U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

2 OMB No. 1660-0008 Expires February 28, 2009

Federal Emergency Management Agency National Flood Insurance Program

Important: Read the instructions on pages 1-8.

A1 Pullston Courset Name CONTROL SECTION A - PRO	OPERTY INFORMATION	For Insurance Company Use:
A1. Building Owner's Name DONNA S. FRANK & LAWRENCE FRANH, JR.		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P 107 STILLWATER ROAD	.O. Route and Box No.	Company NAIC Number
City BARNEAGT State NJ ZIP Code 08005		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal LOT 438 BLOCK 272, OC3EAN TOWNSHIP, OCEAN COUNTY, NEW JERSE	Description, etc.) Y	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc. A5. Latitude/Longitude: Lat. 39.765821 Long74.194526 (GEOCORDER) A6. Attach at least 2 photographs of the building if the Certificate is being used A7. Building Diagram Number 8 A8. For a building with a crawl space or enclosure(s), provide a) Square footage of crawl space or enclosure(s) b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b SECTION B - FLOOD INSURANCE	Horizontal Dad to obtain flood insurance. A9. For a building with an attach a) Square footage of attach b) No. of permanent flood walls within 1.0 foot abo	ned garage <u>400</u> sq ft openings in the attached garage we adjacent grade 2
B1. NFIP Community Name & Community Number B2. County Na		
OCEAN COUNTY / 34029C0414F OCEAN		3. State EW JERSEY
Date Effective	FIRM Panel B8. Flood /e/Revised Date Zone(s) 9/29/2006 AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area Designation Date CBRS	□ OPA	□Yes □No D)
 C1. Building elevations are based on:	☐ Building Under Construction* g is complete. i), AR, AR/A, AR/AE, AR/A1-A30, AR/AH,	☑ Finished Construction AR/AO. Complete Items C2.a-g
——————————————————————————————————————	Check the measureme	nt used.
Top of bottom floor (including basement, crawl space, or enclosure floor) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) f) Lowest adjacent (finished) grade (LAG) g) Highest adjacent (finished) grade (HAG)	6.4	Rico only) Rico only) (Puerto Rico only) Rico only) Rico only) Rico only) Rico only)
SECTION D - SURVEYOR, ENGINEER	, OR ARCHITECT CERTIFICATION	· · · · · · · · · · · · · · · · · · ·
This certification is to be signed and sealed by a land surveyor, engineer, or archinformation. I certify that the information on this Certificate represents my best en I understand that any false statement may be punishable by fine or imprisonment. Check here if comments are provided on back of form.	nitect authorized by law to certify elevation	C268.
Certifier's Name ROBERT W. SMITH, JR.	License Number NJ PLS 23934	
Title SURVEYOR Company Name GRAVATT (1 (min ma . min
Address 414 LACEY ROAD Ofty FORKED RIVER	State NJ ZIP Code 08731 e 609-693-6127	_

-i	copy the corresponding information			or Insurance Company Use:
107 STILLWATER ROAD	t., Unit, Suite, and/or Bldg. No.) or P.O. Ro	oute and Box No.		olicy Number
City BARNEGAT State NJ ZIP Cod	e 08005		С	ompany NAIC Number
SECTION	N D - SURVEYOR, ENGINEER, OR A	RCHITECT CERTIFICA	ATION (CONTIN	(UED)
Copy both sides of this Elevation Cert	tificate for (1) community official, (2) insura	nce agent/company, and (3) building owner.	<u> </u>
Comments C2e= HOT WATER HEATER AND FURNACE ON ARE LOCATED IN THE GARAGE AND ARE ELEVATED ABOVE GARAGE FLOOR ON A PLATFORM. THE AIR COMPRESSOR ON THE OUTSIDE IS ALSO ELEVATED ON A PLATFORM.				
KohA VU, J				
Signature		Date 12/26/07		☐ Check here if attachments
SECTION E - BUILDING ELE	EVATION INFORMATION (SURVEY I	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 Puerfo 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, crawl space, or enclosure) is				
Comments				
				☐ Check here if attachments
	SECTION G - COMMUNITY I	•		
and G of this Elevation Certificate. Con	aw or ordinance to administer the commun mplete the applicable item(s) and sign belo	w. Check the measureme	nt used in Items G	8. and G9.
is authorized by law to certify	was taken from other documentation that a elevation information. (Indicate the source	e and date of the elevation	data in the Comm	nents area below.)
	ed Section E for a building located in Zone		•	ued BFE) or Zone AO.
	ems G4G9.) is provided for community flo			
G4. Permit Number	G5. Date Permit Issued	G6. Date Certifi	icate Of Complian	ce/Occupancy issued
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (in G9. BFE or (in Zone AO) depth of flood	cluding basement) of the building:	intial improvement		
Local Official's Name		Title		
Community Name		Telephone	 	
Signature		Date	 -	
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 No. 107 STILLWATER ROAD

Policy Number

City BARNEGAT State NJ ZIP Code 08005

Company NAIC Number

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.

FRONT VIEW (12/20/07



Building Photographs Continuation Page

	For Insurance Company Use:
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
107 STILLWATER ROAD	
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."

