ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2

	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 Bldg. No.) or P.O. Route and Box No. 317 TALQUIN COURT	FOR INSURANCE COMPANY USE Policy Number:
City State ZIP Code ENGLEWOOD Florida 34223	Company NAIC Number
SECTION G - COMMUNITY INFORMATION (OPTIONAL)	
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.	nagement ordinance can complete below. Check the measurement
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)	nd sealed by a licensed surveyor, e source and date of the elevation
G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.	A-issued or community-issued BFE)
G3. 🔲 The following information (Items G4–G10) is provided for community floodplain management purposes.	ent purposes.
G4. Permit Number G5. Date Permit Issued G6. 1 G7. Date Permit Issued G8. 1	Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for: New Construction 🗌 Substantial Improvement	
G8. Elevation of as-built lowest floor (including basement)	☐ feet ☐ meters Datum
G9. BFE or (in Zone AO) depth of flooding at the building site:	meters Datum
G10. Community's design flood elevation:	meters Datum
Local Official's Name Title	
Community Name Telephone	
Signature	
Comments (including type of equipment and location, per C2(e), if applicable)	
	Check here if attachments.

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

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

Important: Follow the instructions on pages 1-9.

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	B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Pesignation Date: NX CBRS Designation Date: OPA	B11. Indicate elevation datum used for BFE in Item B9: 🔲 N	B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item ☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:	B4. Map/Panel B5. Suffix B6. FIRM Index E	B1. NFIP Community Name & Community Number SARASOTA COUNTY 125144	SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	d) Engineered flood openings? X Yes No	c) Total net area of flood openings in A9.b 384	b) Number of permanent flood openings in the attached	a) Square footage of attached garage 409	A9. For a building with an attached garage:	d) Engineered flood openings? ☐ Yes ☒ No	c) Total net area of flood openings in A8.b 0	b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	A8. For a building with a crawlspace or enclosure(s):a) Square footage of crawlspace or enclosure(s)	A7. Building Diagram Number 1A	A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance	A5. Latitude/Longitude: Lat. 26°58'34.61"N Long. 8	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description LOT 72, PARK FOREST, PHASE 6C (PLAT BOOK 50, PAGE 47) P.I.D. #0851-02-0020	ENGLEWOOD	532 BOX ELDER CT. (TALQUIN COURT PER PLAT)	A2. Building Street Address (including Apt., Unit, Suite, and/or Box No.	A1. Building Owner's Name PARK FOREST PHASE 6, LLC.	SECTION A - PROPERTY INFORMATION
	ystem (CBRS) area o ☐ OPA	□ NGVD 1929	ata or base flood dep	B7. FIRM Panel Effective/ Revised Date 11/04/2016	B2. County Name SARASOTA	ANCE RATE MAP (F		sq in	garage within 1.0 foot above adjacent grade	sq ft			sq in	ce or enclosure(s) with	0 sq ft		cate is being used to	Long. 82°20'27.21"W	n, Accessory, etc.)	Tax Parcel Number, Legal Description, 50, PAGE 47) P.I.D. #0851-02-0020	Florida		or Bldg. No.) or P.O. Route		RMATION
	Otherwise Prote		th entered in Item	B8. Flood Zone(s) AE		TRM) INFORMA			above adjacent g					งin 1.0 foot above			btain flood insura	Horizontal Datum:	RESIDENTIAL	cription, etc.) 0020	W.		coute and		5
. 3	acted Area (OPA)? ☐ Yes ဩ No	Other/Source:	1 B9:	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 10	B3. State Florida	TION			grade 3				u .	adjacent grade 0			ance.	n: NAD 1927 X NAD 1983			ZIP Code 34223		Company NAIC Number:	Policy Number:	FOR INSURANCE COMPANY USE

OMB No. 1660-0008

74 RATED AT 200 SQ.FT EACH. DF THE RESIDENCE.	NOTE: FLOOD VENTS INSTALLED (3 TOTAL) ARE SMART VENT MODEL 1540-520 AND 1540-574 RATED AT 200 SQ EQUIPMENT SERVICING THE BUILDING IS HOT WATER HEATER LOCATED IN THE GARAGE OF THE RESIDENCE.	m z
USING A CONVERSION	NOTE:ELEVATIONS HEREON HAVE BEEN CONVERTED FROM NGVD1929 DATUM TO NAVD88 USING A COFACTOR OF -1.1'.	FAC
IT WITH A GARMIN GPSMAP 76	Comments (including type of equipment and location, per C2(e), if applicable) LATITUDE AND LONGITUDE IN SECTION A5 HAS BEEN OBTAINED BY A FIELD MEASUREMENT WITH A GARMIN GPSMAP 76 HANDHELD RECEIVER.	¥ Z S
jent/company, and (3) building owner.	Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.	S
1.40(0)	Signature Telephone Telephone (941) 377-9178	Sig
05/06/2018	City State ZIP Code SARASOTA Florida 34240	City SAF
Demonstration of a	Address 8340 CONSUMER COURT	Ad 83
Wildiace Seal	Company Name A M ENGINEERING, INC.	<u> </u>
	Title VICE PRESIDENT	≦ <u>‡</u>
William William	Certifier's Name License Number RONALD R. NOURSE PSM #6026	7,0
Check here if attachments.	Were latitude and longitude in Section A provided by a licensed land surveyor? ⊠Yes ☐ No	5
law to certify elevation information. le. I understand that any false	This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify I certify that the information on this Certificate represents my best efforts to interpret the data available. I understandered the section 1001.	Th Sta
CATION	SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION	
X feet	h) Lowest adjacent grade at lowest elevation of deck or stairs, including N/A.	
X feet	g) Highest adjacent (finished) grade next to building (HAG)	
X feet meters	f) Lowest adjacent (finished) grade next to building (LAG) 10. 7	
X feet	e) Lowest elevation of machinery or equipment servicing the building 11. 1 (Describe type of equipment and location in Comments)	
feet		
feet :	ntal structural member (V Zones only)	60
	b) Top of the next higher floor	
Check the measurement used.	a) Top of bottom floor (including basement, crawlspace, or enclosure floor)1.4	
	_	
	Indicate elevation datum used for the elevations in items a) through h) below. \square NGVD 1929 \square NAVD 1988 \square Other/Source:	71
Rico only, enter meters.	Complete Ite Benchmark I	
NE	"A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations - Zones A1-A30, AE, AH, A (with RFE), VF, V1-V30, V (with RFE), AB, AB/A, AB/A	 Ω
ction* X Finished Construction	C1. Building elevations are based on: Construction Drawings* Building Under Construction*	0
REQUIRED)	SECTION C - BUILDING ELEVATION INFORMATION (SURVEY RE	
Company NAIC Number	City State ZIP Code Florida 34223	EN City
Policy Number:	Box No.	317
FOR INSURANCE COMPANY USE	mation from Section A.	N N
Expiration Date: November 30, 2018	CLUAN CEXITICALE	F

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30

Check here if attachments				.034			
				41			
						co.	Comments
22	Telephone	Tele	Date		S 11	- 122 - U.S.	Signature
ZIP Code	te	State	City				Address
ut a FEMA-issued or lest of my knowledge.	ne A (without to the bect to the bect)	The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge. Property Owner or Owner's Authorized Representative's Name	ompletes Sectionents in Section	resentative who con here. The staten sentative's Name	's authorized repone AO must signature.	The property owner or owner's authorized representative who community-issued BFE) or Zone AO must sign here. The state Property Owner or Owner's Authorized Representative's Name	The prope communit
	RTIFICATI	SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION	OWNER'S RI	RTY OWNER (OR	ON F - PROPE	SECTI	
ve or □ below the HAG. ith the community's nformation in Section G.	s ☐ above o cordance with the critify this inform	Top of platform of machinery and/or equipment	top of the botto	pment s available, is the Yes No	inery and/or equi	Top of platform of machinery and/or equipment servicing the building is Zone AO only: If no flood depth number is avail floodplain management ordinance?	E4. Top servi E5. Zone flood
_ i		_		e de la companya de l	slab) is	Attached garage (top of slab) is	E3. Attac
es 1–2 of Instructions), ve or □ below the HAG.	9 (see pages 1-	ection A Items 8 and/or 9	provided in Se	nt flood openings	1—9 with permane	For Building Diagrams 6–9 with permanent flood openings provided in Section A Items the next higher floor (elevation C2.b in the diagrams) of the building is	E2. For E the n
vve or ☐ below the HAG.	s above o	☐ feet ☐ meters	grade (LAG).	er lowest aujaceint ent, ent,	including baseme sure) is including baseme including baseme sure) is	a) Top of bottom floor (including basement, crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is	a) T
ion is above or below	the elevat	r meters. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent area (MAC) and the level of the light of the highest adjacent area (MAC) and the level of th	ne appropriate	wing and check th	lation for the follo	lers. ide elevation inform	E1. Provide
LOMR-F request, In Puerto Rico only,	LOMA or I	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,	he Certificate i rade, if availab	ttems E1–E5. If teE4, use natural gr	it BFE), complete C. For Items E1–	s AO and A (withou Sections A, B,and	For Zone complete
D)	REQUIRE	ILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)	ON INFORMA	BUILDING ELEVATION FOR ZONE AO AI	SECTION E - BUIL	SEC	
Company NAIC Number	Company	ZIP Code 34223		State Florida		/00D	City ENGLEWOOD
WRANCE COMPANY USE mber:	FOR INSURA Policy Numbe	Route and Box No.	No.) or P.O.	Suite, and/or Bldg	luding Apt., Unit,	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 317 TALQUIN COURT	Building :
Expiration Date: November 30, 2018	Expiration					APT. 1- Al-	TOCOL

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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

Company NAIC Number	ZIP Code 34223	City State ENGLEWOOD Florida
	12	317 TALQUIN COURT
Policy Number:	o.) or P.O. Route and Box No.	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
FOR INSURANCE COMPANY USE	ation from Section A.	IMPORTANT: In these spaces, copy the corresponding information from Section A.

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.

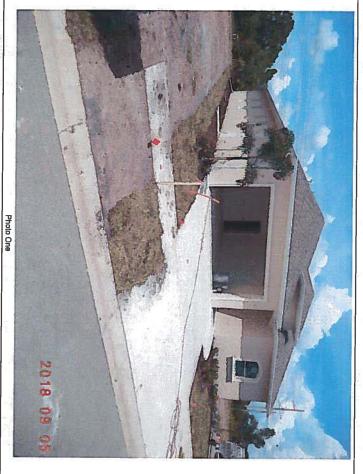


Photo One Caption FRONT VIEW

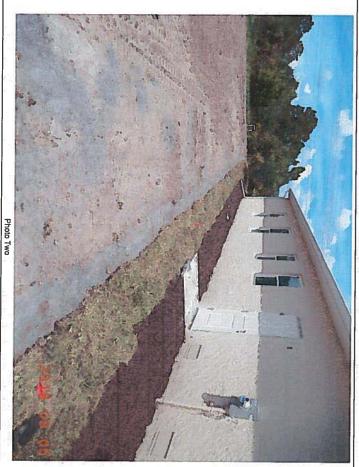


Photo Two Caption LEFT SIDE VIEW (WEST)

FEMA Form 086-0-33 (7/15)

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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

IMPORTANT: In these spaces, copy the corresponding information from Section A. City 317 TALQUIN COURT Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No ENGLEWOOD Florida State 34223 ZIP Code Company NAIC Number Policy Number: FOR INSURANCE COMPANY USE

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 One Caption REAR VIEW

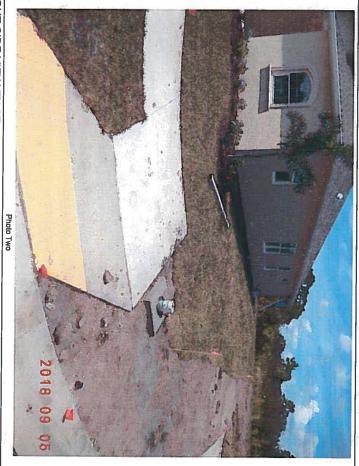


Photo Two Caption RIGHT SIDE VIEW (EAST)



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ESR-2074

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Reissued 02/2017 This report is subject to renewal 02/2019.

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

REPORT HOLDER:

SMARTVENT PRODUCTS, INC.

PITMAN, NEW JERSEY 08071 430 ANDBRO DRIVE, UNIT 1

EVALUATION SUBJECT:

SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS:

MODELS #1540-520; #1540-521; #1540-510; #1540-511;

#1540-570; #1540-574; #1540-524; #1540-514



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ICC-ES **Evaluation Report**

ESR-2074

Reissued February 2017

This report is subject to renewal February 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:

430 ANDBRO DRIVE, UNIT 1 PITMAN, NEW JERSEY 08071 (877) 441-8368 info@smartvent.com SMARTVENT PRODUCTS, INC. .smartvent.com

EVALUATION SUBJECT:

#1540-570; #1540-574; #1540-524; #1540-514 SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS: MODELS #1540-520; #1540-521; #1640-510; #1540-511;

.0 **EVALUATION SCOPE**

Compliance with the following codes:

- 2015, 2012, 2009 and 2006 International Building Code® (IBC)
- 2015, 2012, Code® (IRC) 2009 and 2006 International Residential
- [†]The ADIBC is based on the 2009 IBC, 2009 IBC code sections referenced in this report are the same sections in the ADIBC. 2013 Abu Dhabi International Building Code (ADIBC)

Properties evaluated:

- Physical operation
- Water flow

2.0 USES

natural ventilation. hydrostatic pressure on walls of enclosures subject to rising or falling flood waters. Certain models also allow operated flood vents The Smart Vent® units (FVs) engineered employed mechanically ថ equalize

3.0 DESCRIPTION

3.1 General:

FV pivoting door is normally held in the closed position by a buoyant release device. When subjected to rising water, the buoyant release device causes the unit to unlatch, allowing the door to rotate out of the way and allow flow. When subjected to rising water, the Smart Vent® FVs internal floats are activated, then pivot open to allow flow in either direction to equalize water level and hydrostatic pressure from one side of the foundation to the other. The

> various models and sizes as described in Table 1. The Smart/ENT Stacking Model #1540-511 and Flood/VENT Stacking Model #1540-521 units each contain two vertically arranged openings per unit. Automatic Foundation Flood Each unit is water level stabilizes, equalizing the lateral forces. fabricated from stainless steel. Smart Vent Vents аге available

Engineered Opening:

must be installed in accordance with Section 4.0. hour (0.423 mm/s). In order to comply with the engineered opening requirement of ASCE/SEI 24, Smart Vent FVs The FVs comply with the design principle noted in Section 2.7.2.2 and Section 2.7.3 of ASCE/SEI 24-14 [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

3.3 Ventilation:

ventilation, Overhead Door Model #1540-514 both have screen covers with \$^{1}_4\$-inch-by-\$^{1}_4\$-inch (6.35 by 6.35 mm) openings, yielding 51 square inches (32 903 mm²) of net free area to supply natural ventilation. The SmartVENT® Stacking Model #1540-511 consists of two Model #1540-510 units in one assembly, and provides 102 square inches (6.5 806 mm²) of net free area to supply natural ventilation. The Other FVs recognized in this report do not offer natural SmartVENT® Model #1540-510 and SmartVENT®

4.0 DESIGN AND INSTALLATION

walls of any thickness. In order to comply with the engineered opening design principle noted in Section 2.7.2.2 and 2.7.3 of ASCE/SEI 24-14 [Section 2.6.2.2 of ASCE/SEI 24-05 (2012, 2009, 2006 IBC and IRC)], the Smart Vent® FVs must be installed as follows: Installation clips allow mounting in masonry and concrete instructions, construction from the exterior side. vents must be in accordance with installed into walls or overhead doors of existing or new SmartVENT® and FloodVENT® the applicable code and side. are designed the manufacturer's Installation of the report.

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one FV for every 200 square feet (18.6 m²) of enclosed area, except that the Smart/ENT Stacking Model #1540-511 and 400 square feet (37.2 m²) of enclosed area. installed with FloodVENT® Stacking Stacking Model #1540-Stacking Model #1540-521 a minimum of one FV must every
- Below the base flood elevation.



With the bottom of the FV located a maximum of 12 inches (305.4 mm) above the higher of the final grade or floor and finished exterior grade immediately under each opening.

5.0 CONDITIONS OF USE

The Smart Vent® FVs described in this report comply with, or are suitable alternatives to what is specified in, those codes listed in Section 1.0 of this report, subject to the following conditions:

- 5.1 The Smart Vent[®] FVs 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 Smart Vent® FVs 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

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

7.0 IDENTIFICATION

The Smart VENT® models recognized in this report must be identified by a label bearing the manufacturer's name (Smartvent Products, Inc.), the model number, and the evaluation report number (ESR-2074).

TABLE 1-MODEL SIZES

MODEL NAME	MODEL NUMBER	MODEL SIZE (in.)	COVERAGE (sq. ft.)
FloodVENT®	1540-520	15 ³ / ₄ " X 7 ³ / ₄ "	200
SmartVENT®	1540-510	15 ³ / ₄ " X 7 ³ / ₄ "	200
FloodVENT® Overhead Door	1540-524	15 ³ / ₄ " X 7 ³ / ₄ "	200
SmartVENT® Overhead Door	1540-514	15 ³ / ₄ " X 7 ³ / ₄ "	200
Wood Wall FloodVENT®	1540-570	14" X 8 ³ / ₄ "	200
Wood Wall FloodVENT® Overhead Door	1540-574	14" X 8 ³ / ₄ "	200
SmartVENT® Stacker	1540-511	16" X 16"	400
FloodVent® Stacker	1540-521	16" X 16"	400

For SI: 1 inch = 25.4 mm; 1 square foot = m

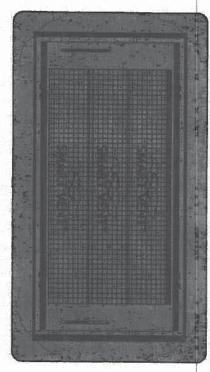


FIGURE 1—SMART VENT: MODEL 1540-510

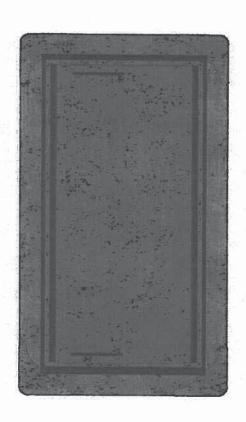


FIGURE 2—SMART VENT MODEL 1540-520

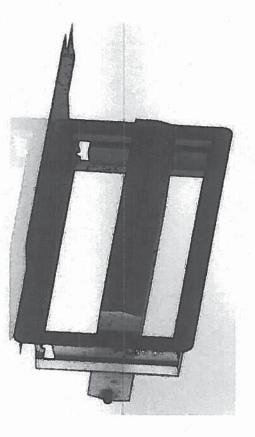


FIGURE 3—SMART VENT: SHOWN WITH FLOOD DOOR PIVOTED OPEN