Township of Ocean

50 RAILROAD AVENUE
WARETOWN, NJ 08758

PHONE: (609) 693-3487
FAX: (609) 693-0478

Memo of Review for Accuracy and Completion

The attached FEMA Elevation Certification 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.

FOR INSURANCE CO USE
Policy#
Co. NAIC#

SECTION A – PROPERTY INFORMATION

1. **Building Owner's Name:** Woodland
2. **Building Street Address:** 100 Dock Rd
   City: Waretown **State** NJ **Zip code** 08758
3. **Property Description: Block and Lot Tax Parcel# or legal description:** Block 86 Lot 34 Township of Ocean
4. **Building Use (Residential, Non-Residential, Addition, Accessory, etc. :** _____
5. **Latitude/Longitude: Lat.**_____ **Long.**_____ **Horizontal Datum: NAD 1927** ☐ **1983** ☐
6. **Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.**
7. **Building Diagram#** _____
8. **For a building with a crawlspace or enclosure:**
   a. **Square** footage of crawlspace or enclosure _____sq.ft
   b. # of permanent flood openings in the crawlspace or enclosure(s) within 1.0 ft above adjacent grade_____
   c. Total net area of flood openings in AS.b _____sq.in.
   d. Engineered Flood Openings? YES ___ No___

   For a building with an attached garage:
   a. Square foot of attached garage ___sq.ft
   b. # of permanent flood openings in the crawlspace or enclosure(s) within 1.0 ft above adjacent grade_____
   c. Total net area of flood openings in AS.b _____sq.in.
   d. Engineered Flood Openings? YES ___ No___

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

1. NFIP COMMUNITY NAME & COMMUNITY # _____
2. COUNTY NAME: _____ 3. STATE: _____
4. Map/Panel# 34029C0416 5. Suffix_____ 6. Firm Index Date_____
7. FIRM Panel Effective/Revised Date_____ 8. Flood Zone(s) _____
9. BFE – Base Flood Elevation(s) (Zone AO, use base flood depth) _____
10. Check the source of the Base Flood Foundation (BFE) data or base flood depth entered in item #9:
FIS Profile____ FIRM_____ Community Determined _____ Other/Source_____
11. Check elevation datum used for BFE in item#9: NGVD 1929 _____ NAVD 1988 _____ Other/Source _____
12. 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)

1. Building elevations are based on (check one):
_____ Construction Drawings* _____Building Under Construction* _____ Finished Constructions
* A new Elevation Certificate will be required when construction of the building is complete.

Local Officials Name: Louis F Fischer Title: Construction Official / CFM

Community Name: Township of Ocean Telephone # 609-693-3478

Signature: Louis F Fischer Date: _____

Comments: _____

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

ELEVATION CERTIFICATE

Appl date 4/30/12

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
Policy Number:
Company NAIC Number:

A1. Building Owner's Name JESSICA WOODLAND

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
100 DOCK ROAD
City WARE TOWN, OCEAN TOWNSHIP State NJ ZIP Code 08758

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
LOT 34 BLOCK 86

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

A5. Latitude/Longitude: Lat. 8N 39 48 25.33 Long. W 74 10 54.11 8 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) 1200 sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 5
c) Total net area of flood openings in A8.b 1442 sq in
d) Engineered flood openings? ☒ Yes ☐ No

A9. For a building with an attached garage:
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 _____
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
OCEAN TOWNSHIP, 340518	OCEAN	NJ

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)
34029C 0416 F	F	2/28/75	9/29/06	AE	6.0

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: OTMUA GIS Vertical Datum: NAVD 1988
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)	4.3	☒ feet	☐ meters
b) Top of the next higher floor	9.3	☐ 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)	9.1	☐ feet	☐ meters
f) Lowest adjacent (finished) grade next to building (LAG)	3.7	☐ feet	☐ meters
g) Highest adjacent (finished) grade next to building (HAG)	3.8	☐ feet	☐ meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	3.8	☒ feet	☐ meters

received 9-23-14

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

PLACE SEAL HERE

Certifier's Name EDWARD ANGSTER		License Number NJ PE/LS 13450
Title	Company Name	
Address 29 CENTRAL AVE	City TOMS RIVER	State NJ ZIP Code 08753
Signature	Date 2014	Telephone 732 244 4466

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.	Policy Number:
City State ZIP Code	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 FEMA PRELIMINARY FIRM ELEV 7.0 FOUNDATION HAS 3 SMART VENTS 600 SI AND 2 BLOW OUT PANELS MEASURING 2.5' X 1.17' 842 SI FOR TOTAL OF 1442SI

Signature Date 31 JULY 2014

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 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.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 100 DOCK			Policy Number:
City WARETOWN	State NJ	ZIP Code 08758	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

31 JULY 2014 FRONT ELEVATION

Building Photographs

Continuation Page

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

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 100 DOCK	FOR INSURANCE COMPANY USE Policy Number:
City WARETOWM State NJ ZIP Code 08758	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.

REAR ELEVATION 31 JULY 2014