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

National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008 Expires March 31, 2012

SECTION A - PROPERTY INFORMATION	For Insurance Company Use:
A1. Building Owner's Name LEVON CLAYTON	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3016 WINCHESTER AVENUE	Company NAIC Number
City LONGPORT State NJ ZIP Code	the production of the state of
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 11, BLOCK 65	Newhone
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 39-19'-06" Long74-31'-26" Horizontal Datum: ☑ NAD 1927 ☐ NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL NAD 1983	
c) Total net area of flood openings in A8.b 1200 sq in c) Total net area of flood openings? Yes No d) Engineered flood openings?	ed garage <u>N/A</u> sq ft penings in the attached garage acent grade <u>N/A</u> sq in the attached garage acent grade <u>N/A</u> sq in the s
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
LONGFORT 3433020001B ATLANTIC NJ	3. State
B4. Map/Panel Number 345302-0001 B5. Suffix B6. FIRM Index Date S/15/83 B6. FIRM Index Effective/Revised Date S/15/83 B7. FIRM Panel Effective/Revised Date S/15/83 B8. Flood Zone(s) A-8 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.	B9. Base Flood Elevation(s) (Zon AO, use base flood depth)
12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date OPA SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	☐ Yes ☒ No
1 Building elevations are based on:	Finished Construction
Top of bottom floor (including basement, crawlspace, or enclosure floor) 7.1	co only)
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION	
formation. I certify that the information on this Certificate represents my best efforts to interpret the data available. I check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Were Information is to be signed and sealed by law to certify elevation formation. I certify that the information on this Certificate represents my best efforts to interpret the data available. I was efforted and longitude in Section 1001.	PLACE SEAL
le PRESIDENT Company Name DESIGN LAND SURVEYING, P.A.	HERE
dress P.O. BOX 667 City TURNERSVILLE State NJ ZIP Code 08012	
Date 09/25/13 Telephone 856-374-1134	

IMPORTANT: In these space	s, copy the correspondir	ng information from Section A	•	For Insurance Company Use:
Building Street Address (including 3016 WINCHESTER AVENUE	Apt., Unit, Suite, and/or Bldg.	No.) or P.O. Route and Box No.		Policy Number
City LONGPORT State NJ ZIP C	Code			Company NAIC Number
SECTI	ON D - SURVEYOR, ENG	INEER, OR ARCHITECT CERT	IFICATION (CON	TINUED)
		ficial, (2) insurance agent/company,		
Comments The lowest mechanic	used is the AC Compressor. A	Il flood vents are "Smart Vents". Lov	vest elevation of HV	AC ducts=10.3 (NGVD 29)
	7	MD# 1546-516		
017	>			
Signature		Date 09/25/13		
SECTION & PUN DING SI	EVATION INCODUATION			☐ Check here if attachmer
SECTION E - BUILDING EI	LEVATION INFORMATION	N (SURVEY NOT REQUIRED) F	OR ZONE AO AI	ND 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 r	equest, complete Sections A, B,
E1. Provide elevation information	al grade, if available. Check the	he measurement used. In Puerto Ri e appropriate boxes to show whethe	co only, enter meter	S.
grade (HAG) and the lowest a	idiacent grade (LAG).			2 47
a) Top of bottom floor (includi b) Top of bottom floor (includi	ng basement, crawlspace, or e ng basement, crawlspace, or e	enclosure) is fe	et meters a	bove or Delow the HAG. bove or below the LAG.
E2. For Building Diagrams 6-9 wit	h permanent flood openings p	rovided in Section A Items 8 and/or	9 (see pages 8-9 of	Instructions), the next higher floor
(elevation C2.b in the diagram 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	e or 🗌 below the HAG.
ordinance? Tyes T No	th number is available, is the t	op of the bottom floor elevated in acial must certify this information in Se	cordance with the co	ommunity's floodplain management
		R (OR OWNER'S REPRESENT		CATION
The property owner or owner's author	orized representative who com	pletes Sections A. B. and E for Zone	A (without a FEMA	
or Zone AO must sign nere. The sta	itements in Sections A, B, and	E are correct to the best of my know	vledge.	issued of community-issued BPE)
Property Owner's or Owner's Author	ized Representative's Name			
Address		City	State	ZIP Code
Signature		Date	Telephone	
Comments				
				Check here if attachmen
	SECTION G - COM	MMUNITY INFORMATION (OPT	IONAL)	
he local official who is authorized by I nd G of this Elevation Certificate. Cor	aw or ordinance to administer nplete the applicable item(s) a	the community's floodplain manager	ment ordinance can	complete Sections A, B, C (or E),
1. The information in Section C	was taken from other docume	ntation that has been signed and se	aled by a licensed o	IDIOVOS anainas as a literal
is authorized by law to certify	elevation information. (indica	ite the source and date of the elevati	on data in the Comr	nents area below.)
 A community official complet The following information (Ite 	ed Section E for a building loca	ated in Zone A (without a FEMA-issu nmunity floodplain management purp	ed or community-iss	sued BFE) or Zone AO.
G4. Permit Number				
54. Permit Number	G5. Date Permit Issued	G6. Date Cer	tificate Of Complian	ce/Occupancy Issued
7. This permit has been issued for:	☐ New Construction	☐ Substantial Improvement		
3. Elevation of as-built lowest floor (in	ncluding basement) of the build		ters (PR) Datum	
9. BFE or (in Zone AO) depth of floor			ters (PR) Datum	
Community's design flood elevatio	n		ters (PR) Datum	
ocal Official's Name		Title		
ommunity Name		Telephone		
gnature				
		Date		
omments				
				Check here if attachments

Replaces all previous editions

FEMA Form 81-31, Mar 09



ICC-ES Evaluation Report

ESR-2074*

Reissued December 1, 2012 This report is subject to renewal February 1, 2015.

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: 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)

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 15³/₄ inches wide by 7³/₄ inches high (400 by 196.9 mm). The Wood Wall Flood Model #1540-570 and Wood Wall Flood Overhead Door Model #1540-570 units measure 14 inches wide by 8³/₄ 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 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 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

*Revised July 2013



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 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 AFFV for every 400 square feet (37.2 m²) 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 2007.

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).



ICC-ES Evaluation Report

ESR-2074 FBC Supplement

Issued July 1, 2013

This report is subject to renewal February 1, 2015.

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EVALUATION SUBJECT:

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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:

- 2010 Florida Building Code—Building (FBC)
- 2010 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 structures not subject to FBC Section 2326.3.1 or FRC Section 4409.13.3.1, as applicable.

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 December 1, 2012, revised July 2013.



Building Photographs See Instructions for Item A6.

	For Insurance Company Use:		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 3016 WINCHESTER AVENUE	Policy Number		
City LONGPORT State NJ ZIP Code	Company NAIC Number		
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two 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." If submitting more photographs than will fit on this page, use the Continuation Page, following.			

SEE ATTACHED



