

DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
**ELEVATION CERTIFICATE**

**IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16**

OMB Control Number: 1660-0008  
Expiration: 11/30/2018

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				FORM INSURANCE COMPANY USE		
A1. Building Owner's Name GINO M. MASCARI				Policy Number:		
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 699 SPRUCE STREET - DETACHED GARAGE				Company NAIC Number:		
City ENGLEWOOD		State FL		Zip Code 34223		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) SOUTH 1/2 OF LOTS 11 & 12, BLOCK C, BAYVIEW MANOR						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)NON-RESIDENTIAL						
A5. Latitude/Longitude: Lat. <u>26.95001°</u> Long. <u>-82.35189°</u> Horizontal Datum: <input checked="" type="radio"/> NAD 1927 <input type="radio"/> 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 1B _____						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft			A9. For a building with an attached garage: a)			
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>			Square footage of attached garage <u>N/A</u> sq ft			
c) Total net area of flood openings in A8.b <u>N/A</u> sq in			b) Number of permanent flood openings in the attached garage within 1.0 foot 4 above adjacent grade _____			
d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No			c) Total net area of flood openings in A9.b <u>800</u> sq in			
			d) Engineered flood openings? <input checked="" type="radio"/> Yes <input type="radio"/> No			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number SARASOTA COUNTY - 125144				B2. County Name SARASOTA		B3. State FL
B4. Map/Panel Number 125144-0453	B5. Suffix E	B6. FIRM Index Date Sep 3, 1992	B7. FIRM Panel Effective/ Revised Date Sep 3, 1992	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="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA						
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)						
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> Finished Construction						
C2. Elevations - Zones A1 - A30, AE, AH, A (with BFE), VE, V1 - V30, V (with BFE), AR, AR/A, AR/AE, AR/A1 - A30, ARIA/H, AR/AO. Complete Items C2.a -h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. * A new Elevation Certificate will be required when construction of the building is complete.						
Benchmark Utilized: <u>DOT. DOT BM#2 EL: 3.233'</u> Vertical Datum: <u>NGVD 1929</u>						
Indicate elevation datum used for the elevations in items a) through h) below. <input checked="" type="radio"/> NGVD 1929 <input type="radio"/> NAVD 1988 <input type="radio"/> 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)	<u>10</u>	-	<u>6</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
b) Top of the next higher floor	<u>N/A</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
d) Attached garage (top of slab)	<u>N/A</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>N/A</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
f) Lowest adjacent (finished) grade next to building (LAG)	<u>10</u>	-	<u>1</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
g) Highest adjacent (finished) grade next to building (HAG)	<u>10</u>	-	<u>2</u>	<input checked="" type="radio"/> feet	<input type="radio"/> meters	
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u>	-	_____	<input checked="" type="radio"/> feet	<input type="radio"/> meters	

# ELEVATION CERTIFICATE

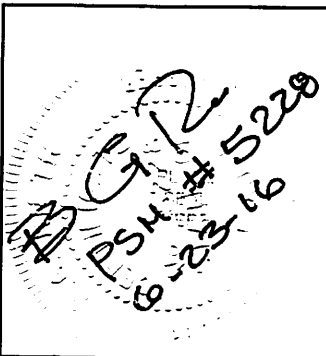
OMB Control Number: 1660-0008  
Expiration: 11/30/2018  
34223

699 SPRUCE STREET - DETACHED GARAGE      ENGLEWOOD      FL

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if attachments.      Were latitude and longitude in Section A provided by a licensed land surveyor?  
 Yes     No



Certifier's Name B. GREGORY RIETH		License Number 5228	
Title PSM / CFM	Company Name STRAYER SURVEYING & MAPPING, INC.		
Address 742 SHAMROCK BLVD	City VENICE	State FL	Zip Code 34293
Signature <i>B G Rieth</i>	Date Jun 21, 2016	Telephone +1 (941) 497-1290	

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)\*  
 FILE # 15-07-40. DETACHED GARAGE. SECTION A5 WAS DERIVED FROM A HAND HELD G.P.S. UNIT (GPSTEST APP - NO CONVERSION). (4) SMART VENT MODEL #1540-520 HAVE BEEN INSTALLED. CERTIFICATE VALID ONLY WITH RAISED SEAL & SIGNATURE.

Signature *B G Rieth*      Date Jun 21, 2016

## 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 8 -9 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

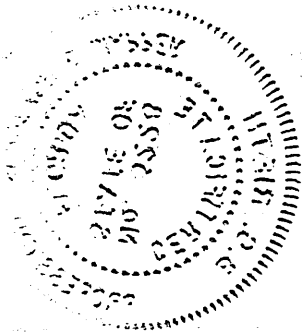
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name: \_\_\_\_\_

Address	City	State	ZIP Code
Signature	Date	Telephone	

Comments

Check here if attachments.





### BUILDING PHOTOGRAPHS

See instructions for Item A6

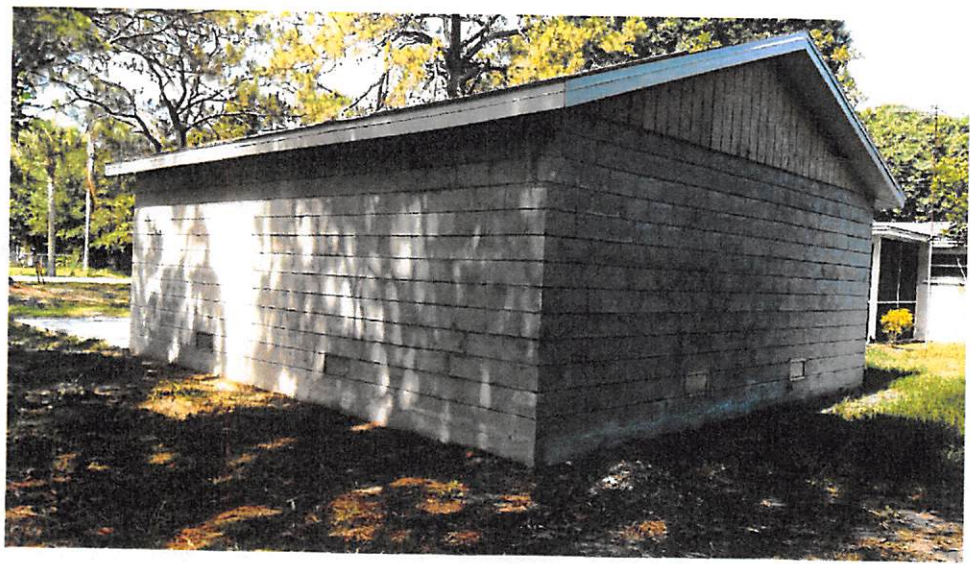
OMB Control Number: 1660-0008  
Expiration: 11/30/2018

<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. 699 SPRUCE STREET - DETACHED GARAGE		Policy Number:	
City ENGLEWOOD	State FL	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.



FRONT VIEW 6/21/16



REAR VIEW 6/21/16



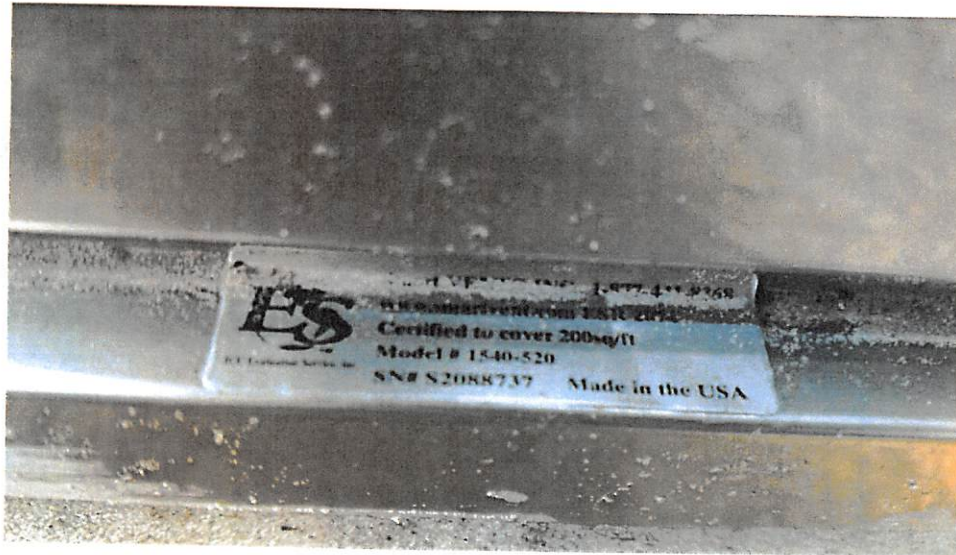
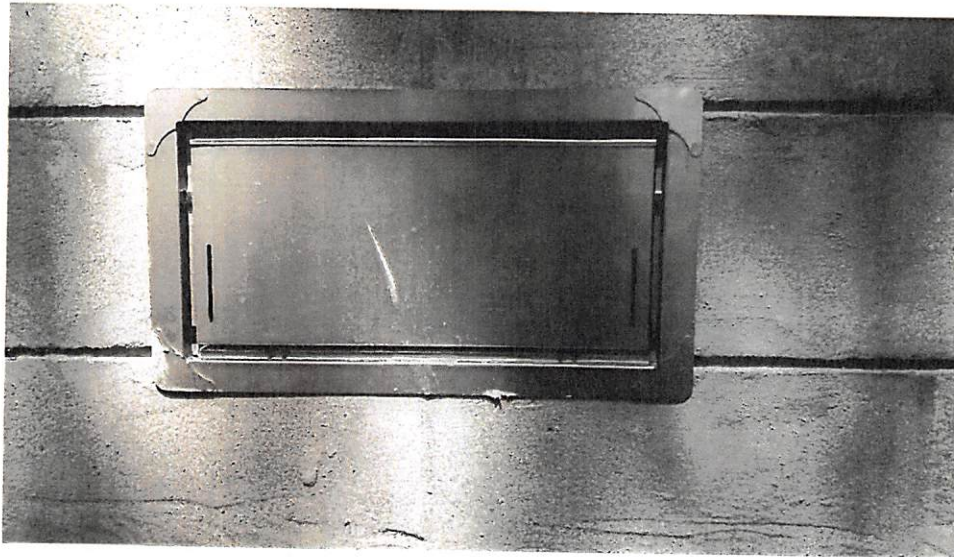
# BUILDING PHOTOGRAPHS

Continuation Page

OMB Control Number: 1660-0008  
Expiration: 11/30/2018

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FORM INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>699 SPRUCE STREET - DETACHED GARAGE</b>			Policy Number:
City <b>ENGLEWOOD</b>	State <b>FL</b>	Zip Code <b>34223</b>	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.



VENTS 6/21/16

**ICC-ES Evaluation Report**
**ESR-2074**
*Reissued February 2015*
*This report is subject to renewal February 2017.*
**www.icc-es.org | (800) 423-6587 | (562) 699-0543**
*A Subsidiary of the International Code Council®*
**DIVISION: 08 00 00—OPENINGS  
Section: 08 95 43—Vents/Foundation Flood Vents**
**REPORT HOLDER:**
**SMARTVENT PRODUCTS, INC.  
430 ANDBRO DRIVE, UNIT 1  
PITMAN, NEW JERSEY 08071  
(877) 441-8368  
[www.smartvent.com](http://www.smartvent.com)  
[info@smartvent.com](mailto:info@smartvent.com)**
**EVALUATION SUBJECT:**
**SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS:  
FLOODVENT™ MODEL #1540-520; FLOODVENT™  
STACKING MODEL #1540-521; SMARTVENT™ MODEL  
#1540-510; SMARTVENT™ STACKING MODEL #1540-511;  
WOOD WALL FLOOD MODEL #1540-570; WOOD WALL  
FLOOD OVERHEAD DOOR MODEL #1540-574;  
FLOODVENT™ OVERHEAD DOOR MODEL #1540-524;  
SMARTVENT™ OVERHEAD DOOR MODEL #1540-514**
**1.0 EVALUATION SCOPE**
**Compliance with the following codes:**

- 2009 and 2006 *International Building Code*® (IBC)
- 2009 and 2006 *International Residential Code*® (IRC)
- 2013 *Abu Dhabi International Building Code* (ADIBC)<sup>†</sup>

<sup>†</sup>The ADIBC is based on the 2009 IBC. 2009 IBC code sections referenced in this report are the same sections in the ADIBC.

**Properties evaluated:**

- Physical operation
- Water flow

**2.0 USES**

The Smart Vent® units are automatic foundation flood vents (AFFVs) employed to equalize hydrostatic pressure on nonfire-resistance-rated foundation walls, rolling-type overhead doors and building walls subject to rising or falling flood waters. The Smart Vent® units are intended for use where flood hazard areas have been established in accordance with IBC Section 1612.3 or IRC Section R3222.1. Certain models also allow natural ventilation in accordance with Section 1203 of the IBC or Section 408.1 of the IRC.

**3.0 DESCRIPTION**
**3.1 General:**

When subjected to pressure from rising water, the Smart

Vent® AFFVs disengage, 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 AFFV 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 plate to rotate out of the way and allow flow. The water level stabilizes, equalizing the lateral forces. Each unit is fabricated from stainless steel. The SmartVENT™ Stacking Model #1540-511 and FloodVENT™ Stacking Model #1540-521 units each contain two vertically arranged openings per unit.

**3.2 Engineered Opening:**

The AFFVs comply with the design principle noted in Section 2.6.2.2 of ASCE/SEI 24 for a 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, Smart Vent AFFVs must be installed in accordance with Section 4.0.

**3.3 Model Sizes:**

The FloodVENT™ Model #1540-520, SmartVENT™ Model #1540-510, FloodVENT™ Overhead Door Model #1540-524, and SmartVENT™ Overhead Door Model #1540-514 units measure 15<sup>3</sup>/<sub>4</sub> inches wide by 7<sup>3</sup>/<sub>4</sub> inches high (400 by 196.9 mm). The Wood Wall Flood Model #1540-570 and Wood Wall Flood Overhead Door Model #1540-574 units measure 14 inches wide by 8<sup>3</sup>/<sub>4</sub> inches high (355.6 by 222.25 mm). The SmartVENT™ Stacking Model #1540-511 and FloodVENT™ Stacking Model #1540-521 units measure 16 inches wide by 16 inches high (406.4 by 406.4 mm).

**3.4 Ventilation:**

The SmartVENT® Model #1540-510 and SmartVENT® 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 mm<sup>2</sup>) 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 (65 806 mm<sup>2</sup>) of net free area to supply natural ventilation. Other AFFVs recognized in this report do not offer natural ventilation.

**4.0 INSTALLATION**

SmartVENT® and FloodVENT™ are designed to be installed into walls or overhead doors of existing or new construction from the exterior side. Installation of the vents must be in accordance with the manufacturer's instructions, the applicable code and this report. The

mounting straps allow mounting in wood, masonry and concrete walls up to 12 inches (305 mm) thick. In order to comply with the engineered opening design principle noted in Section 2.6.2.2 of ASCE/SEI 24, the Smart Vent® AFFVs must be installed as follows:

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one AFFV for every 200 square feet (18.6 m<sup>2</sup>) of enclosed area, except that the SmartVENT™ Stacking Model #1540-511 and FloodVENT™ Stacking Model #1540-521 must be installed with a minimum of one AFFV for every 400 square feet (37.2 m<sup>2</sup>) of enclosed area.
- Below the base flood elevation.
- With the bottom of the AFFV located a maximum of 12 inches (305.4 mm) above grade.

#### 5.0 CONDITIONS OF USE

The Smart Vent® AFFVs 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® AFFVs 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® AFFVs 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 Automatic Foundation Flood Vents (AC364), dated October 2013 (editorially revised May 2014).

#### 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).