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.

	SECT	ON A - PROPERTY I	NFORM	MATION		OR INSUR	ANCE COMPANY USE
A1. Building Owner's Name						Policy Numb	er:
Stone Harbor Sunri	se, LLC						
A2. Building Street Box No. 223 119th Street	Address (incl	uding Apt., Unit, Suite,	and/or	Bldg. No.) or P.O.	Route and	Company N	AIC Number:
City				State		ZIP Code	
Stone Harbor				New Jersey		08247	
A3. Property Descr Block 119.03, Lot		d Block Numbers, Tax of Stone Harbor	Parcel	Number, Legal De	scription, etc.)		
A4. Building Use (e	.g., Resident	ial, Non-Residential, A	ddition,	Accessory, etc.)	Residential		
A5. Latitude/Longit	ude: Lat. N	39°02'17,53" L	.ong. W	074°46'16.65"	Horizontal Datum	NAD 1	927 🗵 NAD 1983
A6. Attach at least	2 photograph	s of the building if the	Certifica	ate is being used to	obtain flood insura	nce.	
A7. Building Diagra	m Number _	8					
A8. For a building v	vith a crawlsp	ace or enclosure(s):					
a) Square foot	age of crawls	pace or enclosure(s)	1	,480 sq ft			
b) Number of p	ermanent flo	od openings in the cra	wlspace	e or enclosure(s) w	ithin 1.0 foot above	adjacent gra	ade9.
c) Total net are	ea of flood op	enings in A8.b1,80	00s	q in			
d) Engineered	flood opening	gs? ⊠Yes 🗌 No)				
A9. For a building v	vith an attach	ed garage:					
_		ed garage 0	;	sq ft			
		od openings in the atta		•	ot above adiacent o	rade	0
			0	sq in		t-strakensker 10	hamman da hammada a sa
,		4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		. Sq III			
d) Engineered	tiooa opening	gs? ☐ Yes ☒ N	D				
The state of the s	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Communi	ty Name & Co	ommunity Number		B2. County Name	•		B3. State
Borough of Stone H	larbor #34532	23		Cape May			New Jersey
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/ evised Date	B8. Flood Zone(s	(Zo	se Flood Elevation(s) ne AO, use Base od Depth)
345323/0002	E	01/08/1971		/1992	A7	10.0	ou Bepuily
dhamaday yer mare might			.1		1		
1		Base Flood Elevation (epth entered in Iten	B9:	
∐ FIS Profile	: ⊠ FIRM	Community Determ	nnea (Otner/Source.	to the state of th		
B11. Indicate eleva	ation datum u	sed for BFE in Item B): 🗵 N	IGVD 1929 → 🔲 N	AVD 1988 🔲 OI	her/Source:	
B12. Is the building	g located in a	Coastal Barrier Resou	ırces S	ystem (CBRS) area	or Otherwise Prote	ected Area (OPA)? ☐ Yes ⊠ No
Designation [Date:		CBRS	☐ OPA			

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corresponding	information from Sect	ion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or 223 119th Street	Bldg. No.) or P.O. Rout	e and Box No.	Policy Number:
City State			Company NAIC Number
	Jersey 0824		
SECTION C – BUILDING ELE	VATION INFORMAT	ON (SURVEY RI	EQUIRED)
C1. Building elevations are based on: Construction *A new Elevation Certificate will be required when co		ing Under Constru	ction* X Finished Construction
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), \		• ,	AE, AR/A1-A30, AR/AH, AR/AO.
Complete Items C2.a-h below according to the build Benchmark Utilized: GPS (KEYNET RTN)	ng diagram specified ir Vertical Datum:	i Item A7. In Puert	o Rico only, enter meters.
Indicate elevation datum used for the elevations in ite		<i>1</i> .	
□ NGVD 1929 □ NAVD 1988 □ Other/S □ Datum used for building elevations must be the same			
Dutam 2004 to Daniang Storago to Mac 20 the Same	do that dood for the Di		Check the measurement used.
a) Top of bottom floor (including basement, crawlspa	ace, or enclosure floor)		X feet meters
b) Top of the next higher floor		12, 89	X feet meters
c) Bottom of the lowest horizontal structural member	(V Zones only)	N/A,	X feet meters
d) Attached garage (top of slab)		N/A.	X feet meters
e) Lowest elevation of machinery or equipment servi (Describe type of equipment and location in Communication in Communication)	cing the building nents)	10. 34	X feet meters
f) Lowest adjacent (finished) grade next to building ((LAG)	<u>8</u> . 9	X feet meters
g) Highest adjacent (finished) grade next to building	(HAG)	9, 6	x feet meters
 h) Lowest adjacent grade at lowest elevation of deck structural support 	or stairs, including	9. 1	X feet meters
SECTION D – SURVEYOR, I	ENGINEER, OR ARC	HITECT CERTIF	ICATION
This certification is to be signed and sealed by a land surval certify that the information on this Certificate represents statement may be punishable by fine or imprisonment und	my best efforts to interp	ret the data availa	law to certify elevation information. ible. I understand that any false
Were latitude and longitude in Section A provided by a lice	ensed land surveyor?	⊠Yes □No	⊠ Check here if attachments.
Certifier's Name Scott D. Brown	License Number NJ Lic. No. 38250		
Title			
Professional Engineer & Land Surveyor			
Company Name Dante Guzzi Engineering Associates			Place Seal
Address			Here
418 Stokes Road			
City Medford	State New Jersey	ZIP Code 08055	
Signature D	Date 06/22/2017	Telephone (609) 654-4440	
Copy all pages of this Elevation Certificate and all attachmen	its for (1) community off	icial, (2) insurance	agent/company, and (3) building owner.
Comments (including type of equipment and location, per A8.b) The nine (9) vents are "SMART VENT" Model #1540 (2) block openings at 128 sq in/each (not included in total heating duct. The property is located on PRELIMINARY F the elevations on page 1 to NAVD88 elevations, subtract	0-510 certified to provid) C2.a) Crawl space flo IRM #34009C0242F (0	or. C2.b) Finished	floor living space. C2.e) Bottom of
DGEA File #C-10-167 This form was revised from 6/16/20	017 to indicate NGVD2	9 Datum in C2.	()

ELEVATION CERTIFICATE

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

IMP	ORTANT: In these spaces, copy the correspond	ing information from	n Section A.	FOR INSURANCE COMPANY USE
	lding Street Address (including Apt., Unit, Suite, and 3 119th Street	d/or Bldg. No.) or P.C	. Route and Box No.	Policy Number:
City		State New Jersey	ZIP Code 08247	Company NAIC Number
	SECTION E – BUILDING EL FOR ZON	EVATION INFORM E AO AND ZONE A		OT REQUIRED)
con	Zones AO and A (without BFE), complete Items E1 nplete Sections A, B, and C. For Items E1–E4, use rer meters.	–E5. If the Certificate natural grade, if availa	e is intended to suppor able. Check the measu	t a LOMA or LOMR-F request, rement used. In Puerto Rico only,
E1.	Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest	check the appropriated characteristics characteristics characteristics characteristics characteristics characteristics and characteristics cha	te boxes to show whet	her the elevation is above or below
	Top of bottom floor (including basement, crawlspace, or enclosure) is		feet [] me	ters 🔲 above or 🔲 below the HAG.
	 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet [] me	ters
E2.	For Building Diagrams 6–9 with permanent flood of the next higher floor (elevation C2.b in	penings provided in S		
F3	the diagrams) of the building is Attached garage (top of slab) is		feet me	
	Top of platform of machinery and/or equipment	•	feet	ters
E5	servicing the building is Zone AO only: If no flood depth number is available	e is the top of the ho	feet me	
				st certify this information in Section G.
	SECTION F - PROPERTY OW	NER (OR OWNER'S	REPRESENTATIVE)	CERTIFICATION
com	property owner or owner's authorized representative munity-issued BFE) or Zone AO must sign here. The second secon	ne statements in Sec	ctions A, B, and E for tions A, B, and E are c	Zone A (without a FEMA-issued or orrect to the best of my knowledge.
Prop	perty Owner or Owner's Authorized Representative	s Name		
Add	ress	City		State ZIP Code
Sigr	nature	Date		Telephone
Con	nments		The second secon	
···				Check here if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the corre	esponding information from Sect	tion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, St 223 119th Street	uite, and/or Bldg. No.) or P.O. Rout	e and Box No.	Policy Number:
City Stone Harbor	State ZIP 0 New Jersey 0824		Company NAIC Number
SECTIO	ON G - COMMUNITY INFORMATION	ON (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 applicable		
G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)	ed by law to certify elevation inform	nation. (Indicate the	e source and date of the elevation
G2. A community official completed Section Zone AO. The following information (Items C4)			
G3. The following information (Items G4–	G10) is provided for community no	обрат тапаует	ent purposes.
G4. Permit Number 16-12069	G5. Date Permit Issued		Date Certificate of compliange/Occupancy Issued
10-12007	(10)10		6/21/17
G7. This permit has been issued for:	New Construction Substantial	I Improvement	
G8. Elevation of as-built lowest floor (including of the building:	basement) 12 8	9 A feet	meters Datum N GVD 1979
G9. BFE or (in Zone AO) depth of flooding at t	the building site: 10	⊃ ✓ ✓ feet	meters Datum NGVD1929
G10. Community's design flood elevation:	(1 0	∑ _feet	meters Datum NAVD1 988
Local Official's Name MICHAEL LOC	Title CAEMBREE (^ SCIB	UCTION OFFICIAL
Community Name	Telephone		
	ONE HARBOR	609.	368.6814
Signature	Date	121/17	
Comments (including type of equipment and loc	cation, per C2(e), if applicable)		,
			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, co	py the corresponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including a 223 119th Street	Apt., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Stone Harbor	New Jersey	08247	

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 6/16/2017

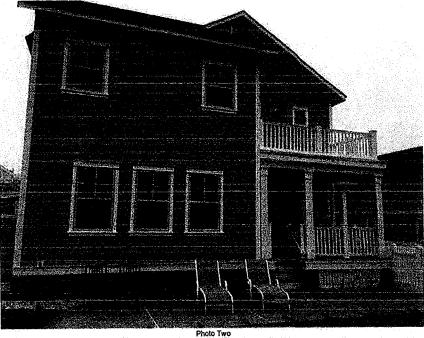


Photo Two Caption REAR VIEW 6/16/2017

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. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 223 119th Street			FOR INSURANCE COMPANY USE Policy Number:	
Stone Harbor	New Jersey	08247		

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.

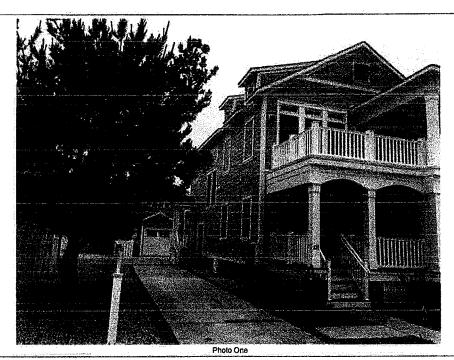


Photo One Caption LEFT SIDE VIEW 6/16/2017

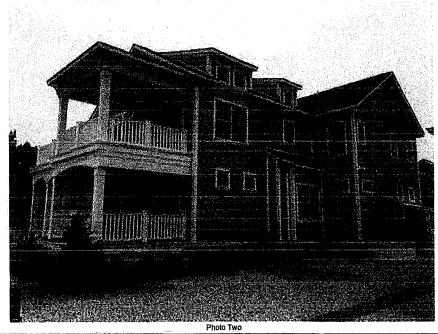


Photo Two Caption RIGHT SIDE VIEW 6/16/2017

ICC-ES Report

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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:

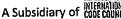
SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS: MODELS #1540-520; #1540-521; #1540-510; #1540-571; #1540-570; #1540-574; #1540-524; #1540-514



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AVS)



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ICC-ES Evaluation Report

ESR-2074*

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 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)[†]

[†]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 2.6.2.2 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 SmartVENT⁵ Stacking Model #1540-511 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 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 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 = m^2

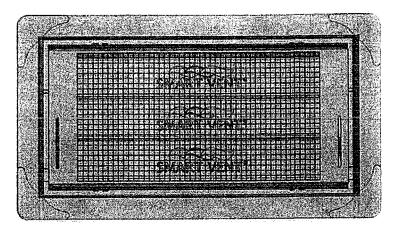


FIGURE 1-SMART VENT: MODEL 1540-510

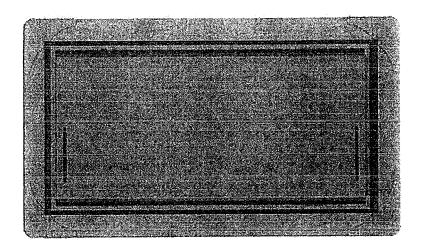


FIGURE 2-SMART VENT MODEL 1540-520

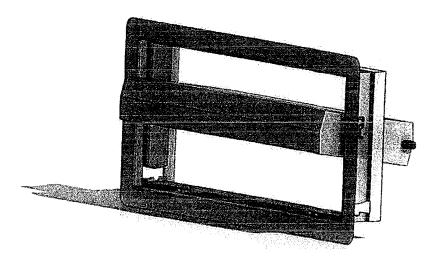


FIGURE 3—SMART VENT: SHOWN WITH FLOOD DOOR PIVOTED OPEN