

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.

SECTION A - PROPERTY INFORMATION

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|----------------------|
| FOR INSURANCE CO USE |
| Policy# |
| Co. NAIC# |
1. **Building Owner's Name:** Mecedo
 2. **Building Street Address:** 81 BAITIL AVE
City: Waretown State NJ Zip code 08758
 3. **Property Description:** Block and Lot, Tax Parcel# or legal description: Block 200 Lot 39 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:**

<ol style="list-style-type: none"> 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 ___ 	<p>For a building with an attached garage:</p> <ol style="list-style-type: none"> 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 ___
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SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

1. NFIP COMMUNITY NAME & COMMUNITY # 340518
2. COUNTY NAME: _____ 3. STATE: _____
4. Map/Panel# _____ 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: Missed community #

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 GRACE MECEDO

Policy Number:

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

Company NAIC Number:

City OCEAN

State NJ

ZIP Code 08758

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
 LOT 39 BLOCK 200

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

A5. Latitude/Longitude: Lat. 39° 47' 17.0" Long. 74° 11' 16.4"

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 5

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

- a) Square footage of crawlspace or enclosure(s) 0 sq ft
- b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 0
- c) Total net area of flood openings in A8.b 0 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

Received
8-31-15

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number OCEAN <u>340518</u>	B2. County Name OCEAN	B3. State NJ
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B4. Map/Panel Number 34029C0412	B5. Suffix F	B6. FIRM Index Date SEPT. 29, 2006	B7. FIRM Panel Effective/Revised Date SEPT. 29, 2006	B8. Flood Zone(s) X	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) NONE
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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: MONUMENT # A19348

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) 14.0 feet meters
- b) Top of the next higher floor 23.0 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) 13.7 feet meters
- f) Lowest adjacent (finished) grade next to building (LAG) 3.4 feet meters
- g) Highest adjacent (finished) grade next to building (HAG) 4.3 feet meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 3.4 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 EDWARD M. WEINERT P.L.S., P.P.

License Number 24GS03128400

Title TREASURER

Company Name WSB ENGINEERING GROUP, P.A.

Address 1018 SCHENCKS MILL LINE RD. City TOMS RIVER

State NJ ZIP Code 08753

Signature [Signature] Date 8/28/15

Telephone 732-244-7227

PLACE SEAL HERE

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.
81 BALTIC AVENUE

Policy Number:

City OCEAN

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.



Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
81 BALTIC AVENUE

Policy Number:

City OCEAN

State NJ ZIP Code 08757

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.

