AMT: In these spaces, copy the corresponding information from Section A. Street Address (including Apt., Unit, Suite, and/or Bidg, No.) or P.O. Route and Box No. YSHORE DRIVE State State State Size		55	
Route and Box No. ZIP Code 34223 MATION (OPTIONAL) Immunity's floodplain man ilicable item(s) and signed and nformation. (Indicate the Zone A (without a FEMA. Cone A (without a FEMA. Cone A (indicate the Indicate the General feet I Feet I Feet I Feet I			
Route and Box No. ZIP Code 34223 MATION (OPTIONAL) Imunity's floodplain maniformation. (Indicate the footplain management of feet [
Route and Box No. ZIP Code 34223 MATION (OPTIONAL) Imunity's floodplain maniformation. (Indicate the footplain management of feet [e Y		
Route and Box No. ZIP Code 34223 MATION (OPTIONAL) Immunity's floodplain manuformation. (Indicate the foodplain management feet [GB. Date of the feet [Feet [Cc.] Feet [F		2001 1997 14 - N	
Route and Box No. ZIP Code 34223 MATION (OPTIONAL) Immunity's floodplain man ilicable item(s) and sign of signed and not sign of sig			
Route and Box No. ZIP Code 34223 MATION (OPTIONAL) Illicable item(s) and sign of signed and sign of signed and sign of sign of signed and sign of signed and sign of signed and sign of sign of signed and sign of signed and sign of sign of sign of signed and sign of si		nd location, per C2(e), if applicable)	comments (including type of equipment a
ANT: In these spaces, copy the corresponding information from Section A. Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. YSHORE DRIVE State VOOD State ZIP Code Florida 34223 SECTION G - COMMUNITY INFORMATION (OPTIONAL) I official who is authorized by law or ordinance to administer the community's floodplain man fem GB-G10. In Puerto Rico only, enter meters. The information in Section C was taken from other documentation that has been signed and engineer, or architect who is authorized by law to certify elevation information. (Indicate the data in the Community official completed Section E for a building located in Zone A (without a FEMA. or Zone AO. The following information (Items G4-G10) is provided for community floodplain management has been issued for: New Construction Substantial Improvement restion of se-built lowest floor (Including basement) Permit has been issued for: Official who is surflorized by law to certify elevation information. (Indicate the applicable item(s) and sign information. (Indicate the carrier of the community floodplain management in the community official completed Section E for a building located in Zone A (without a FEMA.) The following information (Items G4-G10) is provided for community floodplain management floor (Including basement) Section E or a building site: Official Name Title Title Title Title		Date	Signature
the corresponding information from Section A. t., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. State State Florida SECTION G - COMMUNITY INFORMATION (OPTIONAL) I law or ordinance to administer the community's floodplain man Elevation Certificate. Complete the applicable item(s) and sign in only, enter meters. C was taken from other documentation that has been signed and suthorized by law to certify elevation information. (Indicate the below.) sted Section E for a building located in Zone A (without a FEMA terms G4-G10) is provided for community floodplain management series. B New Construction Substantial Improvement (Including basement) GB. Date Permit Issued GB. Date Permit Insued GB. Date Pe		Telephone	Community Name
the corresponding information from Section A. t., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. State State Florida SECTION G - COMMUNITY INFORMATION (OPTIONAL) Isw or ordinance to administer the community's floodplain man Elevation Certificate. Complete the applicable item(s) and sign to only, enter meters. C was taken from other documentation that has been signed and such a suthorized by law to certify elevation information. (Indicate the below.) sted Section E for a building located in Zone A (without a FEMA terms G4-G10) is provided for community floodplain management stems G4-G10) is provided for community floodplain management (Including basement) G5. Date Permit issued G6. Date Permit issued G6. Date Permit issued G7. Date Permit issued G8. Date Permit issued	9	Title	Local Official's Name
State Florida SECTION G - COMMUNITY INFORMATION (OPTIONAL) I law or ordinance to administer the community's floodplain main Elevation Certificate. Complete the applicable item(s) and sign to only, enter meters. C was taken from other documentation that has been signed and such a county of the service			G10. Community's design flood elevation:
tt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State State Florida SECTION G - COMMUNITY INFORMATION (OPTIONAL) Isw or ordinance to administer the community's floodplain man Elevation Certificate. Complete the applicable item(s) and sign to only, enter meters. C was taken from other documentation that has been signed and sauthorized by law to certify elevation information. (Indicate the below.) seted Section E for a building located in Zone A (without a FEMA terms G4-G10) is provided for community floodplain management G5. Date Permit Issued New Construction Substantial Improvement (Including basement)	meters		G9. BFE or (in Zone AO) depth of floodi
the corresponding information from Section A. t., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. State State Florida SECTION G - COMMUNITY INFORMATION (OPTIONAL) Isw or ordinance to administer the community's floodplain main elevation Certificate. Complete the applicable item(s) and sign to only, enter meters. C was taken from other documentation that has been signed and suthorized by law to certify elevation information. (Indicate the below.) eted Section E for a building located in Zone A (without a FEMA below.) G5. Date Permit Issued G6. Date Permit Issued CC New Construction Substantial Improvement			of the building:
the corresponding information from Section A. t., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. State State Florida SECTION G COMMUNITY INFORMATION (OPTIONAL) Isw or ordinance to administer the community's floodplain man Elevation Certificate. Complete the applicable item(s) and sign to only, enter meters. C was taken from other documentation that has been signed and a suthorized by law to certify elevation information. (Indicate the below.) sted Section E for a building located in Zone A (without a FEMA Bears G4-G10) is provided for community floodplain managementation. G5. Date Permit Issued G6. Date Cc	ent	☐ New Construction ☐ Substantial Improvement	
the corresponding information from Section A. t., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. State State Florida SECTION G - COMMUNITY INFORMATION (OPTIONAL) Isw or ordinance to administer the community's floodplain man Elevation Certificate. Complete the applicable item(s) and sign or only, enter meters. C was taken from other documentation that has been signed and authorized by law to certify elevation information. (Indicate the below.) sted Section E for a building located in Zone A (without a FEMA terms G4-G10) is provided for community floodplain management	Date Certificate of Compliance/Occup	G5.	1577
the corresponding information from Section A. t., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. State State Florida SECTION G - COMMUNITY INFORMATION (OPTIONAL) Isw or ordinance to administer the community's floodplain man Elevation Certificate. Complete the applicable item(s) and sign I o only, enter meters. C was taken from other documentation that has been signed and s authorized by law to certify elevation information. (Indicate the below.) eted Section E for a building located in Zone A (without a FEMA)	nagement purposes.	s G4–G10) is provided for community floodplain ma	G3. The following information (Item
the corresponding information from Section A. t., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. State State Florida SECTION G COMMUNITY INFORMATION (OPTIONAL) I law or ordinance to administer the community's floodplain man Elevation Certificate. Complete the applicable item(s) and sign to only, enter meters. C was taken from other documentation that has been signed and s authorized by law to certify elevation information. (Indicate the below.)	a FEMA-issued or community-issued BFE)	Section E for a building located in Zone A (without	G2. A community official completed or Zone AO.
the corresponding information from Section A. t., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. State State Florida SECTION G - COMMUNITY INFORMATION (OPTIONAL) Isw or ordinance to administer the community's floodplain man Elevation Certificate. Complete the applicable item(s) and sign only, enter meters.	gned and sealed by a licensed surveyor, icate the source and date of the elevation	as taken from other documentation that has been significant that has been significant to the state of the sta	G1. The information in Section C we engineer, or architect who is a data in the Comments area be
the corresponding information from Section A. t., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. State State Florida SECTION G - COMMUNITY INFORMATION (OPTIONAL)	lain management ordinance can complete nd sign below. Check the measurement	v or ordinance to administer the community's floodply vation Certificate. Complete the applicable item(s) any, enter meters.	The local official who is authorized by lan Sections A, B, C (or E), and G of this Ele used in Items G8-G10. In Puerto Rico o
the corresponding information from Section A. t., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. State State Florida 34223	NAL)	ECTION G - COMMUNITY INFORMATION (OPTIC	6
the corresponding information from Section A. t., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No.			ENGLEWOOD
	1 34	Init, Suite, and/or Bidg. No.) or P.O. Route and Box	Building Street Address (including Apt., 1 1065 BAYSHORE DRIVE
	OMB No. 1660-0008 Expiration Date: November 30, 2018		ELEVATION CERTIFICATE

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

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE Important: Follow the instructions on pages 1-8.

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

	SEC	SECTION A - PROPERTY INFORMATION	Y INFORMATION		FOR INSURAN	NCE COMPANY LISE
A1. Building Owner's Name MICHAEL LANTZ & MARTIN WEST	MARTIN \	WEST			Policy Number:	
A2. Building Street Addre Box No.	Address (in	ncluding Apt., Unit, Sui	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	r P.O. Route and	Company NAIC Number:	IC Number:
City			State		ZIP Code	
A3 Property Desc	rintion () cat	and Block Number T	Horida		34223	
	VOOD GAR	TAX	bers, Tax Parcel Number, Legal Description, etc.) TAX ID #0492130006, DETACHED GARAGE	jal Description, etc. CHED GARAGE	.)	
A4. Building Use (e.g., Reside	ntial, Non-Residential,	Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	tc.) NON-RESIDENTIAL	DENTIAL	
A5. Latitude/Longitude:	ude: Lat. 2	Lat. 26.98593°	Long82.38459°		Horizontal Datum: NAD 1927	27 × NAD 1983
A6. Attach at least	2 photograp	ohs of the building if th	Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance	sed to obtain flood		
A7. Building Diagram Number	ım Number	1A				
A8. For a building v	with a crawle	For a building with a crawispace or enclosure(s): a) Square footage of crawispace or enclosure(s):	-			
b) Number of p	ermanent fi	ood openings in the cr	b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	(s) within 1.0 foot a	above adiacent grade	0
c) Total net an	a of flood o	c) Total net area of flood openings in A8.b	0 sq in			
d) Engineered flood openings?	flood openi	☐ Yes 区	No			
A9. For a building with an attached garage:	ith an attac	hed garage:				
 a) Square footage of attached garage 	age of attack	hed garage	744 sq ft			
b) Number of p	ermanent fl	ood openings in the at	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade	.0 foot above adjac	cent grade 14	
c) Total net are	a of flood o	Total net area of flood openings in A9.b	800 sq in	'n	7	= = = = = = = = = = = = = = = = = = = =
d) Engineered flood openings?	flood openir	ıgs? ∑Yes □ No	V O	a		
	<u>s</u>	ECTION B - FLOOD	SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	MAP (FIRM) INFO	RMATION	
B1. NFIP Community Name & Community Number SARASOTA COUNTY - 125144	ly Name & (TY - 12514	Community Number	B2. County Name SARASOTA	Vame	71 00	B3. State Florida
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/	B8. Flood Zone(s)	B9. Base Flood Eleval	vation(s) Base Flood Depth)
12115C-0432	П	11-04-2016	11-04-2016	AE	12,	
B10. Indicate the source of the ☐ FIS Profile ☒ FIRM	ource of the	Base Flood Elevation (BFE) Community Determined	Base Flood Elevation (BFE) data or base flood depth entered in Item B9:	od depth entered ir	n Item B9:	
B11. Indicate eleva	tion datum e	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 Reso	Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?	area or Otherwise	Protected Area (OP/	A)? Tyes X No
Designation Date:	ate:		☐ CBRS ☐ OPA			

UNIT (GPSTEST APP - NO CONVERSION). ERED FOR 800 SQUARE FEET (TOTAL). TOTAL NET	UNIT (GPSTEST APP FRED FOR 800 SQUAI RE FOR FLOOD VEN	n, per C2(e), if applicable) M A HAND HELD G.P.S. AND 4 VENTS ENGINEE CHES. ATTACHMENTS A	Comments (including type of equipment and location, per C2(e), if applicable) FILE #19-05-56. SECTION A5 WAS DERIVED FROM A HAND HELD G.P.S. UNIT (GPSTEST APP - NO CONVERSION). STRUCTURE HAS 10 NON-ENGINEERED VENTS, AND 4 VENTS ENGINEERED FOR 800 SQUARE FEET (TOTAL). TOTAL NET AREA OF FLOOD OPENINGS IS 1,088 SQARE INCHES. ATTACHMENTS ARE FOR FLOOD VENT INFORMATION. CERTIFICATE
gent/company, and (3) building owner.	(941) 497-1290 official, (2) insurance aç	08-06-2019 chments for (1) community	Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.
Ext	Telephone	Date	Signatura
600	ZIP Code	State	City VENICE
Mere			Address 742 SHAMROCK BLVD
		3	Company Name STRAYER SURVEYING AND MAPPING, INC.
5			Title PSM/CFM
		License Number 5228	Certifier's Name B. GREGORY RIETH
X Check here if attachments.	? ⊠Yes □No	y a licensed land surveyor	Were latitude and longitude in Section A provided by a licensed land surveyor?
law to certify elevation information. ble. I understand that any false	rchitect authorized by ferpret the data available ection 1001.	Id surveyor, engineer, or a sents my best efforts to in ander 18 U.S. Code, S	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.
CATION	RCHITECT CERTIFIC	SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION	SECTION D - SURVEY
N/A 🏻 feet 🗌 meters		of deck or stairs, including	n) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support
7.3 X feet meters		ilding (HAG)	
		ilding (LAG)	f) Lowest adjacent (finished) grade next to building (LAG)
N/A 🛛 feet 🔲 meters		nt servicing the building Comments)	 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)
⊠ (fee			
N/A X feet meters		ember (V Zones only)	
		amapace, or enclosure in	
Check the measur	ה ה		a) Top of bottom floor (including basement crawlenges or anchor in the basement)
	BIOW.	Dither/Source:	☐ NGVD 1929 区 NAVD 1988 ☐ Other/Source: Datum used for building elevations must be the same as that used for the BEE
	Vertical Datum: NAVD1988	Vertical Date	Indicate elevation datum used for the elevations in terms of the control of the server
/AE, AR/A1-A30, AR/AH, AR/AO. to Rico only, enter meters.	n BFE), AR, AR/A, AR/ ad in Item A7. In Puerto	BFE), VE, V1-V30, V (with be building diagram specific	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, Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.
uction* X Finished Construction	☐ Building Under Construction*	Construction Drawings* Representation of the bull	C1. Building elevations are based on: Construction Drawings* Building Under Construction of the building Under Construction Drawings*
EQUIRED)	IATION (SURVEY RE	G ELEVATION INFORMATION (SURVEY REQUIRED)	SECTION C - BUILDING
Company NAIC Number	ZIP Code 34223	State 2	ENGLEWOOD
Policy Number:	Section A. Route and Box No.	and/or Bidg. No.) or P.O.	Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 1065 BAYSHORE DRIVE
Expiration Date: November 30, 2018			IMPORTANT: In these spaces of the state of t
OLD 11, 4000 0000			

OMB No. 1660-0008 Expiration Date: November 30

THE RESERVE THE PARTY OF THE PA		Expiration Date. November 30, 2018
IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 1065 BAYSHORE DRIVE	nation from Section A. No.) or P.O. Route and Box No.	FOR INSURANCE COMPANY USI Policy Number:
City State ENGLEWOOD Florida	ZIP Code 34223	Company NAIC Number
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)	INFORMATION (SURVEY NO ZONE A (WITHOUT BFE)	OT REQUIRED)
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 lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is	Certificate is intended to support a lide, if available. Check the measurem appropriate boxes to show whether ade (LAG).	rt a LOMA or LOMR-F request, irement used. In Puerto Rico only, ther the elevation is above or below the HAG.
E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–the next higher floor (elevation C2.b in the diagrams) of the building is	ovided in Section A Items 8 and/or 9	for 9 (see pages 1-2 of instructions),
E3. Attached garage (top of slab) is	feet meters	above or
servicing the building is The feet meters above or below the	☐ feet ☐ meters p of the bottom floor elevated in account of the bottom floor elevated in account of the local official must ce	feet meters above or below the HAG. tom floor elevated in accordance with the community's The local official must certify this information in Section G.
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a F	- PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION porized representative who completes Sections A, B, and E for Zone A (without a	CERTIFICATION Zone A (without a FEMA-issued or
Property Owner or Owner's Authorized Representative's Name Address	City	State ZIP Code
Signature	Date	Telephone
Comments		
		☐ Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. 1065 BAYSHORE DRIVE

FOR INSURANCE COMPANY USE

ENGLEWOOD

ZIP Code

Company NAIC Number Policy Number:

Florida State

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 Caption

Clear Photo One

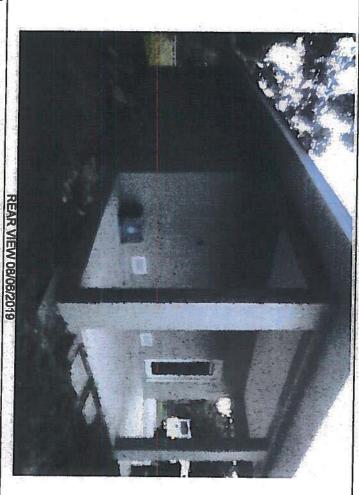


Photo Two Caption

Clear Photo Two

BUILDING PHOTOGRAPHS

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2018

Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No IMPORTANT: In these spaces, copy the corresponding information from Section A. 1065 BAYSHORE DRIVE

FOR INSURANCE COMPANY USE
Policy Number:

ENGLEWOOD Florida State 34223 ZIP Code

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.

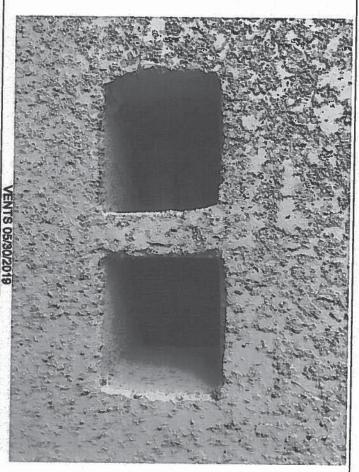


Photo Three Caption

Clear Photo Three



Photo Four Caption

Clear Photo Four



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ICC-ES Evaluation Report

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This report is subject to renewal 03/2020

SECTION: 08 95 43—VENTS/FOUNDATION FLOOD VENTS DIVISION: 08 00 00—OPENINGS

REPORT HOLDER:

SMART PRODUCT INNOVATIONS, INC.

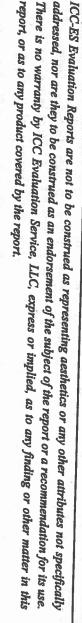
EVALUATION SUBJECT:

FREEDOM FLOOD VENT" AUTOMATIC FOUNDATION FLOOD VENT: **MODEL FFV-1608**



(WSSPC) Award in Excellence" "2014 Recipient of Prestigious Western States Seismic Policy Council

A Subsidiary of 000£ COU





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ICC-ES Evaluation Report

ESR-4332

This report is subject to renewal March 2020 Issued March 2019

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A Subsidiary of the International Code Council®

DIVISION: 08 00 00—OPENINGS

Section: 08 95 43—Vents / Foundation Flood Vents

REPORT HOLDER:

SMART PRODUCT INNOVATIONS, INC

EVALUATION SUBJECT:

FREEDOM FLOOD VENTTM AUTOMATIC FOUNDATION FLOOD VENT: MODEL FFV-1608

1.0 EVALUATION SCOPE

Compliance with the following codes:

- 2018, 2015, 2012, 2009 and 2006 International Building Code[®] (IBC)
- **2018**, 2018, 2015, 2012, Residential Code® (IR (RC) 2009 and 2006 International

Properties evaluated:

- Physical operation
- Water flow
- Weathering

2.0 USES

equalize hydrostatic pressure on walls of enclosures subject to rising or falling floodwaters. With the cover removed, the model FFV-1608 also provides natural air The model FFV-1608 Freedom Flood Vent is used to

3.0 DESCRIPTION

General:

frame with mounting flange and a polycarbonate horizontally pivoting door. When subjected to rising water, the model FFV-1608 Freedom Flood Vent" door is activated and pivots to allow water and debris to flow in either direction to equalize hydrostatic pressure from one side of the enclosure to the other. The FV features a removable polycarbonate cover. The FV door will activate and pivot when subjected to rising water with or without the polycarbonate cover installed. engineered mechanically operated in-wall flood vent (FV) that automatically allows floodwater to enter an enclosed area and exit. The FV is comprised of a polycarbonate The model FFV-1608 Freedom The FV is comprised of a polycarbonate Flood Vent"

Engineered Opening:

maximum rate of rise and fall of 5.0 feet per hour (0.423 mm/s). In order to comply with the engineered opening requirement of ASCE/ SEI 24, Freedom Flood Vent. FVs must be installed in accordance with Section 4.0 below. See Table 1 for vent size and maximum allowable area coverage for a single vent. The FV complies with the design principle noted in Section 2.7.2.2 and Section 2.7.3 of ASCE/ SEI 24-14 (2018 and 2015 IBC and IRC) [Section 2.6.2.2 of ASCE/ SEI 24-05 (2012, 2009, 2006 IBC and IRC)] for a maximum rate of rise and fall of 5.0 feet per hour

4.0 DESIGN AND INSTALLATION

with the manufacturer's instructions, the applicable code, and this report. In order to comply with the engineered opening design principle noted in Sections 2.7.2.2 and 2.7.3 of ASCE/ SEI 24-14 (2018 and 2015 IBC and IRC) [Section 2.6.2.2 of ASCE/ SEI 24-05 (2012, 2009, 2006 IBC and IRC)], the Freedom Flood Vent must be installed as follows: construction. Installation of the vent must be in accordance be installed into walls or overhead doors of existing or new The model FFV-1608 Freedom Flood Vent" is designed to

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one FV for every 250 square feet (23.2 m²) of enclosed area.
- Below the base flood elevation.
- With the bottom of the vent located a maximum of 12 inches (305.4 mm) above the higher of the final immediately under each opening. interior grade or floor and the finished exterior grade

5.0 CONDITIONS OF USE

subject to the following conditions: complies with, The Freedom Flood Vent" described in this report complies with, or is a suitable alternative to what is specified in, those codes listed in Section 1.0 of this report,

- instructions in this report shall govern. be installed in accordance with this report, the applicable code and the manufacturer's published installation instructions. In the event of a conflict, the The model FFV-1608 Freedom Flood Vent unit must
- 51 The model FFV-1608 Freedom Flood Vent" unit must not be used in place of "breakaway walls" in coastal high hazard areas, but are permitted for use in conjunction with breakaway walls in other areas.

(INSI

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ŝ Use of the Freedom Flood Vent as under-floor space ventilation is outside the scope of this report.

EVIDENCE SUBMITTED

Data in accordance with the ICC-ES Acceptance Criteria for Mechanically Operated Flood Vents (AC364), dated August 2015 (editorially revised October 2017).

7.0 IDENTIFICATION

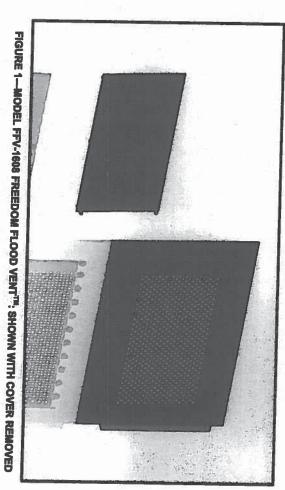
7.1 The Freedom Flood Vent" model recognized in this report must be identified by a label bearing the manufacturer's name (Smart Product Innovations, Inc.) and the evaluation report number (ESR-4332.).

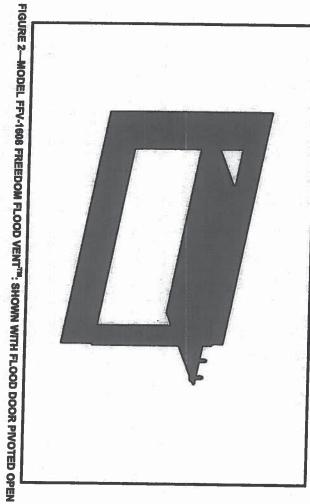
7.2 following: The report holder's contact information ø. ŧ

SMART PRODUCT INNOVATIONS, INC. 430 ANDBRO DRIVE, UNIT 1 PITMAN, NEW JERSEY 08071 www.freedomfloodvent.com info@freedomfloodvent.com (800) 507-1527

TABLE 1-FREEDOM FLOOD VENTTE

			For St: 1 inch = 25.4 mm
250	153/4" X 81/16"	FFV-1608	
A	The property of the second of		
COVERAGE (sq. ft.)	MODEL SIZE	MODEL NUMBER	MODEL NAME







ICC-ES Evaluation Report

ESR-4332 CBC and CRC Supplement

Issued March 2019

This report is subject to renewal March 2020.

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A Subsidiary of the International Code Council®

DIVISION: 08 00 00—OPENINGS

Section: 08 95 43—Vents / Foundation Flood Vents

REPORT HOLDER:

SMART PRODUCT INNOVATIONS, INC

EVALUATION SUBJECT:

FREEDOM FLOOD VENTTM AUTOMATIC FOUNDATION FLOOD VENT: MODEL FFV-1608

1.0 REPORT PURPOSE AND SCOPE

The purpose of this evaluation report supplement is to indicate that the Freedom Flood Vent. Automatic Foundation Flood Vent: Model FFV-1608, recognized in ICC-ES master evaluation report ESR-4332, has also been evaluated for compliance

Applicable code edition(s):

■ 2016 California Building Code (CBC)

■ 2016 California Residential Code (CRC)

2.0 CONCLUSIONS

The Freedom Flood Vent." Automatic Foundation Flood Vent: Model FFV-1608, described in Sections 2.0 through 7.0 of the master evaluation report ESR-4332, compiles with CBC Chapters 12, 16 and 16A, provided the design and installation are in accordance with the 2015 International Building Code® (2015 IBC) provisions noted in the master report and the additional requirements of 12, 16, and 16A, as applicable.

The product recognized in this supplement has not been evaluated under CBC Chapter 7A for use in the exterior design and construction of new buildings located in any Fire Hazard Severity Zone within State Responsibility Areas or any

CRC

The Freedom Flood Vent[™] Automatic Foundation Flood Vent: Model FFV-1608, described in Sections 2.0 through 7.0 of the master evaluation report ESR-4332, compiles with the 2016 CRC, provided the design and installation are in accordance with the 2015 *International Residential Code®* (2015 IRC) provisions noted in the master report.

The product recognized in this supplement has not been evaluated under 2016 CRC Chapter R337, for use in the exterior design and construction of new buildings located in any Fire Hazard Severity Zone within State Responsibility Areas or any Wildland-Urban Interface Fire Area.

The product recognized in this supplement has not been evaluated for compliance with the *International Wildiand-Urban Interf*ace Code®.

This supplement expires concurrently with the master report, issued March 2019

ICC-ES Evaluation Report

ESR-4332 FBC Supplement

Issued March 2019

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

REPORT HOLDER:

SMART PRODUCT INNOVATIONS, INC

EVALUATION SUBJECT:

FREEDOM FLOOD VENTTM AUTOMATIC FOUNDATION FLOOD VENT: MODEL FFV-1608

1.0 REPORT PURPOSE AND SCOPE

The purpose of this evaluation report supplement is to indicate that Freedom Flood Vent." Automatic Foundation Flood Vent. Model FFV-1608, recognized in ICC-ES master evaluation report ESR-4332, has also been evaluated for compliance with

Applicable code editions:

- 2017 Florida Building Code Building
- 2017 Floride Building Code—Residential

2.0 CONCLUSIONS

The Freedom Flood VentTM Automatic Foundation Flood Vent: Model FFV-1608, described in Sections 2.0 through 7.0 of the master evaluation report ESR-4332, compiles with the *Florida Building Code—Building* and the *Florida Building Code—*Residential, provided the design and installation are in accordance with the *International Building Code* (IBC) provisions

Use of the Freedom Flood Vent" Automatic Foundation Flood Vent: Model FFV-1608 has also been found to be in compliance with the High-Velocity Hurricane Zone provisions of the Florida Building Code—Building and the Florida Building

For products falling under Florida Rule 9N-3, verification that the report holder's quality assurance program is audited by a quality assurance entity approved by the Florida Building Commission for the type of inspections being conducted is the responsibility of an approved validation entity (or the code official, when the report holder does not possess an approval by

This supplement expires concurrently with the master report, issued March 2019