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 1-9.

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

SECTIO	ON A - PROPERTY IN	NFOR	MATION		FOR INSUR	RANCE COMPANY USE
A1. Building Owner's Name					Policy Num	ber:
ROBERT T ALLEGRA REVOCAB						
A2. Building Street Address (inclu Box No. 520 GIVENS STREET	iding Apt., Unit, Suite,	and/o	r Bldg. No.) or P.O.	Route and	Company N	IAIC Number:
City			State		ZIP Code	
SARASOTA			Florida		34242	· · · · · · · · · · · · · · · · · · ·
A3. Property Description (Lot and LOT 2 & PT 3, BLOCK 3, HARMO	•		. •	scription, etc.)		
A4. Building Use (e.g., Residentia	al, Non-Residential, Ad	dition	, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longitude: Lat. 27°1	17'00"N Lo	ong. <u>8</u> 2	2°33'36"W	Horizontal Datur	n:	1927 X NAD 1983
A6. Attach at least 2 photographs	of the building if the C	Certific	ate is being used to	o obtain flood insur	ance.	
A7. Building Diagram Number	1B					
A8. For a building with a crawlspa	ice or enclosure(s):					
a) Square footage of crawlsp.	ace or enclosure(s)		0 sq ft			
b) Number of permanent floor	d openings in the craw	vispac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade0
c) Total net area of flood oper	nings in A8.b 0	s	sq in			
d) Engineered flood openings	s? ☐ Yes ☒ No					
A9. For a building with an attached	d garage:					
a) Square footage of attached	d garage1,104	;	sq ft			
b) Number of permanent floor	d openings in the attac	ched ç	garage within 1.0 fo	ot above adjacent ;	grade	6
c) Total net area of flood oper			sq in			
d) Engineered flood openings	i		•			
	, <u> </u>				, .	
	TION B - FLOOD INS	SURA	NCE RATE MAP	(FIRM) INFORMA	TION	<u> </u>
B1. NFIP Community Name & Con SARASOTA 125144	nmunity Number	1	B2. County Name SARASOTA)		B3. State
3ARM3UIM 123144			SARASUIA	·		Florida
B4. Map/Panel B5. Suffix Number	B6. FIRM Index Date	Ef	IRM Panel ffective/ evised Date	B8. Flood Zone(s	´ (Zoı	se Flood Elevation(s) ne AO, use Base od Depth)
125144 0141 D	09/03/1992	05/01/		A12	10	
B10. Indicate the source of the Ba	ase Flood Elevation (B	FE) di	ata or base flood de	epth entered in Item	า B9:	
☐ FIS Profile ☒ FIRM ☐] Community Determin	ned [Other/Source: _			
B11. Indicate elevation datum use	ed for BFE in Item B9:	X N	GVD 1929 NA	\VD 1988 ☐ Ot	her/Source:	·
B12. Is the building located in a C	oastal Barrier Resourc	ces Sy	/stem (CBRS) area	or Otherwise Prote	ected Area (C	OPA)? ☐ Yes ⊠ No
Designation Date:	CF	BRS	☐ OPA			

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding information from Secti	ion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route 520 GIVENS STREET	e and Box No.	Policy Number:
City State ZIP C SARASOTA Florida 34242		Company NAIC Number
SECTION C - BUILDING ELEVATION INFORMATION	ON (SURVEY RI	EQUIRED)
C1. Building elevations are based on: Construction Drawings* Buildi	ing Under Constru	ction* X Finished Construction
*A new Elevation Certificate will be required when construction of the building		
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFI Complete Items C2.a–h below according to the building diagram specified in	Item A7. In Puert	AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters.
Benchmark Utilized: SCBM 80-K Vertical Datum: N		
Indicate elevation datum used for the elevations in items a) through h) below. X NGVD 1929 NAVD 1988 Other/Source:	•	
Datum used for building elevations must be the same as that used for the BF	E.	
a) Tan of batters floor (including becoment emulances or enderly floor)	11, 15	Check the measurement used. X feet meters
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) b) Top of the part bigher floor	22 9	X feet meters
b) Top of the next higher floor	N/A	X feet meters
c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab)	6 37	X feet meters
e) Lowest elevation of machinery or equipment servicing the building	10 82	
(Describe type of equipment and location in Comments)	-	
f) Lowest adjacent (finished) grade next to building (LAG)	6. 2	X feet meters
g) Highest adjacent (finished) grade next to building (HAG)	8.2	X feet meters
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 	<u> </u>	X feet meters
SECTION D – SURVEYOR, ENGINEER, OR ARCI	HITECT CERTIFI	CATION
This certification is to be signed and sealed by a land surveyor, engineer, or archi I certify that the information on this Certificate represents my best efforts to interpo- statement may be punishable by fine or imprisonment under 18 U.S. Code, Section	ret the data availa	law to certify elevation information. ble. I understand that any false
Were latitude and longitude in Section A provided by a licensed land surveyor?	⊠Yes ☐ No	☐ Check here if attachments.
Certifier's Name License Number LAWRENCE R WEBER 3868		2
Title 3000		100
PROFESSIONAL SURVEYOR & MAPPER		- 12h
Company Name WEBER ENGINEERING & SURVEYING, INC.		Race
Address 4596 ASHTON ROAD	W.	Here
	ZIP Code 34233	- St
	Telephone (941) 921-3914	
Copy all pages of this Elevation Certificate and all attachments for (1) community office	cial, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, per C2(e), if applicable) C2.e - A/C C2-h - DECK A9.b - Smart Vent 1540-510	,	

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspond	ding information fro	m Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, an 520 GIVENS STREET	nd/or Bldg. No.) or P.0	O. Route and Box No.	Policy Number:
City SARASOTA	State Florida	ZIP Code 34242	Company NAIC Number
SECTION E – BUILDING EI FOR ZON	LEVATION INFORM IE AO AND ZONE /		REQUIRED)
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.	natural grade, if avail	able. Check the measure	ment used. In Puerto Rico only,
 E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest a) Top of bottom floor (including basement, 	d check the appropria adjacent grade (LAC	ate boxes to show whethe 3).	r the elevation is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement,	·	feet _ meter	s above or below the HAG.
crawlspace, or enclosure) is		feet meter	_
E2. For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in the diagrams) of the building is	openings provided in	Section A Items 8 and/or	
E3. Attached garage (top of slab) is			_ = 9
E4. Top of platform of machinery and/or equipment servicing the building is			rs ☐ above or ☐ below the HAG.
E5. Zone AO only: If no flood depth number is availabed floodplain management ordinance? Yes	ole, is the top of the b	ottom floor elevated in ac . The local official must	cordance with the community's certify this information in Section G.
SECTION F - PROPERTY OW	NER (OR OWNER'S	REPRESENTATIVE) CE	ERTIFICATION
The property owner or owner's authorized representate community-issued BFE) or Zone AO must sign here. T	ive who completes S The statements in Se	ections A, B, and E for Zoctions A, B, and E are cor	ne A (without a FEMA-issued or rect to the best of my knowledge.
Property Owner or Owner's Authorized Representative	e's Name		
Address	City	St	ate ZIP Code
Signature	Dat	e Te	lephone
Comments	7.		
			×
			_
			2
MENTERS IN THE RESERVE OF THE PARTY OF THE P		to the second of the second of	☐ Check here if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corre			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, St. 520 GIVENS STREET			Policy Number:
City SARASOTA	State Florida	ZIP Code 34242	Company NAIC Number
SECTIO	N G - COMMUNITY IN	FORMATION (OPTIONA	AL)
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	e community's floodplain e applicable item(s) and	management ordinance can complete sign below. Check the measurement
G1. The information in Section C was take engineer, or architect who is authorized data in the Comments area below.)	en from other documenta ed by law to certify eleva	ation that has been signation information. (Indicat	ed and sealed by a licensed surveyor, te the source and date of the elevation
G2. A community official completed Section or Zone AO.	on E for a building locate	ed in Zone A (without a F	EMA-issued or community-issued BFE)
G3. The following information (Items G4-	G10) is provided for com	munity floodplain mana	gement purposes.
G4. Permit Number	G5. Date Permit Issue	d G	Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction S	Substantial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	basement)	□	feet meters Datum
G9. BFE or (in Zone AO) depth of flooding at t	he building site:	□	feet meters Datum
G10. Community's design flood elevation:			feet meters Datum
Local Official's Name		Title	
Community Name	a a	Telephone	
Signature		Date	
Comments (including type of equipment and loc	ation, per C2(e), if applic	cable)	
12 Con 12			State Security (ECOSIMATE) The New York State Contact State (1987)
			☐ Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

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.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 520 GIVENS STREET			Policy Number:
City	State	ZIP Code	Company NAIC Number
SARASOTA	Florida	34242	

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.

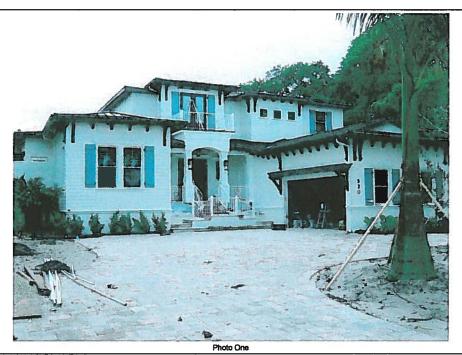


Photo One Caption FRONT VIEW 8/30/16



Photo Two Caption REAR VIEW 8/30/16

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.			FOR INSURANCE COMPANY USE	
Building Street Address (including 520 GIVENS STREET	Policy Number:			
City	State	ZIP Code	Company NAIC Number	
SARASOTA	Florida	34242		

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.

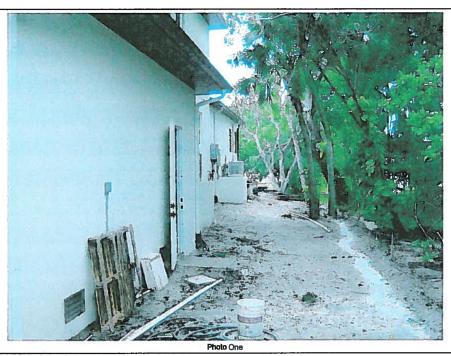


Photo One Caption RIGHT SIDE VIEW 8/30/16

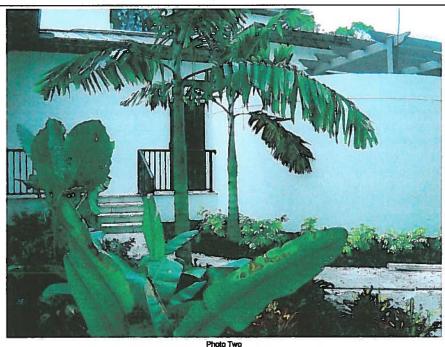


Photo Two Caption LEFT SIDE VIEW 8/30/16

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

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 Bldg. No.) or P.O. Route and Box No. 520 GIVENS STREET			FOR INSURANCE COMPANY USE Policy Number:	
				City
SARASOTA		Florida	34242	

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.

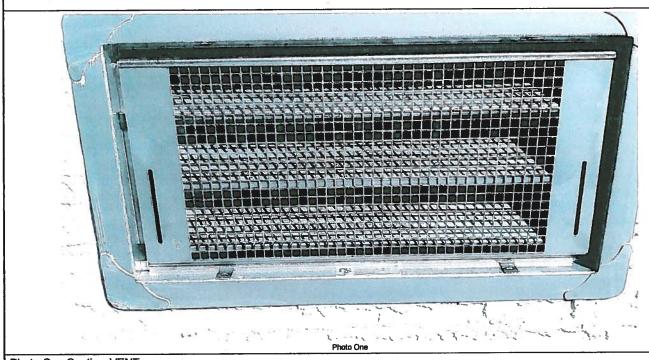


Photo One Caption VENT

Photo Two

Photo Two Caption REAR VIEW



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ESR-2074

Reissued 02/2015 This report is subject to renewal 02/2017.

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

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 2015

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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 info@smartvent.com

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

1.0 EVALUATION SCOPE

Compliance with the following codes:

- 2012, 2009 and 2006 International Building Code® (IBC)
- 2012, 2009 and 2006 International Residential Code® (IRC)
- 2013 Abu Dhabi International Building Code (ADIBC)^T

[†]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 engineered mechanically operated flood vents (FVs) employed to equalize hydrostatic pressure on walls of enclosures subject to rising or falling flood waters. Certain models also allow natural ventilation.

3.0 DESCRIPTION

3.1 General:

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 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.

The water level stabilizes, equalizing the lateral forces. Each unit is fabricated from stainless steel. Smart Vent® Automatic Foundation Flood Vents are available in various models and sizes as described in Table 1. 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 FVs 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 FVs must be installed in accordance with Section 4.0.

3.3 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 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 (65 806 mm²) of net free area to supply natural ventilation. Other FVs recognized in this report do not offer natural ventilation.

4.0 DESIGN AND 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 masonry and concrete walls up to 12 inches (305 mm) thick. In order to comply with the engineered opening design principle noted in Section 2.8.2.2 of ASCE/SEI 24, the Smart Vent® FVs must be installed as follows:

- 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 SmartVENT[®] Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 must be installed with a minimum of one FV for every 400 square feet (37.2 m²) of enclosed area.
- 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

*Revised July 2015

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 eyent 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 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).

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 = m2

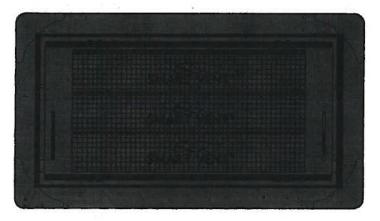


FIGURE 1-SMART VENT: MODEL 1540-510

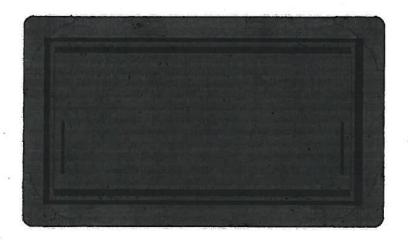


FIGURE 2—SMART VENT MODEL 1540-520

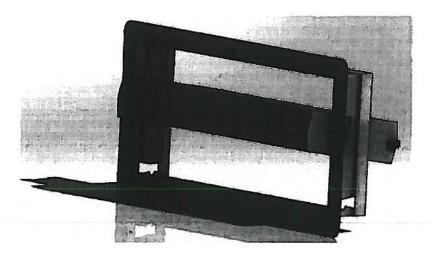


FIGURE 3—SMART VENT: SHOWN WITH FLOOD DOOR PIVOTED OPEN



ICC-ES Evaluation Report

ESR-2074 FBC Supplement*

Reissued February 2015

This report is subject to renewal February 2017.

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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:

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

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

1.0 REPORT PURPOSE AND SCOPE

Purpose:

The purpose of this evaluation report supplement is to indicate that Smart Vent[®] Automatic Foundation Flood Vents, recognized in ICC-ES master report ESR-2074, have also been evaluated for compliance with the codes noted below.

Applicable code editions:

- 2014 Florida Building Code—Building (FBC)
- 2014 Florida Building Code—Residential (FRC)

2.0 CONCLUSIONS

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the master evaluation report ESR-2074, comply with the FBC and the FRC, provided the design and installation are in accordance with the *International Building Code®* provisions noted in the master report.

Use of the Smart Vent[®] Automatic Foundation Flood Vents has also been found to be in compliance with the High-Velocity Hurricane Zone provisions of the FBC and the FRC.

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 master report, reissued February 2015 and revised July 2015.

*Revised July 2015

