U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2022

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 | | | | | ANCE COMPANY USE |
|---|---------------------------------|-------------------------------------|----------------------|----------------------------------|------------------------------------|
| A1. Building Owner's Name MHC WOS EXP LLC | | | | | per; |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 324 CASITA DRIVE Company NAIC Number: | | | | | |
| City | | State | | ZIP Code | |
| Sarasota | | Florida | | 34234 | |
| A3. Property Description (Lot a Lot 18 - Portion of Parcel ID 00) | · | rcel Number, Leg | al Description, etc. |) | |
| A4. Building Use (e.g., Resider | ntial, Non-Residential, Additi | ion, Accessory, e | tc.) RESIDENT | TAL | |
| A5. Latitude/Longitude: Lat. 2 | 7°21'41.16"N Long | _{l.} 82°30'28.89 "W | Horizontal | Datum: NAD 1 | 927 🔀 NAD 1983 |
| A6. Attach at least 2 photograp | ohs of the building if the Cert | tificate is being u | sed to obtain flood | insurance. | |
| A7. Building Diagram Number | 8 | | | | |
| A8. For a building with a crawls | space or enclosure(s): | | | | |
| a) Square footage of craw | | 1 | 345.00 sq.ft | | |
| b) Number of permanent flo | ood openings in the crawlsp | ace or enclosure | (s) within 1.0 foot | above adjacent gra | nde 18 |
| c) Total net area of flood o | penings in A8.b | 1746.00 sq in | | | |
| d) Engineered flood opening | ngs? 🗵 Yes 🗌 No | | | | |
| A9. For a building with an attack | hed garage: | | | | |
| a) Square footage of attack | hed garage | 485.00 sq ft | | | ! |
| b) Number of permanent flo | ood openings in the attache | d garage within | I.0 foot above adja | cent grade 5 | |
| c) Total net area of flood o | penings in A9.b | 485.00 sq | in | | |
| d) Engineered flood openir | ngs? 🗵 Yes 🗌 No | | | | |
| Single Single | ECTION B - FLOOD INSU | RANCE RATE | MAP (FIRM) INFO | DRMATION | |
| B1. NFIP Community Name & Community Number SARASOTA COUNTY UNINCORPORATED 125144 B2. County Name B3. State SARASOTA Florida | | | | | |
| B4. Map/Panel B5. Suffix Number | Date | FIRM Panel Effective/ | B8. Flood Zone(s) | B9. Base Flood E (Zone AO, us | levation(s) e Base Flood Depth) |
| 12115C0132 F | | Revised Date 04-2016 | AE | 30.5 | |
| | | | | | |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: [FIS Profile FIRM Community Determined Other/Source: | | | | | |
| B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source: | | | | | |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No | | | | | |
| Designation Date: CBRS DPA | | | | | |
| | | | | | |

ELEVATION CERTIFICATE

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| IMPORTANT: In these spaces, copy the corresponding information from Section A. | | | | | FOR INSURANCE COMPANY USE | |
|---|---|--|---|-----------|---------------------------|-------------------------------------|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 324 CASITA DRIVE: | | | | | Policy Number: | |
| City Saras | _ | | ZIP Code 34234 | Compa | ny NAI C N | lumber |
| | SECTION C - BUILDING E | LEVATION INFORM | MATION (SURVEY R | EQUIRE | D) | |
| | Building elevations are based on: Construct A new Elevation Certificate will be required when | • - | Building Under Construitling is complete. | ection* | ⊠ Finish | ed Construction |
| | Elevations – Zones A1–A30, AE, AH, A (with BFE Complete Items C2.a–h below according to the bit Benchmark Utilized: NGS BM D729 PID=DM5116 | uilding diagram specifi | | to Rico d | | |
| | Indicate elevation datum used for the elevations in | n items a) through h) b | pelow. | | | |
| | ☐ NGVD 1929 [X] NAVD 1988 ☐ Othe | r/Source: | | | | |
| | Datum used for building elevations must be the sa | | ne BFE. | | | |
| | | | | | | asurement used. |
| * | Top of bottom floor (including basement, crawled) | ispace, or enclosure fl | oor) | 34.2 | ★ feet | ☐ meters |
| | b) Top of the next higher floor | | | 37.5 | ⊠ feet | meters |
| | c) Bottom of the lowest horizontal structural mem | ber (V Zones only) | | N/A | ☐ feet | meters |
| | d) Attached garage (top of slab) | , | | 34.2 | ★ feet | meters |
| | e) Lowest elevation of machinery or equipment s (Describe type of equipment and location in Co | | | 36.0 | | meters |
| | f) Lowest adjacent (finished) grade next to buildi | ng (LAG) | | 34.0 | | meters |
| | g) Highest adjacent (finished) grade next to build | | | 34.8 | | meters |
| | b) Lowest adjacent grade at lowest elevation of c structural support | | g | 34.0 | ✓ feet | ☐ meters |
| | SECTION D - SURVEYO | P ENGINEED OF | ADCHITECT CERTIE | ICATIO | <u></u> | |
| I cei | certification is to be signed and sealed by a land stify that the information on this Certificate representation and the punishable by fine or imprisonment | surveyor, engineer, or nts my best efforts to | architect authorized by | y law to | certify elev | ation information. hat any false |
| | e latitude and longitude in Section A provided by a | | | X | Check her | e if attachments. |
| | ifier's Name | License Number | | | | \$ 2 |
| | SELL STRAYER | LS 6890 | | | | Maria, 4 sa |
| Title ASS | OCIATE, SENIOR PROJECT MANAGER | | | | 5 | 369 |
| | pany Name | | | | | 0.000 m - 30 |
| | VBERRY ENGINEERS INC | | | | | 68 |
| Add 220 | ress I CANTU COURT, SUITE 107 | | | 11111 | | |
| City | ASOTA | State Florida | ZIP Code 34232 | ,, | | 1.669 |
| Sign | ature 1 | Date 01-26-2023 | Telephone (941) 702-9671 | Ext. | | |
| Copy | all pages of this Elevation Certificate and all attach | ments for (1) communi | ty official, (2) insurance | agent/co | ompany, an | d (3) building owner. |
| JOB LOC 1CC | ments (including type of equipment and location, #50160529. THE BOTTOM BEAM ELEVATION I ATED ON THE WEST SIDE OF BUILDING. OPE -ES REPORT NO ESR-3760. RATED AT 97 SQ I E AND 4 OPENINGS IN REAR. | S 35.7'. THE LOWES NINGS MANUFACTU | T MACHINERY USED IRED BY FLOOD SOL | UTIONS | LLC MOD | EL #FS-1608. |
| | | | | | | |

ELEVATION CERTIFICATE

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

| IMPORTANT: In these spaces, copy the corresponding | FOR INSURANCE COMPANY USE | | |
|--|---------------------------|---------------------|------------------------------------|
| Building Street Address (including Apt., Unit, Suite, and/or 324 CASITA DRIVE | Policy Number: | | |
| City Stat | te ZIP | Code | Company NAIC Number |
| | rida 342: | | About Artis |
| | | | PEOI IIPED/ |
| SECTION E – BUILDING ELEV FOR ZONE A | O AND ZONE A (WIT | | NEGUINEU) |
| For Zones AO and A (without BFE), complete Items E1-E complete Sections A, B, and C. For Items E1-E4, use naturenter meters. | | | |
| E1. Provide elevation information for the following and che the highest adjacent grade (HAG) and the lowest adjacent grade (HAG) and grade (HAG) a | | xes to show whethe | r the elevation is above or below |
| a) Top of bottom floor (including basement, crawlspace, or enclosure) is | | feet meter | rs above or below the HAG. |
| b) Top of bottom floor (including basement, crawlspace, or enclosure) is | | feet meter | rs above or below the LAG. |
| E2. For Building Diagrams 6–9 with permanent flood oper the next higher floor (elevation C2.b in | nings provided in Section | on A Items 8 and/or | 9 (see pages 1–2 of Instructions), |
| the diagrams) of the building is | | ☐ feet ☐ meter | rs above or below the HAG. |
| E3. Attached garage (top of slab) is | | ☐ feet ☐ meter | rs above or below the HAG. |
| E4. Top of platform of machinery and/or equipment servicing the building is | | ☐ feet ☐ meter | rs above or below the HAG |
| E5. Zone AO only: If no flood depth number is available, i floodplain management ordinance? Yes N | | | |
| SECTION F - PROPERTY OWNE | R (OR OWNER'S REP | RESENTATIVE) CL | ERTIFICATION |
| The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The | statements in Sections | | |
| Property Owner or Owner's Authorized Representative's N | Name | | |
| Address | City | St | ate ZIP Code |
| Signature | Date | T€ | elephone |
| Comments | | | |
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| | | | Check here if attachments. |

ELEVATION CERTIFICATE

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

| IMPORTANT: in these spaces, copy the corre | FOR INSURANCE COMPANY USE | | | | |
|--|--------------------------------|---|--|--|--|
| Building Street Address (including Apt., Unit, St 324 CASITA DRIVE | Policy Number; | | | | |
| City | State | ZIP Code | Company NAIC Number | | |
| Sarasota | Florida | 34234 | | | |
| SECTIO | ON G - COMMUNITY INFOR | MATION (OPTIONAL) | | | |
| The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en | Certificate. Complete the app | nmunity's floodplain ma blicable item(s) and sig | magement ordinance can complete n below. Check the measurement | | |
| G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.) | | | | | |
| G2. A community official completed Section Zone AO. | on E for a building located in | Zone A (without a FEM | A-issued or community-issued BFE) | | |
| G3. The following information (Items G4- | G10) is provided for commun | ity floodplain managen | nent purposes, | | |
| G4. Permit Number | G5. Date Permit Issued | G6. | Date Certificate of Compliance/Occupancy Issued | | |
| G7. This permit has been issued for: | New Construction Subs | tantial Improvement | | | |
| G8. Elevation of as-built lowest floor (including of the building: | g basement) | fee | t meters Datum | | |
| G9. BFE or (in Zone AO) depth of flooding at | the building site: | fee | t 🗌 meters Datum | | |
| G10. Community's design flood elevation: | | fee | t meters Datum | | |
| Local Official's Name | Title | | | | |
| Community Name | Tele | phone | *** | | |
| Signature | Date | • | | | |
| Comments (including type of equipment and location, per C2(e), if applicable) | | | | | |
| | | | | | |
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| × | | | | | |
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| | | | ☐ Check here if attachments. | | |

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

| IMPORTANT: In these spaces, copy the | FOR INSURANCE COMPANY USE | | |
|---|---------------------------|----------|---------------------|
| Building Street Address (including Apt., Un 324 CASITA DRIVE | Policy Number: | | |
| City | State | ZIP Code | Company NAIC Number |
| Sarasota | Florida | 34234 | |

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.

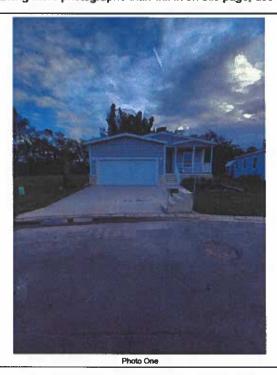


Photo One Caption FRONT VIEW

Clear Photo One



Photo Two

Photo Two Caption LEFT VIEW

Clear Photo Two Form Page 5 of 6

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

| (MPORTANT: In these spaces, copy | FOR INSURANCE COMPANY USE | | |
|--|---------------------------|----------|---------------------|
| Building Street Address (including Ap 324 CASITA DRIVE | Policy Number: | | |
| City | State | ZIP Code | Company NAIC Number |
| Sarasota | Florida | 34234 | |

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 REAR VIEW

Clear Photo Three



Photo Four

Photo Four Caption RIGHT VIEW

Clear Photo Four







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ICC-ES Evaluation Report ESR-3760

DIVISION: 08 00 00-OPENINGS

Section: 08 95 43—Vents/Foundation Flood Vents

REPORT HOLDER:

FLOOD SOLUTIONS, LLC

EVALUATION SUBJECT:

STATIC FLOOD VENTS

1.0 EVALUATION SCOPE

Compliance with the following codes:

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

Property evaluated:

Water flow

2.0 USES

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

3.0 DESCRIPTION

3.1 General:

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

3.2 Engineered Opening:

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

3.3 Ventilation:

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

4.0 DESIGN AND INSTALLATION

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

Reissued March 2022

This report is subject to renewal March 2024.

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

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

5.0 CONDITIONS OF USE

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

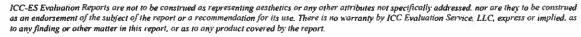
- 5.1 The static flood vents must be installed in accordance with this report, the applicable code and the manufacturer's installation instructions. In the event of a conflict, the instructions in this report govern.
- 5.2 The static flood vents must not be used in the place of "breakaway walls" in coastal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

6.0 EVIDENCE SUBMITTED

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

7.0 IDENTIFICATION

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





7.2 The holder's contact information is the following:

FLOOD SOLUTIONS, LLC
ONE INDUSTRIAL PARK DRIVE
UNIT 26
PELHAM, NEW HAMPSHIRE 03076
(603) 595-5222

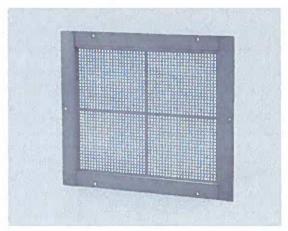
www.floodsolutions.com info@floodsolutions.com

TABLE 1—FLOOD SOLUTIONS STATIC FLOOD VENTS

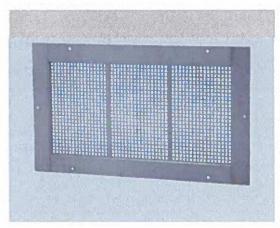
| MODEL | VENT SIZE (Width x Height) (in) | ROUGH OPENING SIZE (Width x Height) (in) | ENCLOSED AREA COVERAGE (ft²) | NET FREE AREA¹ (in²) |
|-------------|---|---|------------------------------------|-------------------------|
| FS-1608 | 18 ¹ / ₂ x 10 ¹ / ₂ | 16 x 8 | 97 | 80.7 |
| FS-1616 | 18 ¹ / ₂ x 18 ¹ / ₂ | 16 x 16 | 191 | = 158.2 |
| FS-1412 | 17 x 14 ¹ / ₂ | 141/2 x 12 | 129 | 106.7 |
| FS-1608-Hex | 18 ¹ / ₂ x 10 ¹ / ₂ | 16 x 8 | 110 | 91.4 |

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

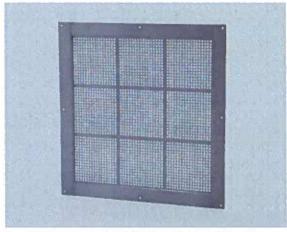
¹Available for use as under-floor ventilation.



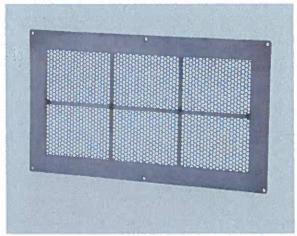
FS-1412



FS-1608



FS-1616



FS-1608-HEX

FIGURE 1—FLOOD SOLUTIONS STATIC FLOOD VENTS



ICC-ES Evaluation Report

ESR-3760 FBC Supplement

Reissued March 2022

This report is subject to renewal March 2024.

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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:

FLOOD SOLUTIONS, LLC

EVALUATION SUBJECT:

STATIC FLOOD VENTS

1.0 REPORT PURPOSE AND SCOPE

Purpose:

The purpose of this evaluation report supplement is to indicate that Flood Solutions' flood vents, described in ICC-ES evaluation report ESR-3760, have also been evaluated for compliance with the codes noted below.

Applicable code editions:

- 2020 Florida Building Code—Building
- 2020 Florida Building Code—Residential

2.0 CONCLUSIONS

The Flood Solutions flood vents, described in Sections 2.0 through 7.0 of ICC-ES evaluation report <u>ESR-3760</u>, comply with the *Florida Building Code—Building Code—Residential*, provided the design requirements are determined in accordance with the *Florida Building Code—Building* or the *Florida Building Code—Residential*, as applicable. The installation requirements noted in ICC-ES evaluation report ESR-3760 for the 2018 *International Building Code—Building* or the *Florida Building Code—Residential*, as applicable.

Use of the Flood Solutions' flood vents 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 61G20-3, 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 2022.

