

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

C9418-FINAL

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 HAMLIN B. JONES				Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 635 DREAM ISLAND ROAD				Company NAIC Number:	
City TOWN OF LONGBOAT KEY		State Florida		ZIP Code 34228	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PARCEL NUMBER					
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>					
A5. Latitude/Longitude: Lat. <u>27°25'24.4" N</u> Long. <u>082°39'58.2" W</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>6</u>					
A8. For a building with a crawlspace or enclosure(s):					
a) Square footage of crawlspace or enclosure(s) <u>SEE COMMENTS</u> sq ft					
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>SEE COMMENTS</u>					
c) Total net area of flood openings in A8.b _____ sq in (SEE COMMENTS)					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
A9. For a building with an attached garage:					
a) Square footage of attached garage <u>N/A</u> sq ft					
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>					
c) Total net area of flood openings in A9.b <u>N/A</u> sq in					
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number TOWN OF LONGBOAT KEY 125126			B2. County Name MANATEE COUNTY		B3. State Florida
B4. Map/Panel Number 12081C0291	B5. Suffix E	B6. FIRM Index Date 03-17-2014	B7. FIRM Panel Effective/ Revised Date 03-17-2014	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) 10
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: <u>N/A</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

BLDG PERMIT PLANS
 FILE
 Copy of Record

ELEVATION CERTIFICATE

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. 635 DREAM ISLAND ROAD			Policy Number:
City TOWN OF LONGBOAT KEY	State FLORIDA	ZIP Code 34228	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: SEE COMMENTS 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) | <u>4.5</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor | <u>13.2</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only) | <u>N/A</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab) | <u>N/A</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building
(Describe type of equipment and location in Comments) | <u>11.4</u> | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG) | <u>2.2</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG) | <u>9.9</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support | <u>4.5</u> | <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 LEO MILLS, JR	License Number FL 3513
Title REGISTERED SURVEYOR	
Company Name LEO MILLS & ASSOCIATES, INC.	
Address 620 8th AVENUE WEST	
City PALMETTO	State Florida
	ZIP Code 34221
Signature 	Date REVISED 06/07/2018 03/15/2018
	Telephone (941)722-2460



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)

SOURCE BENCHMARK USED: DEPARTMENT OF NATURAL RESOURCES (NOW DEPARTMENT OF ENVIRONMENTAL PROTECTION) BRASS DISK IN CONCRETE WALK STAMPED 13-84-811, ELEVATION = 3.46 N.A.V.D. 1988; SITE BENCH MARK: NORTH RIM OF MANHOLE, IN ROAD, AT SITE - ELEVATION = 3.65 FEET N.A.V.D. 1988.
C2a: ELEVATION IS FOR LOWER LEVEL AREA. C2b: ELEVATION IS FOR MAIN LIVABLE FLOOR.
ENTRY LEVEL FLOOR ELEVATION = 4.7 FEET N.A.V.D. 1988.
SEE ATTACHMENT 1 FOR ADDITIONAL COMMENTS. **REVISED-ADDED RESIDENCE ADDRESS PICTURE**

ELEVATION CERTIFICATE

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. 635 DREAM ISLAND ROAD			Policy Number:	
City TOWN OF LONGBOAT KEY	State FLORIDA	ZIP Code 34228	Company NAIC Number	

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 _____

Signature _____ Date _____ Telephone _____

Comments

Check here if attachments.

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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

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.
635 DREAM ISLAND ROAD

Policy Number:

City TOWN OF LONGBOAT KEY State Florida Zip Code 34228

Company NAIC Number:

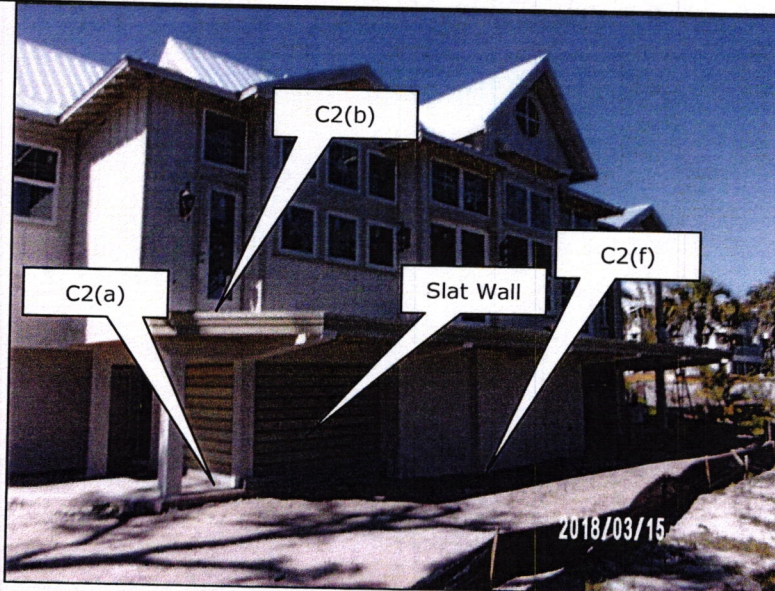
If using the Elevation Certificate to obtain NFIP insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken, "Front View" and "Rear view", and, if required, "Right Side View" and "Left Side View". When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs that will fit on this page, use the Continuation Page. It is the responsibility of the reviewer (Insurance Agents, Building Officials, etc) of this elevation certificate to analyze all of the data given in conjunction with a site visit to determine the proper Building Diagram Number (Item A7). The building diagram number shown in Item A7 is given as determined by the certificate preparer and should not be used for insurance rating or building compliance purposes unless verified by reviewer

PHOTO 1



PHOTO ONE CAPTION: FRONT VIEW

PHOTO 2



Job# C-9418



Leo Mills, Jr.
Date 03/15/2018
P.L.S. 3513

PHOTO TWO CAPTION: REAR VIEW

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB Control Number: 1660-0008

Expiration: 11/30/2018

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Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 635 DREAM ISLAND ROAD		Policy Number:	
City TOWN OF LONGBOAT KEY	State Florida	Zip Code 34228	Company NAIC Number:

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PHOTO 3

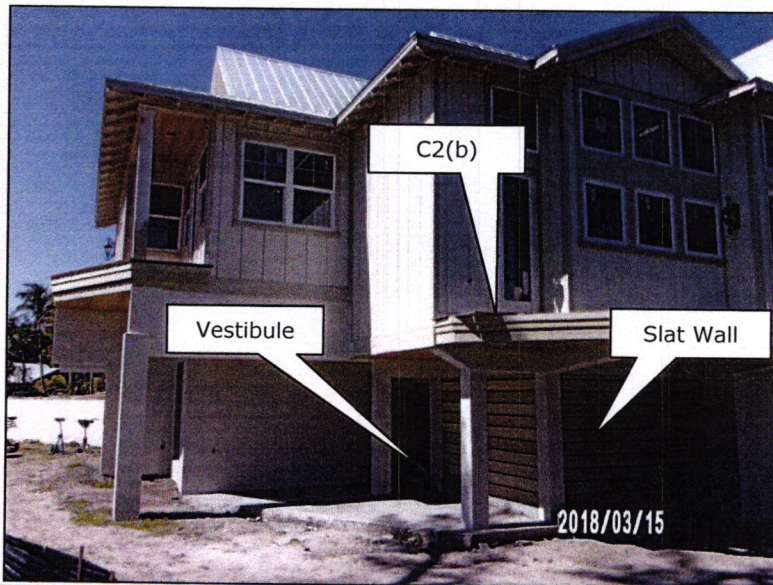
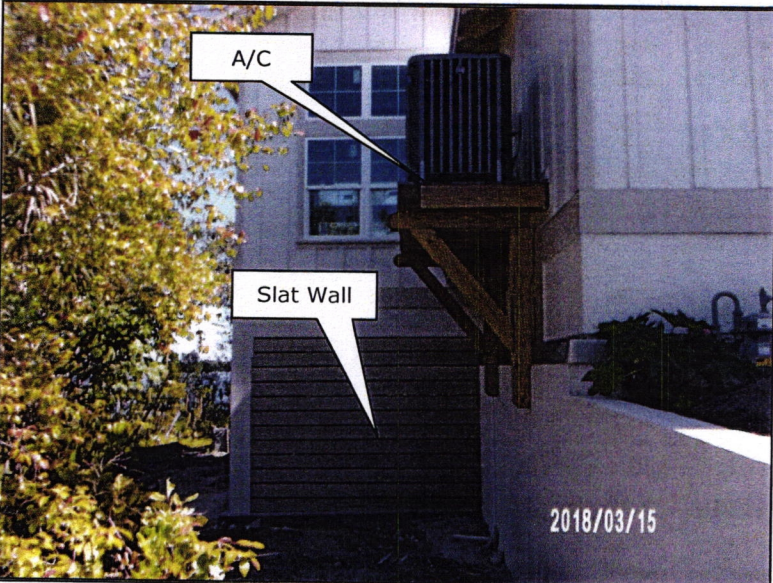


PHOTO THREE CAPTION: RIGHT SIDE FROM REAR VIEW

PHOTO 4



Job# C-9418

LM.
 Leo Mills, Jr.
 Date 03/15/2018
 P.L.S. 3513

PHOTO FOUR CAPTION: LEFT SIDE VIEW

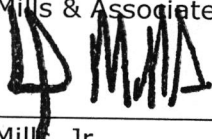
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

It is the responsibility of the reviewer (Insurance Agents, Building Officials, etc) of this elevation certificate to analyze all of the data given in conjunction with a site visit to determine the proper Building Diagram Number (Item A7). The building diagram number shown in Item A7 is given as determined by the certificate preparer and should not be used for insurance rating or building compliance purposes unless verified by reviewer

ADDITIONAL COMMENTS:

- A8 Note: Lower level Residence built with partially enclosed walls below elevated floor. Walls consist of 1"X8" Board "Slat Walls" with $\frac{3}{4}$ " gap between each board, attached to 2"x4" Pressure treated posts (see photo #5).
- A8(a-c): Lower level floors consist of open space, storage and access 1,920 square feet with openings equaling 6,829 square inches; An enclosed 560 square feet garage, which has 5 openings on exterior walls. Each exterior wall opening is $15\frac{3}{4}$ " X $7\frac{3}{4}$ " with smart vent installed, model no. #1540-520 rated at 200 square feet of coverage (rated at 1,000 square feet with 5 smart vents) (see attachment 4) for a total net opening of 655 square inches (see photo #6); Vestibule (inside stairwell and entrance) (see photo #7) is 171 square feet with 2 openings in exterior wall opening is $15\frac{3}{4}$ " X $7\frac{3}{4}$ " with smart vent installed, model no. #1540-520 rated at 200 square feet of coverage (rated at 400 square feet with smart vents) for a total net opening of 262 square inches. There is an 28"x32" (914 square inches) opening behind staircase.
- C2(a): Elevation shown is for lowest level of bottom floor.
The following are elevations of additional lower floors:
Entry Area (Vestibule) – Elevation = 4.65 feet N.A.V.D. 1988
Open space / storage area – Elevation = 3.42 feet N.A.V.D. 1988
- C2(b): Elevation shown is for elevated floor (principal use of the building).
- C2(e): Elevation shown is for top of elevated platform for hot water unit affixed to interior wall (see photo #8); Top of elevated platform for A/C unit on Left side of Residence affixed to exterior wall, Elevation = 14.85 feet N.A.V.D. 1988 (see photo #4).
- The roof peak Elevation = 38.31 feet N.A.V.D. 1988.

Leo Mills & Associates, Inc.



Leo Mills, Jr.
Professional Surveyor and Mapper
Florida Certificate Number 3513

3-15-18
Date

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS – ATTACHMENT 2

See Instructions for Item A6.

OMB Control Number: 1660-0008

Expiration: 11/30/2018

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PHOTO 5



PHOTO FIVE CAPTION: 1"x8" SLAT WALLS WITH 3/4" GAPS (INSIDE VIEW)

PHOTO 6



Job# C-9418

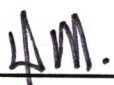

Leo Mills, Jr.
Date 03/15/2018
P.L.S. 3513

PHOTO SIX CAPTION: SMART VENT MODEL #1540-520

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS – ATTACHMENT 3

See Instructions for Item A6.

OMB Control Number: 1660-0008

Expiration: 11/30/2018

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. 635 DREAM ISLAND ROAD			Policy Number:	
City	TOWN OF LONGBOAT KEY	FL	34228	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP 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 that will fit on this page, use the Continuation Page.

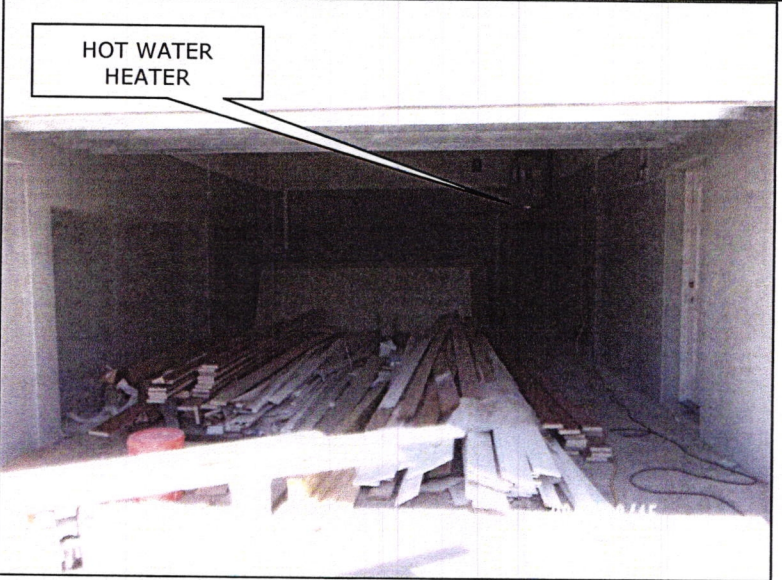
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PHOTO 7



PHOTO FIVE CAPTION: VESTIBULE FROM TOP OF STAIRS

PHOTO 8



Job# C-9418



Leo Mills, Jr.
Date 03/15/2018
P.L.S. 3513

PHOTO SIX CAPTION: HOT WATER HEATER ON PLATFORM (LOWEST MACHINERY)



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ICC-ES Report

ESR-2074

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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

Revised May 2016

This report is subject to renewal February 2017.

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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:

- 2015, 2012, 2009 and 2006 *International Building Code®* (IBC)
- 2015, 2012, 2009 and 2006 *International Residential Code®* (IRC)
- 2013 *Abu Dhabi International Building Code* (ADIBC)[†]

[†]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 2.7.2.2 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 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. Installation clips allow mounting in masonry and concrete 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:

- 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 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 = m²

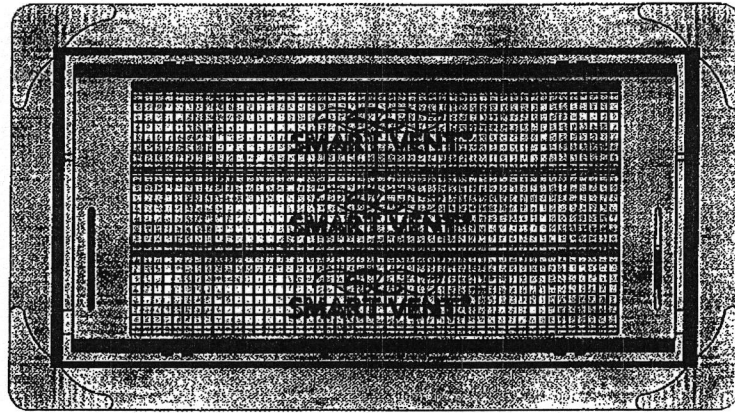


FIGURE 1—SMART VENT: MODEL 1540-510

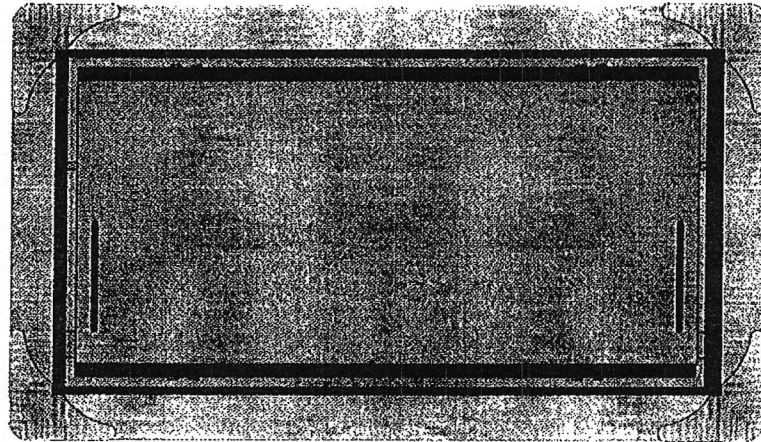


FIGURE 2—SMART VENT MODEL 1540-520

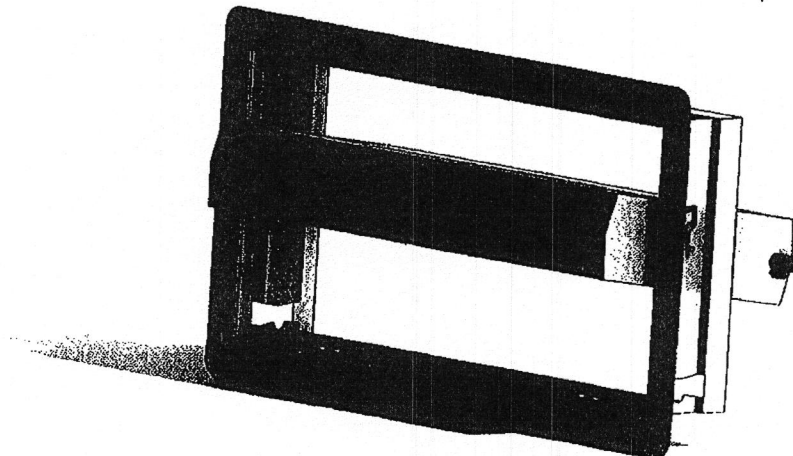


FIGURE 3—SMART VENT: SHOWN WITH FLOOD DOOR PIVOTED OPEN

ICC-ES Evaluation Report**ESR-2074 FBC Supplement**

Reissued February 2015

Revised March 2016

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
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 May 2016.

ELEVATION CERTIFICATE

BUILDING PHOTOGRAPHS – ATTACHMENT 5

See Instructions for Item A6.

OMB Control Number: 1660-0008

Expiration: 11/30/2018

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.
635 DREAM ISLAND ROAD

Policy Number:

City TOWN OF LONGBOAT KEY FL 34228

Company NAIC Number:

If using the Elevation Certificate to obtain NFIP 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 that will fit on this page, use the Continuation Page.

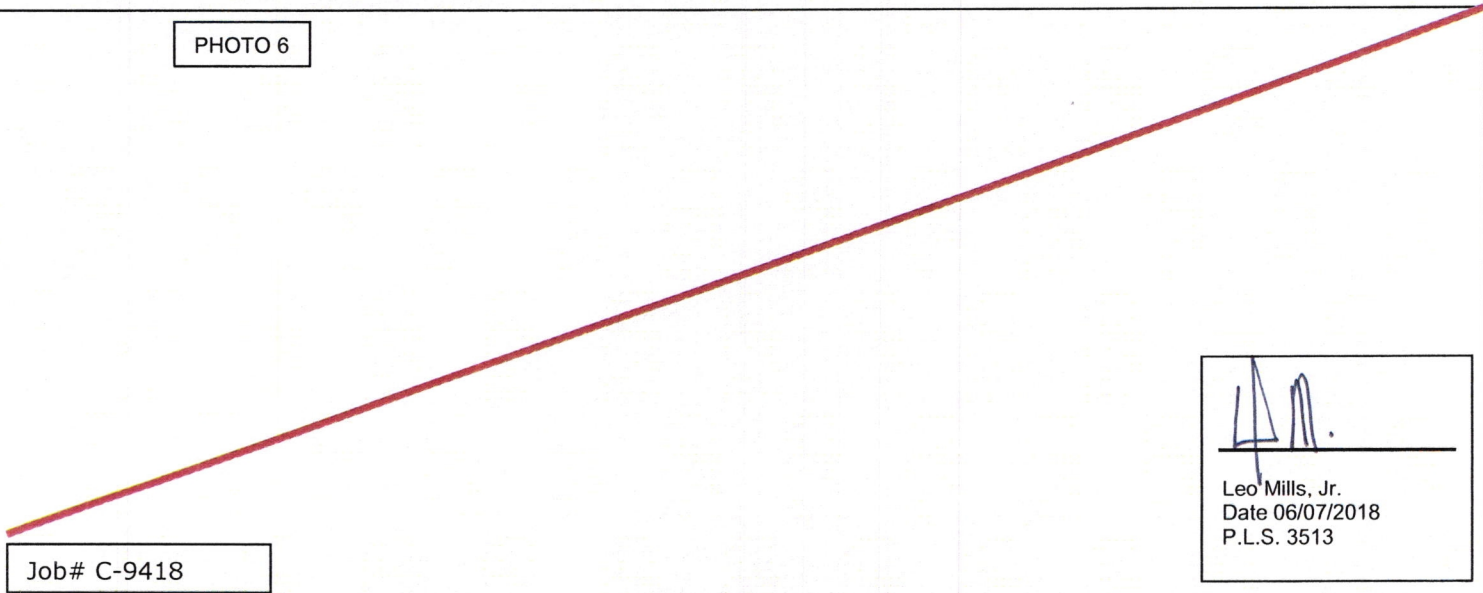
It is the responsibility of the reviewer (Insurance Agents, Building Officials, etc) of this elevation certificate to analyze all of the data given in conjunction with a site visit to determine the proper Building Diagram Number (Item A7). The building diagram number shown in Item A7 is given as determined by the certificate preparer and should not be used for insurance rating or building compliance purposes unless verified by reviewer

PHOTO 5



PHOTO FIVE CAPTION: RESIDENCE ADDRESS

PHOTO 6



Job# C-9418



Leo Mills, Jr.
Date 06/07/2018
P.L.S. 3513

PHOTO SIX CAPTION: