U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION				FOR INSUR	FOR INSURANCE COMPANY USE	
A1. Building Owner's Name ERIC BISCHOFF				Policy Num	Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12 SOUTH STREET				Company N	Company NAIC Number:	
City SEA BRIGHT				ZIP Code 07760		
A3. Property Description (Lot a LOT 15 BLOCK 14	and Block Numbers, Tax Par	cel Number, Le	gal Description, etc	2.)		
A4. Building Use (e.g., Reside	ntial, Non-Residential, Additi	on, Accessory,	etc.) RESIDEN	TIAL		
A5. Latitude/Longitude: Lat. 4	40 21'42.94' N Long	73 58'31.18" \	W Horizontal	Datum: NAD 1	1927 X NAD 1983	
A6. Attach at least 2 photogra	phs of the building if the Cert	ificate is being	used to obtain floor	d insurance.		
A7. Building Diagram Number	9					
A8. For a building with a crawl	space or enclosure(s):					
a) Square footage of craw	Ispace or enclosure(s)		704.00 sq ft			
b) Number of permanent f	lood openings in the crawlsp	ace or enclosur	re(s) within 1.0 foot	above adjacent gra	ade 8	
c) Total net area of flood of	ppenings in A8.b	768.00 sq i	n			
d) Engineered flood open	ings? Yes No	-				
A9. For a building with an attac						
SCHOOL AT DE DE SE	hed garage	176.00 sad				
	Carrier Harrison					
and the second section of the second section of the second	lood openings in the attached			acent grade 2		
c) Total net area of flood of	openings in A9.b	254.00 so	q in			
d) Engineered flood openi	ngs? Yes No					
S	ECTION B - FLOOD INSUI	RANCE RATE	MAP (FIRM) INF	ORMATION		
B1. NFIP Community Name &		B2. County		O'AMD ATTOM	B3. State	
BOROUGH OF SEA BRIGHT	[17] [18] [18] [19] [19] [19] [19] [19] [19] [19] [19		MONMOUTH Ne			
B4. Map/Panel B5. Suffix Number	Number Date Eff		B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	Elevation(s) e Base Flood Depth)	
34025C201 H		Revised Date 5-2022 AE 8				
B10. Indicate the source of the	Base Flood Elevation (BFE)) data or base f	lood 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						

ELEVATION CERTIFICATE OMB No. 1660-0008 Expiration Date: November 30, 2022 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: 12 SOUTH ROAD City State ZIP Code Company NAIC Number SEA BRIGHT New Jersey 07760 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: Vertical Datum: NAVD1988 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) _______ 3.5 X feet meters b) Top of the next higher floor 8.3 X feet meters c) Bottom of the lowest horizontal structural member (V Zones only) feet meters d) Attached garage (top of slab) 4.0 X feet meters e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 8.3 X feet meters f) Lowest adjacent (finished) grade next to building (LAG) 4.2 |X | feet meters g) Highest adjacent (finished) grade next to building (HAG) 4.6 X feet meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 4.4 X 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. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No Check here if attachments. Certifier's Name License Number THOMAS P SANTRY, JR 24GS03540000 Title PRESIDENT Place Company Name THOMAS P SANTRY PA Address Here -128 EAST RIVER ROAD City State ZIP Code RUMSON New Jersey 07760 Signature Date Telephone Ext. 07-11-2023 (732) 741-4800 Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner. Comments (including type of equipment and location, per C2(e), if applicable)

ELEVATION CERTIFICATE

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Building Street A		ig information from c	iMPORTANT: In these spaces, copy the corresponding information from Section A.			
12 SOUTH STR	Address (including Apt., Unit, Suite, and/ EET	or Bldg. No.) or P.O. F	Route and Bo	x No.	Policy Number:	
City	Si	ate Z	IP Code		Company NAIC	Number
SEA BRIGHT	N	ew Jersey 0	7760		, , , , , , ,	
	SECTION E – BUILDING ELE FOR ZONE	VATION INFORMAT AO AND ZONE A (V			REQUIRED)	
or Zones AO a complete Section enter meters.	nd A (without BFE), complete Items E1– ns A, B,and C. For Items E1–E4, use na	E5. If the Certificate is tural grade, if available	s intended to e. Check the	support a measurer	LOMA or LOME ment used. In Pu	R-F request, erto Rico only,
1. Provide ele the highest	vation information for the following and o adjacent grade (HAG) and the lowest ad	theck the appropriate lijacent grade (LAG).	boxes to sho	w whether	the elevation is	above or below
	ottom floor (including basement, ace, or enclosure) is		□ foot	□ motor	n Dahawa as	□ holow the UAC
	ottom floor (including basement,		leet	meters	s above or	below the HAG
	ace, or enclosure) is		feet	meters	s above or	below the LAG
2 For Building	Diagrams 6–9 with permanent flood op	enings provided in Se	ction A Items	8 and/or	9 (see pages 1_	2 of Instructions)
the next hig	her floor (elevation C2.b in	chings provided in oc	CHOIT A ILCHIA	o ana/or	o (see pages 1-	2 of ilistructions),
the diagram	ns) of the building is		feet	meters	s above or	below the HAG
3. Attached ga	arage (top of slab) is		feet	meters	s above or	below the HAG
	orm of machinery and/or equipment e building is		□foot	□ motor	n Dahawa sa	Dhalau tha UAC
	nly: If no flood depth number is available			meters		below the HAG
community-issue	ner or owner's authorized representative ed BFE) or Zone AO must sign here. The or Owner's Authorized Representative's	e statements in Sectio	ons A, B, an ns A, B, and	d E for Zor E are corr	ne A (without a least of the best of the b	EMA-issued or f my knowledge.
Address		City		Sta	ite	ZIP Code
Signature		Date		Tel	ephone	
Comments						

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the	e corresponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., U 12 SOUTH STREET	Jnit, Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:
City SEA BRIGHT	State New Jersey	ZIP Code 07760	Company NAIC Number
S	ECTION G - COMMUNITY IN	IFORMATION (OPTIONAL) I I I I I I I I I I I I I I I I I I I
engineer, or architect who is au data in the Comments area be	evation Certificate. Complete the holy, enter meters. The as taken from other document outhorized by law to certify elevelow.) The Section E for a building locate	ne applicable item(s) and si tation that has been signed ation information. (Indicate ted in Zone A (without a FE	and sealed by a licensed surveyor, the source and date of the elevation MA-issued or community-issued BFE)
G4. Permit Number	G5. Date Permit Issue	ed G6.	Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:G8. Elevation of as-built lowest floor (in of the building:G9. BFE or (in Zone AO) depth of flood	cluding basement)	fe	et meters Datumet meters Datum
G10. Community's design flood elevation	n:	fe	et meters Datum
Local Official's Name		Title	
Community Name		Telephone	
Signature		Date	
Comments (including type of equipment a	and location, per C2(e), if appl	licable)	
			Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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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. 12 SOUTH STREET

Policy Number:

City SEA BRIGHT

ELEVATION CERTIFICATE

State New Jersey

ZIP Code 07760

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.



Photo One

FRONT OF DWELLING Photo One Caption

Clear Photo One



Photo Two

Photo Two Caption SIDE OF DWELLING

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy the	e corresponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., U 12 SOUTH STREET	Jnit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
SEA BRIGHT	New Jersey	07760	Company NAIC Number
If submitting more photographs than w with: date taken; "Front View" and "photographs must show the foundation	Rear View"; and, if required with representative examples of	, "Right Side View" and ' of the flood openings or ven	"Left Side View." When applicable,
	Photo T		
	Photo Th	ree	
Photo Three Caption	Photo	Four	Clear Photo Three
	Photo Fo	our	
Photo Four Caption			Clear Photo Four
		a control of the cont	



BOROUGH OF SEA BRIGHT

MONMOUTH COUNTY, NEW JERSEY
www.seabrightmj.org

BOROUGH ORFICES: 1167 OCRAN AVENUE SRA BRIGHT, N.J. 07760 TRL: (788) 848-0099 FAX: (788) 741-8116

DATE : 211/2015	
NAME: Jakes, Jyll 9.	BLOC
ADDRESS: 12 South St.	· LOT

NOTIFICATION TO PROPERTY OWNERS OF A DETERMINATION THAT WORK CONSTITUTES REPAIR OF SUBSTANTIAL DAMAGE (RESIDENTIAL)

Dear Property Owner:

We have reviewed your recent application for a permit to repair your existing home that was damaged by flooding. The building is located in a mapped Special Flood Hazard Area. As required by our floodplain management regulations and/or building code, we have determined that the building has been substantially damaged. This determination is based on a comparison of the cost estimate of the work required to restore the building to its pre-damage condition to the market value of the building (excluding land value). When the cost to repair equals or exceeds 50 percent of the market value of the building, the work is repair of substantial damage.

As a result of this determination, you are required to bring the building into compliance with the flood damage-resistant provisions of the regulations and/or code:

2009 IRC Sec. 1612 Substanta I Da Mage

We would be pleased to meet with you and your designated representative (architect/builder) to discuss how to bring your home into compliance. There are several aspects, that must be addressed to achieve compliance. The most significant requirement is that the lowest floor, as defined in the regulations/code, must be elevated to or above the base flood elevation (BFE) [or the elevation specified in the regulations/code]. You may wish to contact your insurance agent to understand how raising the lowest floor higher than the minimum required elevation can reduce NFIP flood insurance premiums.

If the damage was caused by flooding and if you have a flood insurance policy from the National Flood Insurance Program, you should contact your adjuster to discuss the Increased Cost of Compliance (ICC) coverage. This coverage may provide a claim payment to help pay for work required to bring your home into compliance. Your adjuster can explain that the ICC claim may also be used to pay certain costs associated with demolishing and rebuilding your home, or moving your home to a site outside of the floodplain:

Please re-submit your permit application along with plans and specifications that incorporate compliance measures. Construction activities that are undertaken without a proper permit are violations and may result in citations, fines, or other legal action.

DET	ERM	INA	CIO	NI	BY:

DATE:

Borough of Sea Bright Flood Piain, Many Tangolics

111 Sec. 11113