

# ELEVATION CERTIFICATE

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

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1755 CHADWICK ROAD			Policy Number:		
City ENGLEWOOD	State Florida	ZIP Code 34223	Company NAIC Number		
<b>SECTION G – COMMUNITY INFORMATION (OPTIONAL)</b>					
<p>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.</p> <p>G1. <input type="checkbox"/> 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.)</p> <p>G2. <input type="checkbox"/> A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.</p> <p>G3. <input type="checkbox"/> The following information (Items G4–G10) is provided for community floodplain management purposes.</p>					
G4. Permit Number <b>20-146874 B1</b>		G5. Date Permit Issued		G6. Date Certificate of Compliance/Occupancy Issued	
<p>G7. This permit has been issued for:    <input checked="" type="checkbox"/> New Construction    <input type="checkbox"/> Substantial Improvement</p> <p>G8. Elevation of as-built lowest floor (including basement) of the building: _____ <input type="checkbox"/> feet    <input type="checkbox"/> meters    Datum _____</p> <p>G9. BFE or (in Zone AO) depth of flooding at the building site: _____ <input type="checkbox"/> feet    <input type="checkbox"/> meters    Datum _____</p> <p>G10. Community's design flood elevation: _____ <input type="checkbox"/> feet    <input type="checkbox"/> meters    Datum _____</p>					
Local Official's Name			Title		
Community Name			Telephone		
Signature			Date		
<p>Comments (including type of equipment and location, per C2(e), if applicable)</p> <div style="text-align: right; padding-right: 50px;"> <input type="checkbox"/> Check here if attachments.         </div>					

# 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 INSURANCE COMPANY USE	
A1. Building Owner's Name MARIE CALLIE WHITE AND MICHAEL WHITE AND MARIE MCCAUGHAN				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1755 CHADWICK ROAD				Company NAIC Number:	
City ENGLEWOOD		State Florida		ZIP Code 34223	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) PORTION OF LOT 1006 ENGLEWOOD GARDENS UNIT 5					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>27.000350°</u> Long. <u>-82.234159°</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> 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 <u>1B</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>0</u>					
c) Total net area of flood openings in A8.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>506.00</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>3</u>					
c) Total net area of flood openings in A9.b <u>750.00</u> sq in					
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number SARASOTA COUNTY 125144			B2. County Name SARASOTA		B3. State Florida
B4. Map/Panel Number 12115C 0344	B5. Suffix F	B6. FIRM Index Date 11-04-2016	B7. FIRM Panel Effective/ Revised Date 11-04-2016	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 11'
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

**ELEVATION CERTIFICATE**

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 1755 CHADWICK ROAD			Policy Number:
City ENGLEWOOD	State Florida	ZIP Code 34223	Company NAIC Number

**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: #Z 734, EL=13.63 Vertical Datum: NAVD 1988

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)   | 13.2 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | N/A  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)   | N/A  | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  | 11.5 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | 12.1 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | 11.1 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | 12.3 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | 11.5 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> 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 R.J. STRICKLAND, JR.	License Number 6144/FLORIDA	<div style="font-size: 2em; font-weight: bold;">9-29-21</div> <div style="font-size: 1.5em; font-weight: bold;">Place Seal Here</div>
Title PSM		
Company Name ALL SERVICE LAND SURVEYING, INC.		
Address 17840 TOLEDO BLADE BLVD SUITE B		
City PORT CHARLOTTE	State Florida	ZIP Code 33948
Signature 	Date 09-29-2021	Telephone (941) 629-6801

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)

C2e. IS AIR CONDITIONER 12.1. MAIN HOUSE

B9-ENGINEERED OPENINGS-SMART PRODUCT INNOVATIONS, INC., MODEL NAME FREEDOM FLOOD VENT, MODEL NUMBER FFV-1608, ICC-ES REPORT # ESR-4332 CBC AND CRC SUPPLEMENT RATED 250 SQ IN PER UNIT.

**ELEVATION CERTIFICATE**

OMB No. 1660-0008  
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**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 lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

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

Address	City	State	ZIP Code
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Signature	Date	Telephone
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Comments

Check here if attachments.

# BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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

## ELEVATION CERTIFICATE

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City ENGLEWOOD	State Florida	ZIP Code 34223	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

Photo One Caption FRONT VIEW 08-05-2021

Clear Photo One



Photo Two

Photo Two Caption LEFT VIEW 08-05-2021

Clear Photo Two

# BUILDING PHOTOGRAPHS

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

## ELEVATION CERTIFICATE

Continuation Page

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
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City ENGLEWOOD	State Florida	ZIP Code 34223	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

Photo Three Caption REAR VIEW 08-05-2021

Clear Photo Three



Photo Four

Photo Four Caption RIGHT VIEW 08-05-2021

Clear Photo Four

# BUILDING PHOTOGRAPHS

## ELEVATION CERTIFICATE

See Instructions for Item A6.

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

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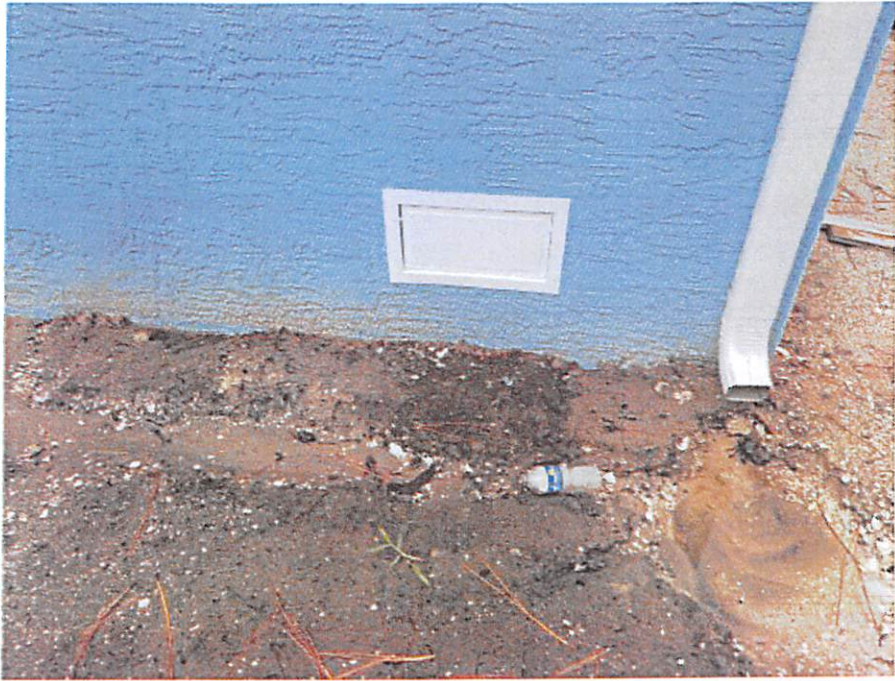


Photo One

Photo One Caption VENTS 08-05-2021

Clear Photo One

Photo Two

Photo Two Caption

Clear Photo Two

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

7.2 The report holder's contact information is the following:

**6.0 EVIDENCE SUBMITTED**

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

**SMART PRODUCT INNOVATIONS, INC.**  
 430 ANDBRO DRIVE, UNIT 1  
 PITMAN, NEW JERSEY 08071  
 (800) 507-1527  
[www.freedomfloodvent.com](http://www.freedomfloodvent.com)  
[info@freedomfloodvent.com](mailto:info@freedomfloodvent.com)

**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.).

TABLE 1—FREEDOM FLOOD VENT™

MODEL NAME	MODEL NUMBER	MODEL SIZE	COVERAGE (sq. ft.)
Freedom Flood Vent™	FFV-1608	15 <sup>3</sup> / <sub>4</sub> " X 8 <sup>1</sup> / <sub>16</sub> "	250

For SI: 1 inch = 25.4 mm

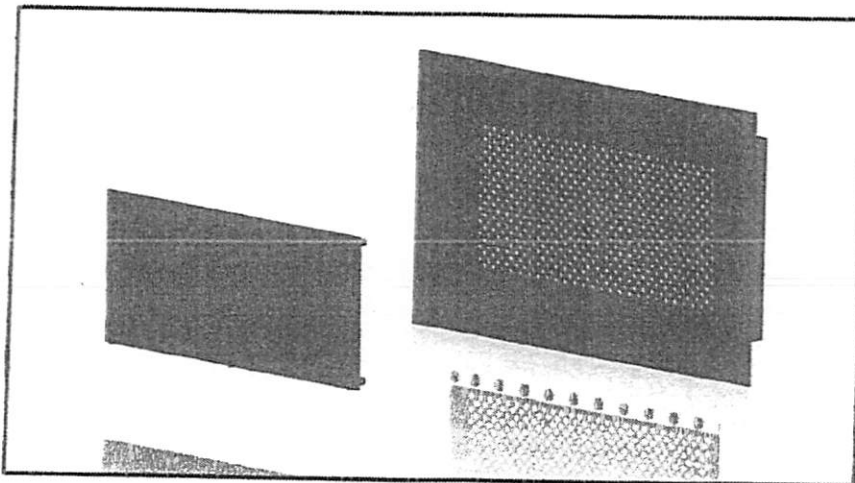


FIGURE 1—MODEL FFV-1608 FREEDOM FLOOD VENT™: SHOWN WITH COVER REMOVED

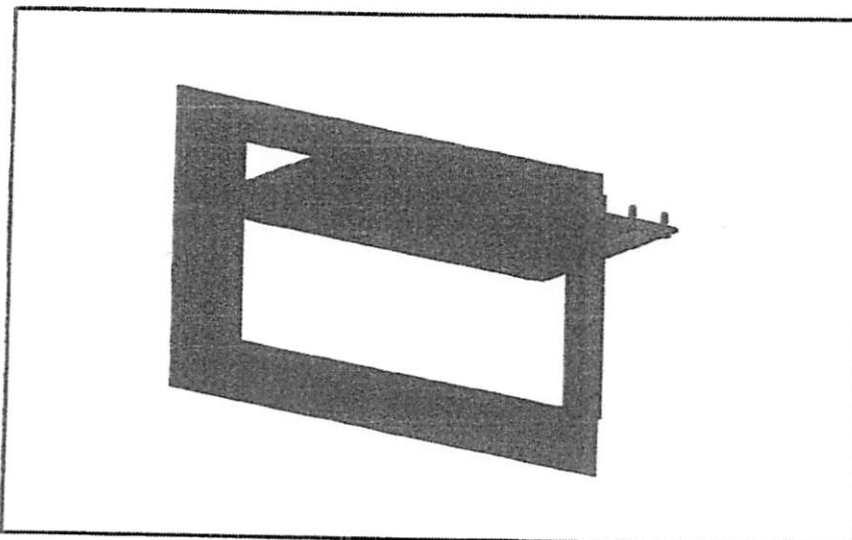


FIGURE 2—MODEL FFV-1608 FREEDOM FLOOD VENT™: SHOWN WITH FLOOD DOOR PIVOTED OPEN





## ICC-ES Evaluation Report

## ESR-4332 FBC Supplement

Reissued March 2020

This report is subject to renewal March 2022.

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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 VENT™ AUTOMATIC FOUNDATION FLOOD VENT: MODEL FFV-1608

### 1.0 REPORT PURPOSE AND SCOPE

#### Purpose:

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 the codes noted below.

#### Applicable code editions:

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

### 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, complies 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 noted in the master report.

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 Code—Residential*.

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 the Commission).

This supplement expires concurrently with the evaluation report, reissued March 2020.

ICC-ES Evaluation Reports are not to be construed as representing aesthetics or any other attributes not specifically addressed, nor are they to be construed as an endorsement of the subject of the report or a recommendation for its use. There is no warranty by ICC Evaluation Service, LLC, express or implied, as to any finding or other matter in this report, or as to any product covered by the report.

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## ICC-ES Evaluation Report

## ESR-4332 CBC and CRC Supplement

Reissued March 2020

This report is subject to renewal March 2022.

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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 VENT™ AUTOMATIC FOUNDATION FLOOD VENT: MODEL FFV-1608

### 1.0 REPORT PURPOSE AND SCOPE

#### Purpose:

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 with codes noted below.

#### Applicable code edition(s):

- 2016 California Building Code (CBC)
- 2016 California Residential Code (CRC)

### 2.0 CONCLUSIONS

#### 2.1 CBC:

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, complies 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 Wildland-Urban Interface Fire Area.

#### 2.2 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, complies 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 Wildland-Urban Interface Code*®.

This supplement expires concurrently with the evaluation report, reissued March 2020.

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