U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY	ELEVATION CERT	IFICATE	OMB No. 1660-0008			
National Flood Insurance Program Ir	Expiration Date: July 31, 2015					
WARY 1/22/14	SECTION A - PROPER	RTY INFORMATION	FOR INSURANCE COMPANY USE			
A1./Building Owner's Name Jeff Ciborowski & 0	Georgia Escoffery		Policy Number:			
A2. Building Street Address (including Apt., Unit 227 Bay Shore Drive	t, Suite, and/or Bldg. No.) or P.O. Ro	oute and Box No.	Company NAIC Number:			
City Barnegat	State NJ	ZIP Code 08005				
A3. Property Description (Lot and Block Numbe Tax Lot 1 Block 274.03, Ocean Township, Ocean	rs, Tax Parcel Number, Legal Descr n County, NJ	iption, etc.)				
 A4. Building Use (e.g., Residential, Non-Reside A5. Latitude/Longitude: Lat. 39-45'-48.5" Long A6. Attach at least 2 photographs of the building A7. Building Diagram Number 6 A8. For a building with a crawispace or enclosural A9. Square footage of crawispace or enclosural A9. Number of permanent flood openings in or enclosure(s) within 1.0 foot above adj C) Total net area of flood openings in A8.b 	. <u>74-11'-57.2"</u> g if the Certificate is being used to ole re(s): ure(s) 1031 sq ft the crawlspace	Horizontal Datain flood insurance. A9. For a building with an a a) Square footage of a b) Number of permana	attached garage <u>576</u> sq ft ent flood openings in the attached garage			
d) Engineered flood openings? SECTION	es □ No IB-FLOOD INSURANCE RA*	d) Engineered flood o	penings? ⊠ Yes □ No			
		TE MAP (FIRM) INFORMAT				
B1. NFIP Community Name & Community Numb Ocean Township - 340518	er B2. County Name Ocean		B3. State NJ			
34029C0414 F	9/29/06 Effective/R 9/2	M Panel B8. Flood levised Date Zone(s) 9/06 AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 6			
B10. Indicate the source of the Base Flood Eleva ☐ FIS Profile ☑ FIRM ☐ 〔		entered in Item B9. 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)? Designation Date: OPA SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
 C1. Building elevations are based on: *A new Elevation Certificate will be required w C2. Elevations – Zones A1–A30, AE, AH, A (with below according to the building diagram speci Benchmark Utilized: GPS-Smartnet Indicate elevation datum used for the elevation Datum used for building elevations must be the 	then construction of the building is c BFE), VE, V1-V30, V (with BFE), Al fied in Item A7. In Puerto Rico only, Vertical Datum: Note that the low I	R, AR/A, AR/AE, AR/A1–A30, A enter meters. JAVD88				
a) Top of bottom floor (including basement, cr	audaaaaa aa		ck the measurement used.			
b) Top of the next higher floor		<u>5.0</u> <u>14.8</u>	☐ feet ☐ meters ☐ meters			
 c) Bottom of the lowest horizontal structural m d) Attached garage (top of slab) 	ember (V Zones only)	<u>N/.A</u>	☑ feet ☐ meters ☐ feet ☐ meters			
e) Lowest elevation of machinery or equipmen	t carrieing the building	<u>5.0</u>	⊠ feet ☐ meters			
(Describe type of equipment and location in	Comments)	<u>8.0</u>	☑ feet ☐ meters			
 f) Lowest adjacent (finished) grade next to but g) Highest adjacent (finished) grade next to but 	iding (LAG)	<u>4.2</u>	☑ feet ☐ meters			
h) Lowest adjacent grade at lowest elevation of	f deck or stairs, including structural	4.9 support 4.2				
	- SURVEYOR, ENGINEER, OF					
This certification is to be signed and sealed by a la information. I certify that the information on this Coll understand that any false statement may be pure. Check here if comments are provided on back the comments.	and surveyor, engineer, or architect ertificate represents my best efforts ishable by fine or imprisonment und	authorized by law to certify elev to interpret the data available. er 18 U.S. Code, Section 1001. ngitude in Section A provided by	ation			
Certifier's Name John P. Augustine	Lice	nse Number 34838	- 0 0 0			
Title Land Surveyor Com	pany Name Gravatt Consulting Gr		- War Parley			
Address 414 Lacey Road / City	Fada del	NJ ZIP Code 08731	— XX W			
Signature Date 7/1/15Rev.7/24/15 Telephone 609-693-6126 ext.100						
FEMA Form 086-0-33 (7/12)	See reverse side for		Poplace all residence in			

ELEVATION CERTIFICATE , pa	ge 2							
IMPORTANT: In these spaces, co	ppy the corresponding inform	ation from Se	ction A.		FOR INSURANCE CO	OMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 227 Bayshore Drive					Policy Number:			
City Barnegat	St	ate NJ ZIP	Code 080	05	Company NAIC Num	ber:		
SECTION	SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)							
Copy both sides of this Elevation Certification	icate for (1) community official, (2) i	nsurance agent/o	company, a	nd (3) building o	owner.			
Comments This certificate certified to preliminary map 34029C0414G, publist Vent Model No. 1540-570 (Typ.) Utilitie	ned 1/30/15 by FEMA, this is for inf	ormational purpo	ses only &	subject to verific				
Signature								
SECTION E - BUILDING ELEV	ATION INFORMATION (SUR	VEY NOT REQ	UIRED) F	OR ZONE AC	AND ZONE A (WI	THOUT BFE)		
 b) Top of bottom floor (including leavance) E2. For Building Diagrams 6–9 with particle (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is leavance E4. Top of platform of machinery and leavance E5. Zone AO only: If no flood depth 	trade, if available. Check the measure the following and check the approprient grade (LAG). It is basement, crawlspace, or enclosure basement, crawlspace, or enclosure basement flood openings provided of the building is feet metallor equipment servicing the building number is available, is the top of the	rement used. In riate boxes to she is in Section A Item feet meter ers above or g is e bottom floor ele	Puerto Riccow whether fe fe ens 8 and/or s abov feet evated in ac	et meters et meters et meters 9 (see pages 8 e or below the HAG. meters accordance with the elevation is	ters. s above or below the h above or □ below above or □ below so of instructions), the he HAG. sbove or □ below the	ighest adjacent the HAG. the LAG. next higher floor		
	Unknown. The local official must				TIESOATION			
	F - PROPERTY OWNER (OR					water to accord DCC		
The property owner or owner's authoriz or Zone AO must sign here. The staten	nents in Sections A, B, and E are c				EMA-Issued of commi	unity-issued BFE)		
Property Owner's or Owner's Authorize	ed Representative's Name							
Address		City		State	ZIP Code			
Signature		Date		Telep	hone			
Comments								
:					□ Check	here if attachments		
	SECTION C COMMUN	UTV INCODES	TION (OF	TIONALL	LI CHECK	nere ir attacimients		
The local official who is authorized by law	SECTION G – COMMUN or ordinance to administer the comm	nunity's floodplair	managem	ent ordinance ca	an complete Sections A	B C (or F) and G		
or this Elevation Certificate. Complete the	applicable item(s) and sign below. (Check the measur	ement used	l in Items G8-G	In Puerto Rico only	, enter meters.		
G2. A community official completed	vas taken from other documentation elevation information. (Indicate the discription E for a building located in a G4–G10) is provided for communications.	source and date Zone A (without	of the elevanter of the	ation data in the sued or commu	Comments area below	٧.)		
G4. Permit Number	G5. Date Permit Issued							
	Ob. Date (City) (Issued		o. Daie C	entificate Of Co	mpliance/Occupancy l	ssued		
 G7. This permit has been issued for: G8. Elevation of as-built lowest floor (in G9. BFE or (in Zone AO) depth of flood G10. Community's design flood elevation 	cluding basement) of the building: ing at the building site:	Substantial Impro	vement	meters meters meters	Datum Datum Datum			
Local Official's Name		Title						
Community Name		Telepi	none					
Signature		Date		······································		··· ·		
Comments						<u></u>		
				······································	Check	here if attachments		

ELEVATION CERTIFICATE, page 3

Building Photographs See Instructions for Item A6.

IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg 227 Bay Shore Drive	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 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 VIEW



REAR VIEW

ELEVATION CERTIFICATE, page 4

Building Photographs

Continuation Page

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. 227 Bay Shore Drive

Policy Number:

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." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



RIGHT SIDE VIEW FROM REAR



LEFT SIDE VIEW FROM FRONT