# U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program

# **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

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

MAR 16 2018

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

| SECTION A - PROPERTY INFORM  | MATION                         |                     | OR INSURANCE COMPANY USE                             |
|--|--------------------------------|---------------------|--|
| A1. Building Owner's Name  |                                |                     | Policy Number:                                       |
| Thomas J.Welsh III   |                                |                     | •  |
| <ul><li>A2. Building Street Address (including Apt., Unit, Suite, and/or Box No.</li><li>127 94th Street</li></ul> | Bldg. No.) or P.O. F           | Route and           | Company NAIC Number:                                 |
| City   | State                          | L                   | ZIP Code   |
| Stone Harbor   | New Jersey                     |                     | 08247  |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Block 94.02 Lots 40 and 42                             | Number, Legal Desc             | cription, etc.)     |  |
| A4. Building Use (e.g., Residential, Non-Residential, Addition,  | Accessory, etc.)               | Residential         |  |
| A5. Latitude/Longitude: Lat. N 39°03'13.90" Long, W  | 074°45'22.81"                  | Horizontal Datum:   | ☐ NAD 1927 🖾 NAD 1983                                |
| A6. Attach at least 2 photographs of the building if the Certifica   |                                |                     |  |
| A7. Building Diagram Number 8  |                                |                     |  |
| A8. For a building with a crawlspace or enclosure(s):  |                                |                     |  |
| a) Square footage of crawlspace or enclosure(s)  | 1338.00                        | sa ft               |  |
| b) Number of permanent flood openings in the crawlspace  |                                | •                   | discent grade . 8                                    |
| c) Total net area of flood openings in A8.b  |                                | 1.0 IOOL ADOVE 8    | idiacour Arade 0                                     |
| d) Engineered flood openings?   Yes No   | 500.00 sq III                  |                     |  |
|  |                                |                     |  |
| A9. For a building with an attached garage:  |                                |                     |  |
| a) Square footage of attached garage   | N/A sq ft                      |                     |  |
| b) Number of permanent flood openings in the attached ga   | arage within 1.0 foot          | above adjacent gra  | ade N/A  |
| c) Total net area of flood openings in A9.b  | N/A sq in                      |                     |  |
| d) Engineered flood openings?  | •                              |                     |  |
|  |                                |                     |  |
| SECTION B - FLOOD INSURA   | NCE RATE MAP (F                | IRM) INFORMAT       | TON  |
| B1. NFIP Community Name & Community Number   | B2. County Name                |                     | B3. State  |
| Borough of Stone Harbor #345323  | Cape May                       |                     | New Jersey   |
| Number Date Effe   | M Panel B8. Fl<br>ctive/ Zone( |                     | use Flood Elevation(s) one AO, use Base Flood Depth) |
| 34009C0242 F 10-05-2017 10-05-2  | 1                              |                     | 0 & 'X'= <1' depth or 0.2% annual<br>e of flood      |
| B10. Indicate the source of the Base Flood Elevation (BFE) da  | ta or base flood dep           | oth entered in Item | B9:  |
| ☐ FIS Profile ☒ FIRM ☐ Community Determined ☐  |                                |                     |  |
| B11. Indicate elevation datum used for BFE in Item B9: No  | GVD 1929 🔀 NAV                 | /D 1988 🔲 Oth       | er/Source:   |
| B12. Is the building located in a Coastal Barrier Resources Sy   | stem (CBRS) area o             | or Otherwise Protec | ted Area (OPA)? TVos VA                              |
| Designation Date:   CBRS   |                                |                     | Moduling (OLD): Ties MINO                            |
| C CDING  |                                |                     |  |
|  |                                |                     |  |

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|---|---|---|---|
| Building Street Address (including Apt., Unit, Suite, and/or 127 94th Street  | Bldg. No.) or P.O. Ro   | ute and Box No.   | Policy Number:  |
| City Sta<br>Stone Harbor New  |   | Code<br>247   | Company NAIC Number   |
| SECTION C – BUILDING EL   | EVATION INFORMA   | TION (SURVEY RI   | QUIRED)   |
|   | on Drawings*  | ilding Under Constru<br>ling is complete.<br>BFE), AR, AR/A, AR/<br>in Item A7. In Puert<br>i: NAVD 1988<br>ow.<br>BFE. | Check the measurement used.  8.88   |
|   |   | · · · · · · · · · · · · · · · · · · ·   | 9.54 X feet  meters   |
| h) Lowest adjacent grade at lowest elevation of dec<br>structural support   | k or stairs, including  |   | 8.45 X feet meters  |
| SECTION D – SURVEYOR,   |   |   |   |
| This certification is to be signed and sealed by a land sur<br>I certify that the information on this Certificate represents<br>statement may be punishable by fine or imprisonment un<br>Were latitude and longitude in Section A provided by a lice   | i my best efforts to inte<br>ider 18 U.S. Code, Se  | erpret the data availa<br>ction 1001.   | law to certify elevation information.  ble. I understand that any false  Check here if attachments.           |
| Certifier's Name  | License Number  |   |   |
| Steven C Woodrow Title  | 27514   |   |   |
| Land Surveyor   |   |   |   |
| Company Name  |   |   | Place   |
| Dante Guzzi Engineering Associates  |   |   | Seal  |
| Address<br>418 Stokes Road  |   |   | Here  |
| City<br>Medford   | State<br>New Jersey   | ZIP Code<br>08055   |   |
| Signature Stew C. Words   | Date<br>03-15-2018  | Telephone<br>(609) 654-4440   | Ext.  |
| Copy all pages of this Elevation Certificate and all attachme   | ents for (1) community of   | official, (2) insurance   | agent/company, and (3) building owner.  |
| Comments (including type of equipment and location, per The property is in 2 zones, however the building & all adj The lowest equipment visible at the time of the survey was Model #1540-510 in the foundation walls certified to provide block (60 Sq. In.) in the foundation wall under the front por The detached one story Cabana containing 148.96 SF all flood protection each | C2(e), if applicable) acent grades are compased HVAC units on the ide 200 SF of flood protects. | pletely in Zone 'X' by<br>e left side of the build<br>otection each plus1 o   | elevation and by scaling the FIRM.<br>ding. There are 6 "SMART VENT"<br>open block (128 Sq. In.) & 1 sideways |

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|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) 127 94th Street  | or P.O. Route and Box No.  | Policy Number:   |
| City State Stone Harbor New Jersey   | ZIP Code<br>08247  | Company NAIC Number  |
| SECTION E – BUILDING ELEVATION INF<br>FOR ZONE AO AND ZO   | FORMATION (SURVEY NOT<br>ONE A (WITHOUT BFE)                       | REQUIRED)  |
| For Zones AO and A (without BFE), complete Items E1–E5. If the Cercomplete Sections A, B,and C. For Items E1–E4, use natural grade, if enter meters.   | tificate is intended to support a favailable. Check the measure    | LOMA or LOMR-F request,<br>ment used. In Puerto Rico only,           |
| E1. Provide elevation information for the following and check the app<br>the highest adjacent grade (HAG) and the lowest adjacent grade<br>a) Top of bottom floor (including basement,           | ropriate boxes to show whethe (LAG).                               |  |
| crawlspace, or enclosure) is b) Top of bottom floor (including basement, crawlspace, or enclosure) is  |  | _  |
| E2. For Building Diagrams 6–9 with permanent flood openings provide the next higher floor (elevation C2.b in the diagrams) of the building is  | led in Section A Items 8 and/or                                    |  |
| E3. Attached garage (top of slab) is   |  |  |
| E4. Top of platform of machinery and/or equipment servicing the building is  | [] feet [] metel   | rs 🔲 above or 🔲 below the HAG.                                       |
| E5. Zone AO only: If no flood depth number is available, is the top of floodplain management ordinance?  | the bottom floor elevated in ac<br>nown. The local official must   | cordance with the community's certify this information in Section G. |
| SECTION F - PROPERTY OWNER (OR OWN   | IER'S REPRESENTATIVE) CI   | ERTIFICATION   |
| The property owner or owner's authorized representative who comple community-issued BFE) or Zone AO must sign here. The statements in Property Owner or Owner's Authorized Representative's Name | tes Sections A, B, and E for Zo<br>in Sections A, B, and E are cor | one A (without a FEMA-issued or rect to the best of my knowledge.    |
| Address  | City St  | ate ZIP Code   |
| Signature  | Date Te  | lephone  |
| Comments   |  |  |
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|  |  | Check here if attachments.   |

## **ELEVATION CERTIFICATE**

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

| MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY US   |   |  |                       |   |
|--|---|--|-----------------------|---|
| Bùilding Street Address (including Apt., Unit, S<br>127 94th Street  | uite, and/or Bldg. No.)                         | or P.O. Route and Box                                    | No.                   | Policy Number:  |
| City   | State   | ZIP Code   | <u> </u>              | Company NAIC Number   |
| Stone Harbor   | New Jersey                                      | 08247  |                       |   |
|  |   | INFORMATION (OPTIO                                       |                       |   |
| 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 | i Certificate. Complete                         | the community's floodplethe applicable item(s) a         | ain mana<br>nd sign b | agement ordinance can complete pelow. Check the measurement       |
| G1. The information in Section C was tak engineer, or architect who is authoriz data in the Comments area below.)                                | en from other docume<br>ed by law to certify el | entation that has been sig<br>evation information. (Indi | gned and<br>icate the | I sealed by a licensed surveyor, source and date of the elevation |
| G2. A community official completed Section Zone AO.  | ion E for a building loo                        | cated in Zone A (without                                 | a FEMA-               | issued or community-issued BFE)                                   |
| G3. The following information (Items G4-   | -G10) is provided for o                         | community floodplain ma                                  | nagemer               | nt purposes.  |
| G4. Permit Number  | G5. Date Permit Iss                             | •  |                       | ite Certificate of  |
| 16-11950   | 9 /19   | 116  | Co                    | mpliance/Occupancy Issued   |
| G7. This permit has been issued for:   ☑ New Construction ☐ Substantial Improvement  |   |  |                       |   |
| G8. Elevation of as-built lowest floor (including of the building:   | g basement)                                     | 1.77   | ⊠ feet [              | meters Datum NAVD 1928  |
| G9. BFE or (in Zone AO) depth of flooding at 1   | the building site:                              | 8.00   | ☑ feet [              | meters Datum N W 0 1988   |
| G10. Community's design flood elevation:   |   | 10.00  | [] feet [             | meters Datum LAVO 1988  |
| Local Official's Name  |   | Title  |                       |   |
| Community Name   | MBERE   | CONSIR   | <u>い</u> 口            | OFFICIAL  |
|  | TAIR I LAIDE                                    | releptione   |                       |   |
| Signature COUGH OF STE   | INE HARD  | Date Of 1.   | <u> </u>              | 8.6814  |
| MI   |   |  | 9/18                  |   |
| Comments (including type of equipment and loc  | cation, per C2(e), if ap                        | pplicable)   | 1(18                  |   |
|  |   |  |                       |   |
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|  |   |  |                       |   |
|  |   |  |                       | Check here if attachments.  |

#### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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

**ELEVATION CERTIFICATE** 

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. 127 94th Street

Policy Number:

City Stone Harbor

State **New Jersey**  ZIP Code 08247

Company NAIC Number

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.

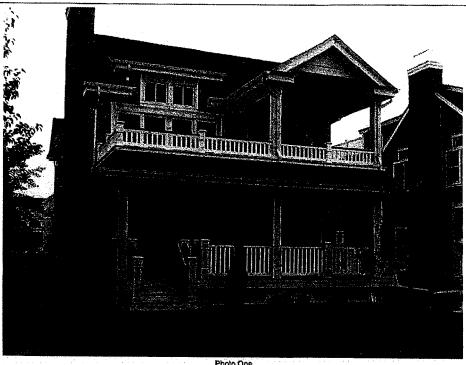


Photo One

**Photo One Caption** FRONT AND LEFT SIDE VIEW (10-09-17)

Clear Photo One

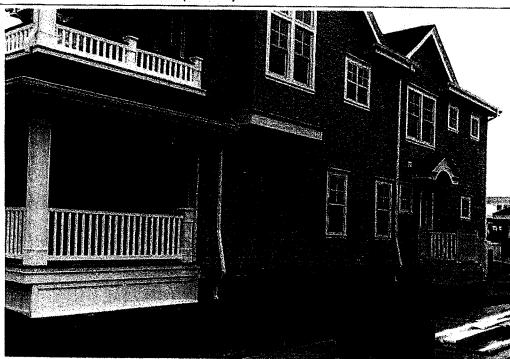


Photo Two

Photo Two Caption RIGHT SIDE (10-09-17)

Clear Photo Two

#### **BUILDING PHOTOGRAPHS**

Continuation Page

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**ELEVATION CERTIFICATE** 

|  |   | •                      | •                         |
|--|---|------------------------|---------------------------|
| IMPORTANT: In these spaces, co                       | py the corresponding information        | from Section A.        | FOR INSURANCE COMPANY USE |
| Building Street Address (including a 127 94th 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 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.

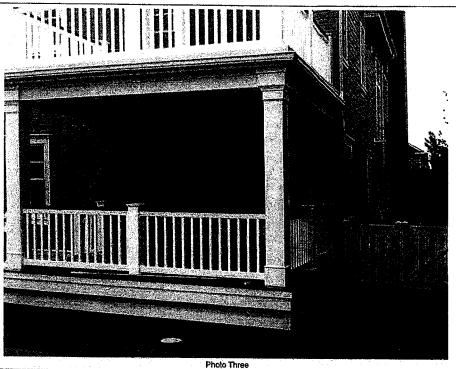


Photo Three Caption PARTIAL REAR VIEW & LEFT SIDE VIEW (10-09-17)

Clear Photo Three



Photo Four

Photo Four Caption LEFT SIDE VIEW (10-09-17)

Clear Photo Four



# **ICC-ES Evaluation Report**

### **ESR-2074**

Reissued February 2017

This report is subject to renewal February 2019.

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 EVALUATION SCOPE

#### Compliance with the following codes:

- 2015, 2012, 2009 and 2006 International Building Code<sup>®</sup> (IBC)
- 2015, 2012, 2009 and 2006 International Residential Code® (IRC)
- 2013 Abu Dhabi International Building Code (ADIBC)<sup>†</sup>

<sup>†</sup>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<sup>®</sup> 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<sup>®</sup> 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<sup>®</sup> Automatic Foundation Flood Vents are available in various models and sizes as described in Table 1. The SmartVENT<sup>®</sup> Stacking Model #1540-511 and FloodVENT<sup>®</sup> 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<sup>®</sup> 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<sup>®</sup> 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 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> " | 200                |
| SmartVENT®                         | 1540-510     | 15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> " | 200                |
| FloodVENT® Overhead Door           | 1540-524     | 15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> " | 200                |
| SmartVENT® Overhead Door           | 1540-514     | 15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> " | 200                |
| Wood Wall FloodVENT®               | 1540-570     | 14" X 8 <sup>3</sup> / <sub>4</sub> "                              | 200                |
| Wood Wall FloodVENT® Overhead Door | 1540-574     | 14" X 8 <sup>3</sup> / <sub>4</sub> "                              | 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 =  $m^2$