

4601/8

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

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name TIMOTHY WILHOVSKY

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12 BEECH STREET

City TOWNSHIP OF PEQUANNOCK State NEW JERSEY ZIP Code 07440

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 8, BLOCK 4601

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

A5. Latitude/Longitude: Lat. 40-56-35.18 N Long. 074-16-55.80 N 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 8

A8. For a building with a crawlspace or enclosure(s):  
 a) Square footage of crawlspace or enclosure(s) 815 sq ft  
 b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 4  
 c) Total net area of flood openings in A8.b 512 sq in  
 d) Engineered flood openings?  Yes  No

A9. For a building with an attached garage:  
 a) Square footage of attached garage 595 sq ft  
 b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 0  
 c) Total net area of flood openings in A9.b 0 sq in  
 d) Engineered flood openings?  Yes  No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number TOWNSHIP OF PEQUANNOCK - 345311

B2. County Name MORRIS COUNTY

B3. State NEW JERSEY

B4. Map/Panel Number <u>345311-0002</u>	B5. Suffix <u>B</u>	B6. FIRM Index Date <u>07-03-1986</u>	B7. FIRM Panel Effective/Revised Date <u>07-03-1986</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>181.50</u>
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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 (Describe)

B11. Indicate elevation datum used for BFE in Item B9:  NGVD 1929  NAVD 1988  Other (Describe)

Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  
 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. Use the same datum as the BFE.  
 Benchmark Utilized SAN-SEWER MAPS NOV. 12, 1990 Vertical Datum NGVD 1929  
 Conversion/Comments BY CREW ENGINEERING

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>175.98</u> feet	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>183.53</u> feet	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u> feet	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>174.77</u> feet	<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>181.70</u> feet	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	<u>173.83</u> feet	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	<u>174.79</u> feet	<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>174.79</u> feet	<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.

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

Certifier's Name ROBERT CIGOL License Number N.J. LIC. NO. 40261

Title DIRECTOR Company Name DMC ASSOCIATES, INC.

Address 211 MAW ST. City BUTLER State NEW JERSEY ZIP Code 07405

Signature \_\_\_\_\_ Date 09-14-09 Telephone 973-838-9187

PLACE SEAL HERE

# Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12 BEECH STREET		For Insurance Company Use: Policy Number	
City TOWNSHIP OF PEQUANNOCK	State NEW JERSEY	ZIP Code 07440	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."



FRONT VIEW

09-14-09



REAR VIEW

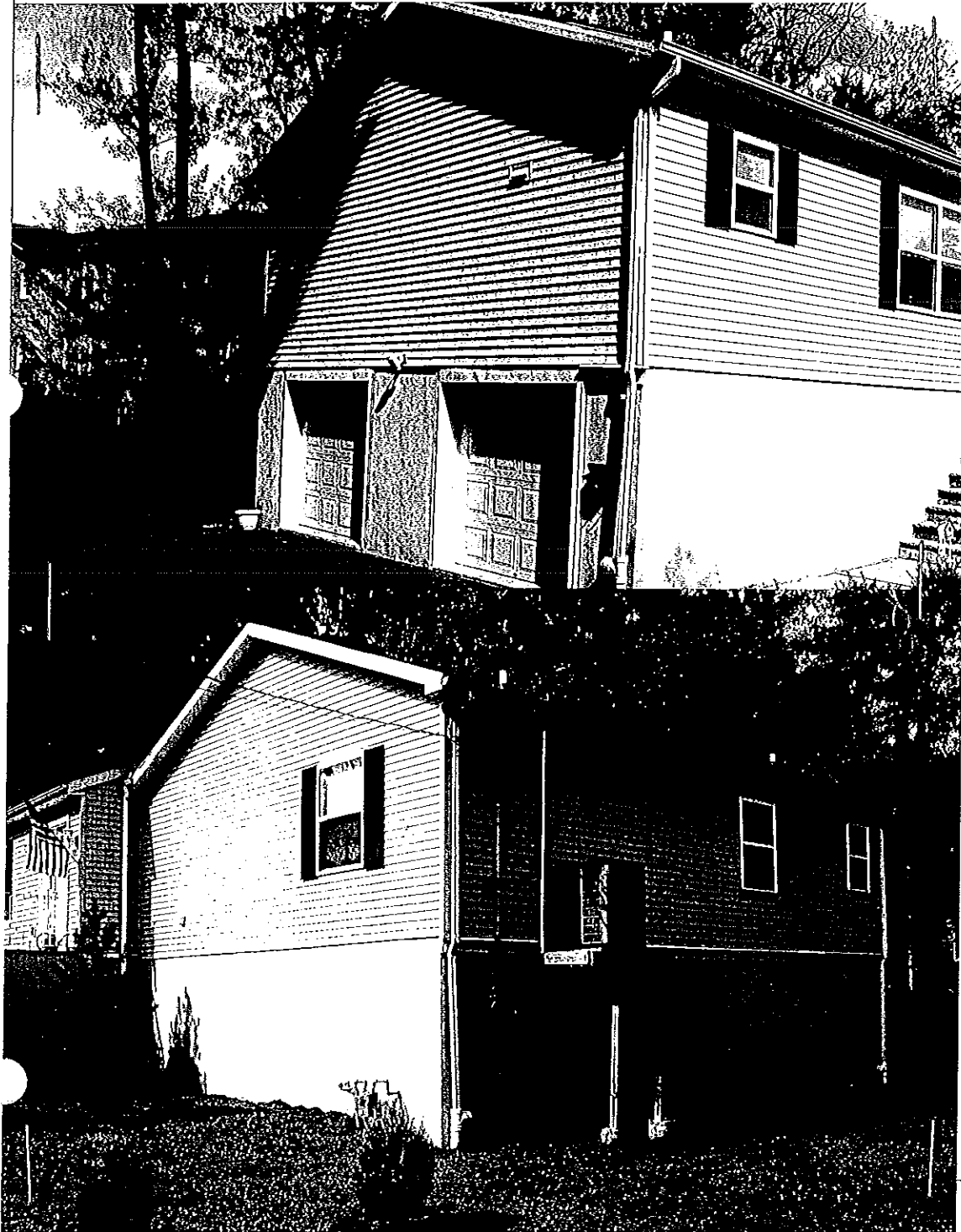
09-14-09

# Building Photographs

See Instructions for Item A6.

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City TOWNSHIP OF PEQUANNUCK	State NEW JERSEY	ZIP Code 07440	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 on the reverse.



LEFT SIDE VIEW

09-14-09

RIGHT SIDE VIEW

09-14-09