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

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

ELEVATION CERTIFICATEImportant: 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 | | | | | | RANCE COMPANY USE | |
|--|--|---------------|-----------------------------------|----------------------|-----------------------------------|------------------------------------|--|
| A1. Building Owner's Name Robert & Frances Rivera | | | | | | oer: | |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: # 1855 Bayshore Drive | | | | | | | |
| City Englewood | | | State Florida | | ZIP Code 34223 | | |
| A3. Property Description (Lot a Lot 953, Englewood gardens, L | , | | | • • | , | | |
| A4. Building Use (e.g., Reside | ntial, Non-Residential, A | ddition, | Accessory, e | etc.) Accessory | | | |
| A5. Latitude/Longitude: Lat. | | | • | · ——— | Datum: NAD 1 | 927 × NAD 1983 | |
| A6. Attach at least 2 photograp | ohs of the building if the (| Certifica | ate is being u | sed to obtain flood | insurance. | | |
| A7. Building Diagram Number | 1A | | | | | | |
| A8. For a building with a crawls | space or enclosure(s): | | | | | | |
| a) Square footage of craw | dspace or enclosure(s) | | | N/A sq ft | | | |
| b) Number of permanent fl | ood openings in the crav | wlspace | or enclosure | (s) within 1.0 foot | above adjacent gra | ade N/A | |
| c) Total net area of flood o | penings in A8.b | | N/A sq in | | | | |
| d) Engineered flood openi | ngs? Yes X No |) | | | | | |
| A9. For a building with an attac | hed garage: | | | | | | |
| a) Square footage of attac | hed garage | 1 | 1500.00 sq ft | | | | |
| b) Number of permanent fl | ood openings in the atta | ched ga | arage within | 1.0 foot above adja | cent grade 16 | | |
| c) Total net area of flood o | penings in A9.b | | 1552.00 sq | in | | | |
| d) Engineered flood opening | ngs? ⊠ Yes ☐ No |) | | | | | |
| | TOTION B. FLOOD IN | | NOT DATE | | SSMATION | | |
| | ECTION B – FLOOD IN | SURA | i | • • • | DRMATION | DO Ctata | |
| Sarasota 125144 | B1. NFIP Community Name & Community Number Sarasota 125144 B2. County Name Sarasota B3. State Florida | | | | | | |
| B4. Map/Panel B5. Suffix Number | B6. FIRM Index Date | Effe | RM Panel ective/ vised Date | B8. Flood Zone(s) | B9. Base Flood E (Zone AO, use | levation(s) e Base Flood Depth) | |
| 12115 C 0344 F | 11-04-2016 | 11-04-2 | | AE | 11.00' | | |
| 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/Source: | | | | | | | |
| B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X 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 DPA | | | | | | | |
| | | | | | | | |

ELEVATION CERTIFICATE

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

| - | | | ! |
|--|---------------------------|---------------------------------------|--|
| IMPORTANT: In these spaces, copy the corresponding | FOR INSURANCE COMPANY USE | | |
| Building Street Address (including Apt., Unit, Suite, and/or # 1855 Bayshore Drive | , | ite and Box No. | Policy Number: |
| City Stat | | Code | Company NAIC Number |
| Englewood Flori | ida 342: | 23 | |
| SECTION C – BUILDING ELE | EVATION INFORMAT | ION (SURVEY RE | EQUIRED) |
| C1. Building elevations are based on: Constructio *A new Elevation Certificate will be required when co | · - | ding Under Constru ng is complete. | ıction* |
| C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), Complete Items C2.a–h below according to the build Benchmark Utilized: N.G.S BM 004 (PID AG9485 | ling diagram specified | in Item A7. In Puerto | |
| Indicate elevation datum used for the elevations in ite | ems a) through h) belo | w. | |
| ☐ NGVD 1929 区 NAVD 1988 ☐ Other/S | ource: | | |
| Datum used for building elevations must be the same | e as that used for the E | ßFE. | Check the measurement used. |
| a) Top of bottom floor (including basement, crawlsp | ace or enclosure floor |) | 9.3 × feet meters |
| b) Top of the next higher floor | acc, cr chelecure necr | , | N/A 🗵 feet 🦳 meters |
| , . | r (V Zonos only) | | N/A ⋉ feet |
| c) Bottom of the lowest horizontal structural membed) Attached garage (top of slab) | (v Zories orily) | | N/A ⋉ feet ☐ meters |
| e) Lowest elevation of machinery or equipment serv (Describe type of equipment and location in Com | ricing the building | | N/A ⋉ feet |
| f) Lowest adjacent (finished) grade next to building | • | | 8.7 X feet meters |
| g) Highest adjacent (finished) grade next to building | . , | | 8.8 X feet meters |
| h) Lowest adjacent grade at lowest elevation of dec structural support | | | N/A ☒ feet ☐ meters |
| SECTION D – SURVEYOR, | ENGINEED OD AD | PUITECT CEDTIE | |
| This certification is to be signed and sealed by a land sur I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment un | veyor, engineer, or arc | chitect authorized by | / law to certify elevation information. |
| Were latitude and longitude in Section A provided by a lic | | | Check here if attachments. |
| Certifier's Name | License Number | | MINIMINION, |
| Timothy A. Terhune | LS 6060 | | HILLOTHY ALLEN TERHILL |
| Title Professional Surveyor & Mapper | | | LS 6060 |
| Company Name TCTS, Inc. | | | A∃dd A∃dd ★ |
| Address 1990 Allen Street | | | Check here if attachments. Check here if attachments. |
| City | State | ZIP Code | - IIIIVAI ORIIII |
| Engelwood | Florida | 34223 | WALL SURVEY INTO |
| Signature Timothy A Terhune Date: 2022.11.01 11.44:12-0400° | Date 11-01-2022 | elephone (941) 474-4300 | Ext. |
| Copy all pages of this Elevation Certificate and all attachme | nts for (1) community of | ficial, (2) insurance a | agent/company, and (3) building owner. |
| Comments (including type of equipment and location, per | C2(e), if applicable) | | |
| Notes: 1) All Data Contained on This Form is to the Near | est One Tenth (1/10) o | f One U.S. Foot. | |
| 2) Building Has 16 Engineered Flood Vents - Floo | d Solutions Model FS- | 1608 (See Enginee | ring Report). |
| | | | |

ELEVATION CERTIFICATE

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| IMPORTANT: In these spaces, copy the correspo | FOR INSURANCE COMPANY USE | | | | |
|---|---|---|--|--|--|
| Building Street Address (including Apt., Unit, Suite, a # 1855 Bayshore Drive | and/or Bldg. No.) or P.C | . Route and Box No. | Policy Number: | | |
| City Englewood | State Florida | ZIP Code 34223 | Company NAIC Number | | |
| SECTION E – BUILDING ELEVATION INFORMATION (SURVEY 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 Puerto 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 lowe a) Top of bottom floor (including basement, crawlspace, or enclosure) is | | | | | |
| Top of bottom floor (including basement, crawlspace, or enclosure) is | | feet | s 🔲 above or 🔲 below the LAG. | | |
| E2. For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in the diagrams) of the building is | d openings provided in | Section A Items 8 and/or | | | |
| E3. Attached garage (top of slab) is | | feet | s 🗌 above or 🗌 below the HAG. | | |
| E4. Top of platform of machinery and/or equipment servicing the building is | | | s 🔲 above or 🔲 below the HAG. | | |
| E5. Zone AO only: If no flood depth number is avail floodplain management ordinance? Yes | able, is the top of the bo | ottom floor elevated in ac The local official must o | cordance with the community's certify this information in Section G. | | |
| SECTION F - PROPERTY O | WNER (OR OWNER'S | REPRESENTATIVE) CE | ERTIFICATION | | |
| The property owner or owner's authorized represent community-issued BFE) or Zone AO must sign here | ative who completes Se . The statements in Sec | ections A, B, and E for Zo tions A, B, and E are cor | ne A (without a FEMA-issued or rect to the best of my knowledge. | | |
| Property Owner or Owner's Authorized Representat | ive's Name | | | | |
| Address | City | Sta | ate ZIP Code | | |
| Signature | Date | Te | lephone | | |
| Comments | | | | | |
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| | | | ☐ Check here if attachments. | | |

ELEVATION CERTIFICATE

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

| MPORTANT: In these spaces, copy the corre | FOR INSURANCE COMPANY USE | | | |
|--|---------------------------|---|-----------------------|---|
| Building Street Address (including Apt., Unit, St # 1855 Bayshore Drive | Policy Number: | | | |
| City Englewood | State Florida | ZIP Code 34223 | | Company NAIC Number |
| SECTIO | N G – COMMUNI | TY INFORMATION (OPTI | ONAL) | |
| The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en | Certificate. Comp | ster the community's flood lete the applicable item(s) | plain man and sign | agement ordinance can complete below. Check the measurement |
| G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.) | | | | |
| G2. A community official completed Section or Zone AO. | on E for a building | located in Zone A (withou | t a FEMA | u-issued or community-issued BFE) |
| G3. The following information (Items G4– | G10) is provided for | or community floodplain m | anageme | ent purposes. |
| G4. Permit Number | G5. Date Permit | Issued | | Pate Certificate of compliance/Occupancy Issued |
| G7. This permit has been issued for: | New Constructio | n 🗌 Substantial Improve | ment | |
| G8. Elevation of as-built lowest floor (including of the building: | g basement) - | | feet | meters Datum |
| G9. BFE or (in Zone AO) depth of flooding at | the building site: _ | | feet | meters Datum |
| G10. Community's design flood elevation: | - | | feet | meters Datum |
| Local Official's Name | | Title | | |
| Community Name | | Telephone | | |
| Signature | | Date | | |
| Comments (including type of equipment and loo | cation, per C2(e), i | f applicable) | | |
| | | | | Check here if attachments. |

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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| IMPORTANT: In these spaces, co | FOR INSURANCE COMPANY USE | | |
|--|---------------------------|----------|---------------------|
| Building Street Address (including # 1855 Bayshore Drive | Policy Number: | | |
| City | State | ZIP Code | Company NAIC Number |
| Englewood | Florida | 34223 | |

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

Photo One Caption Northerly View Clear Photo One



Photo Two

Photo Two Caption Southerly View Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, co | FOR INSURANCE COMPANY USE | | |
|--|---------------------------|----------|---------------------|
| Building Street Address (including # 1855 Bayshore Drive | Policy Number: | | |
| City | State | ZIP Code | Company NAIC Number |
| Englewood | Florida | 34223 | |

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.



Photo Three

Photo Three Caption Typical Flood Vent Clear Photo Three

Photo Four

Photo Four

Photo Four Caption Intentionally Blank

Clear Photo Four

INSTALLATION INSTRUCTIONS

MODELS: FS AND FS-HEX

ICC-ES CERTIFIED - ENGINEERED

FEMA COMPLIANT FLOOD VENTS

What you'll need:

- 1" Concrete/wood/metal screws which is dependent on what type of wall you will be fastening into
- 1" Anchors for concrete wall installation
- Power Drill
- 1/4" Masonry Bit or 1/4" wood drill bit (dependent on what type of wall you will be fastening into)
- Screwdriver
- Hammer
- Level
- Exterior Caulking
- Flashing, if needed, for an opening with a cavity in the wall (optional)

INSTRUCTIONS:

***NOTE: BE SURE THAT BOTTOM OF OPENING IS LESS THAN 12" ABOVE THE ADJACENT GRADE. ***

Step 1: PROVIDE A CLEAN, SQUARE AND LEVEL ROUGH OPENING

Step 2:APPLY FLASHING AROUND THE INTERIOR OF THE WALL OPENING IF THERE IS A CAVITY IN THE WALL (optional)

Step 3: LAYOUT THE VENT SO THE OPEN AREAS OF THE VENT HAVE A CLEAR OPENING BEHIND THEM.

Step 4: MAKE SURE VENT IS LEVEL

Step 5: MARK HOLES ON WALL AND THEN REMOVE VENT FROM OPENING

FOR CONCRETE WALLS: Use Concrete Screws and Anchors

FOLLOW STEPS 1-5 ABOVE

Step 5: DRILL HOLES 1-1/4"DEEP INTO CONCRETE/BLOCK WALL.

Step 6: FULLY INSERT ANCHORS INTO WALL, TAPPING ANCHORS INTO PLACE USING A HAMMER MAKING SURE

ANCHORS ARE FLUSH TO THE WALL

Step 8: REPLACE VENT INTO OPENING

Step 9: SECURE ALL SCREWS THROUGH HOLES IN VENT INTO ANCHORS SET IN WALL

Step 10: CAULK AROUND PERIMETER OF VENT TO HELP PREVENT WATER FROM SEEPING

BEHIND THE FLANGE FRAME

FOR WOOD WALLS: Use Wood Screws

FOLLOW STEPS 1-5 ABOVE

Step 5: DRILL HOLES 1/2" DEEP INTO THE WOOD WALL

Step 6: REPLACE VENT OVER THE OPENING

Step 7: SECURE ALL SCREWS THROUGH HOLES IN VENT INTO THE WOOD WALL

Step 8: CAULK AROUND PERIMETER OF VENT TO HELP PREVENT WATER FROM SEEPING BEHIND THE FRAME

FOR INSTALLATION INTO DOORS:

FOLLOW STEPS 1-5 ABOVE

<u>Step 5:</u> IF THE DOOR IS NOT A SOLID DOOR, USE ALUMINUM FLASHING AROUND THE PERIMETER OF THE HOLE <u>Step 6:</u> DRIVE WOOD OR METAL SCREWS THROUGH PREDRILLED HOLES IN VENTS INTO WOOD FRAMING <u>Step 7:</u> CAULK AROUND PERIMETER OF VENT TO HELP PREVENT WATER FROM SEEPING

BEHIND THE FLANGE FRAME

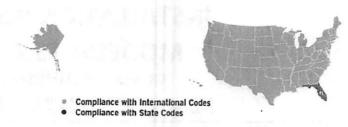


FLOOD SOLUTIONS, LLC. One Industrial Park Drive Bldg. 27 Pelham NH, 03076 Toll Free: 1-800-325-9775 In NH: 603-595-5222

Fax: 603-595-4778 www.floodsolutions.com info@floodsolutions.com







www.icc-es.org | (800) 423-6587 | (562) 699-0543

A Subsidiary of the International Code Council®

ICC-ES Evaluation Report ESR-3760

DIVISION: 08 00 00—OPENINGS Section: 08 95 43—Vents/Foundation Flood Vents

REPORT HOLDER:

FLOOD SOLUTIONS, LLC

EVALUATION SUBJECT:

STATIC FLOOD VENTS

1.0 EVALUATION SCOPE

Compliance with the following codes:

- 2018, 2015, 2012 and 2009 International Building Code®
- 2018, 2015, 2012 and 2009 International Residential Code®

Property evaluated:

Water flow

2.0 USES

Flood Solutions' static flood vents are used to provide for the equalization of hydrostatic flood forces on exterior walls.

3.0 DESCRIPTION

3.1 General:

Flood Solutions' static flood vents are engineered, permanently open flood vents with no moving parts that automatically allow flood waters to enter and exit enclosed areas. The vents are constructed of aluminum and available in four models. See Table 1 for model designations and sizes. See Figure 1 for illustrations of the flood vents.

3.2 Engineered Opening:

The Flood Solutions static flood vents comply with the design principle noted in Section 2.6.2.2 of ASCE/SEI 24 for a rate of rise and fall of 5 feet per hour (0.423 mm/s). In order to comply with the engineered opening requirement of ASCE/SEI 24, the static flood vents must be installed in accordance with Section 4.0 of this report.

3.3 Ventilation

Flood Solutions' static flood vents may be used to supply natural ventilation for under-floor ventilation. See Table 1 for net free area for under-floor ventilation provided by each of Flood Solutions' static flood vents.

4.0 DESIGN AND INSTALLATION

The Flood Solutions static flood vents are designed to be installed into walls or doors of existing or new construction

Reissued March 2022

This report is subject to renewal March 2024.

from the exterior side. Installation of the vents must be in accordance with the manufacturer's instructions, the applicable code and this report. In order to comply with the engineered opening design principle noted in Section 2.6.2.2 of ASCE/SEI 24, the vents must be installed as follows:

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one vent for the square footage of enclosed area noted in Table 1.
- Below the base flood elevation.
- With the bottom of the vent located a maximum of 12 inches (305 mm) above grade.

5.0 CONDITIONS OF USE

The static flood vents described in this report comply with, or are a suitable alternative to what is specified in, those codes listed in Section 1.0 of this report, subject to the following conditions:

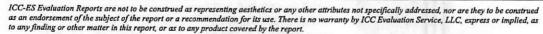
- 5.1 The static flood vents must be installed in accordance with this report, the applicable code and the manufacturer's installation instructions. In the event of a conflict, the instructions in this report govern.
- 5.2 The static flood vents must not be used in the place of "breakaway walls" in coastal high hazard areas, but are permitted for use in conjunction with breakaway walls in other areas.

6.0 EVIDENCE SUBMITTED

- 6.1 Manufacturer's descriptive literature and installation instructions.
- 6.2 Detail drawings.
- 6.3 Engineering calculations in accordance with ASCE/SEI 24.
- 6.4 Quality documentation in accordance with the ICC-ES Acceptance Criteria for Quality Documentation (AC10), dated June 2014.

7.0 IDENTIFICATION

7.1 The Flood Solutions static flood vents evaluated in this report must be identified by a label bearing the manufacturer's name (Flood Solutions), the model number, and the evaluation report number (ESR-3760).





7.2 The holder's contact information is the following:

FLOOD SOLUTIONS, LLC
ONE INDUSTRIAL PARK DRIVE
UNIT 26
PELHAM, NEW HAMPSHIRE 03076
(603) 595-5222
www.floodsolutions.com
info@floodsolutions.com

TABLE 1—FLOOD SOLUTIONS STATIC FLOOD VENTS

| ~ | MODEL | VENT SIZE (Width x Height) | ROUGH OPENING SIZE (Width x Height) (in) | ENCLOSED AREA COVERAGE | NET FREE AREA¹ |
|-----|-------------|---|---|---------------------------|----------------|
| - [| FS-1608 | 18 ¹ / ₂ x 10 ¹ / ₂ | 16 x 8 | 97 | 80.7 |
| | F§-1616 | 181/2 x 181/2 | 16x16 | LL L 19L L L L | 人人人 158.2 人人人 |
| | FS-1412 | 17 x 14 ¹ / ₂ | 14 ¹ / ₂ x 12 | 129 | 106.7 |
| L | FS-1608-Hex | $18^{1}/_{2} \times 10^{1}/_{2}$ | 16 x 8 | 110 | 91.4 |

For SI: 1 inch = 25.4 mm; 1 ft = 304.8 mm

¹Available for use as under-floor ventilation.

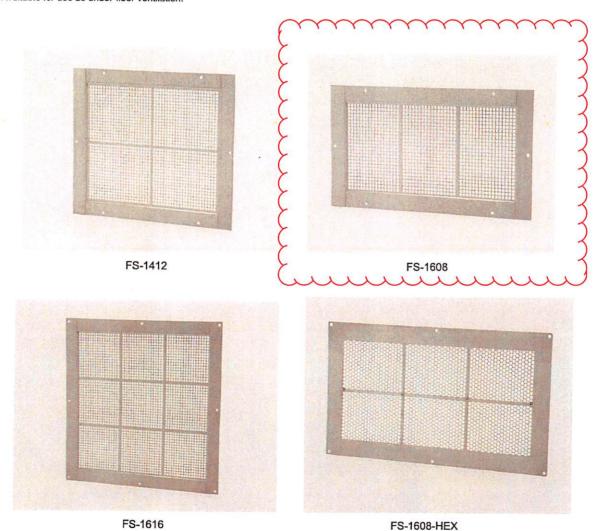


FIGURE 1—FLOOD SOLUTIONS STATIC FLOOD VENTS

OFFICIAL DOCUMENTS

Per Sarasota County Ordinance, approved plans must be on-site at time of inspection.

Sarasota County Planning

& Development Services