

ELEVATION CERTIFICATE

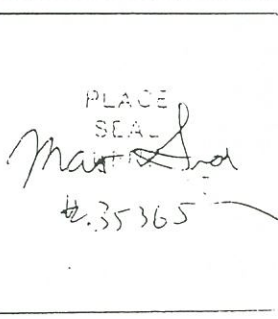
OMB No 1660-0006
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use			
1. Building Owner's Name	THOMAS HALL + MARGARET WIERZBICKI	Policy Number			
2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	8 ACORN STREET	Company NAIC Number			
3. City	OCEAN	State	NEW JERSEY	ZIP Code	08758
4. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	BLOCK 169 LOT 3				
5. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	RESIDENTIAL				
6. Latitude/Longitude: Lat. <u>N 39.793</u> Long. <u>W 74.18859</u>	Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983				
7. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.					
8. Building Diagram Number <u>8</u>					
9. For a building with a crawlspace or enclosure(s):	A9. For a building with an attached garage				
a. Square footage of crawlspace or enclosure(s) <u>1104</u> sq ft	a) Square footage of attached garage <u>305</u> sq ft				
b. No. of permanent flood openings in the crawlspace or enclosure(s) within 10 foot above adjacent grade <u>8</u>	b) No. of permanent flood openings in the attached garage within 10 foot above adjacent grade <u>2</u>				
c. Total net area of flood openings in A8.b <u>1024</u> sq ft	c) Total net area of flood openings in A9.b <u>256</u> sq ft				
d. Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. FIRM Community Name & Community Number		B2. County Name		B3. State	
OCEAN, NEW JERSEY 340518		OCEAN		NEW JERSEY	
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)
34029C0412F	F	9/29/06	9/29/06	AE	6
10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.					
<input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe)					
11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe)					
12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Designation Date <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction	
*A new Elevation Certificate will be required when construction of the building is complete.	
13. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARIA, AR/AE, ARIA1-A30, ARIA/AH, AR/AO. Complete items C1 and C2 below according to the building diagram specified in Item A7. Use the same datum as the BFE.	
Benchmark Utilized	Vertical Datum
LOCAL	NAVD 1988
14. Conversion/Comments	
Check the measurement used.	
a. Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>4.16</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b. Top of the next higher floor	<u>7.20</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c. Bottom of the lowest horizontal structural member (V Zones only)	<u> </u> <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d. Attached garage (top of slab)	<u>4.18</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e. Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>7.07</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f. Lowest adjacent (finished) grade next to building (LAG)	<u>3.6</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g. Highest adjacent (finished) grade next to building (HAG)	<u>4.4</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h. Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>4.3</u> <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

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.			
<input type="checkbox"/> Check here if comments are provided on back of form.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Signature	License Number	<div style="border: 1px solid black; padding: 5px; text-align: center;"> PLACE SEAL  #35365 </div>	
MARCO GRAM	35365		
Company Name			
LAND SURVEYING	MARCO A. GRAM SURVEYING		
Address	City	State	ZIP Code
239 Prospect Plains Road	MORRIS	NJ	08831
Signature	Date	Telephone	
Marco A. Gram	1/5/11	609-655-5778	



Acorn hood vents are
Smart vents (200⁺ per vent) \$1600



Salon



8 Acorn



S Acorn