been signed an n information. (Indicate the	d sealed by a licensed surveyor, e source and date of the elevation
G2. A community official completed Sect or Zone AO.	tion E for a building located in	n Zone A (without a FEMA	\-issued or community-issued BFE)
G3. The following information (Items G4-	-G10) is provided for commu	nity floodplain manageme	ent purposes.
G4. Permit Number 22-12-05	G5. Date Permit Issued $G9 / J3 / J Z$	G6. D	ate Certificate of ompliance/Occupancy Issued
G7. This permit has been issued for:	New Construction Subs	stantial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	g basement)	feet	meters Datum NAV) 88
G9. BFE or (in Zone AO) depth of flooding at	the building site: AE	g ⊈ feet	meters Datum NAVD 88
G10. Community's design flood elevation:	Higher of BFE+2	or [] 🛛 feet	meters Datum NAVD 88
Local Official's Name	Title		
Raymond Poudner Co Community Name Stone Harbor	rstration Official Tele (609) 368-	Flood Plain A	deninis hastor
Store Harber	(609) 768-	epnone 1814	
Signature Al M-	Date 6 /28/23		
Comments (including type of equipment and loc	cation, per C2(e), if applicable	e)	
			Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy ti	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt.,	Policy Number:		
249 110th Street			
City	State	ZIP Code	Company NAIC Number
Stone Harbor	New Jersey	08247	1

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 (06/15/2023)

Clear Photo One

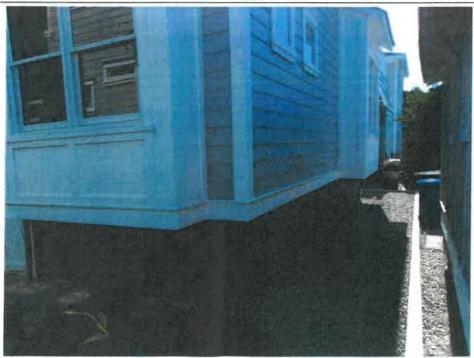


Photo Two

Photo Two Caption REAR VIEW (06/15/2023)

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 249 110th Street	Policy Number:		
City	State	ZIP Code	Company NAIC Number
Stone Harbor	New Jersey	08247	

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 Three Caption RIGHT SIDE VIEW (06/15/2023)

Clear Photo Three



Photo Four

Photo Four Caption LEFT SIDE VIEW (06/15/2023)

Clear Photo Four

- 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 February 2021).
- 6.2 Test report on air infiltration in accordance with ASTM F283

7.0 IDENTIFICATION

- 7.1 The Smart VENT® models and the Flood Vent Sealing Kit described 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

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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

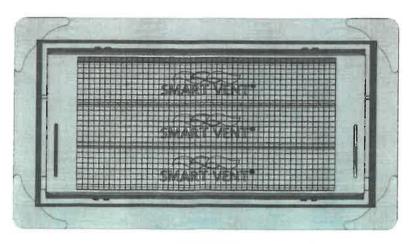


FIGURE 1-SMART VENT: MODEL 1540-510

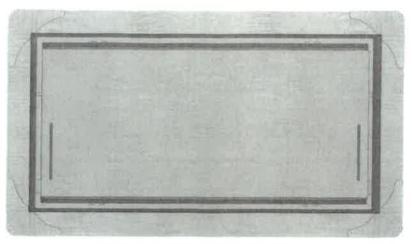


FIGURE 2—SMART VENT MODEL 1540-520



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

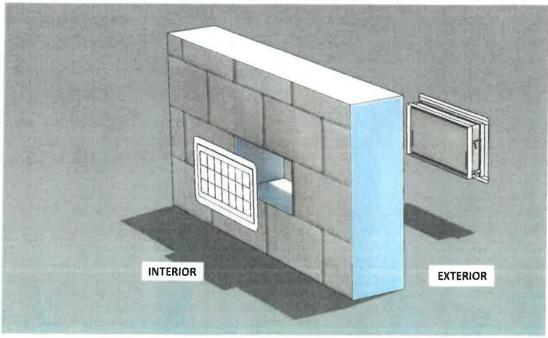


FIGURE 4-FLOOD VENT SEALING KIT