# U.S. ÉPARTMENT 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.

Number Date Effective/ Zone(s) (Zone AO, use Base Flood Depth) Revised Date			TION A - PROPERT	Y INFOR	MATION			FOR INSUR	RANCE COMPANY USE
A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Sox No. 284 86th Street  City State ZIP Code O8247  A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 85.03 Lots 107 & 109  A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. N.39°03'38.88° Long. W 074'45'17.04° Horizontal Datum: NAD 1927 NAD 1983  A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain food insurance.  A7. Building Diagram Number 8  A8. For a building with a crawispace or enclosure(s): a) Square footage of crawispace or enclosure(s) b) Number of permanent flood openings in the crawispace or enclosure(s) within 1.0 foot above adjacent grade 8 c) Total net area of flood openings? Yes No  A9. For a building with an attached garage: a) Square footage of attached garage: b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 8 c) Total net area of flood openings? Yes No  SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  B1. NFIP Community Name & Community Number Date Residuely Revised Date Revised Da	1							Policy Numl	ber:
State Store Harbor  City State New Jersey		*******	1 - 4 - A - A - A - A - A - A - A - A - A						
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)    A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)   A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)   Residential     A5. Latitude/Longitude: Lat. N 39°03'38.88"   Long. W 074*45*17.04"   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 Diagram Number	Box No.	t Address (inc	iluding Apt., Unit, Sur	te, and/o	or Bldg. No.) o	r P.O. Route	and	Company N	AIC Number:
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 85.03 Lots 107 & 109  A4. Bullding Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) A5. Latitude/Longitude: Lat, N.39°03'38.88"	1 7								
Block 85.03 Lots 107 & 109		-inting /l ot or	- Disability have To	- Paulie				08247	
A5. Latitude/Longitude: Lat. N 39*03'38.88"	Block 85.03 Lots 1	07 & 109		<del></del>					
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.  A7. Building Diagram Number 8  A8. For a building with a crawispace or enclosure(s):  a) Square footage of crawispace or enclosure(s):  b) Number of permanent flood openings in the crawispace or enclosure(s) within 1.0 foot above adjacent grade 8  c) Total net area of flood openings in A8.b 1600.00 sq in  d) Engineered flood openings?  Yes No  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 garage within 1.0 foot above adjacent grade (N/A)  c) Total net area of flood openings in A9.b N/A sq in  d) Engineered flood openings?  Yes No  SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  B1. NFIP Community Name & Community Number  B2. County Name  Robert  B3. State  New Jersey  B4. Map/Panel  B5. Suffix  B6. FIRM index  Date  B7. FIRM Panel  Effective/  Revised Date  B8. Flood  B9. Base Flood Elevation(s)  (Zone AO, use Base Flood Depth)  B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:    FIS Profile   FIRM   Community Determined   Other/Source:  B11. Indicate elevation datum used for BFE in Item B9:  NGVD 1929   NAVD 1988   Other/Source;  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?   Yes   No						<del></del>			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.  A7. Building Diagram Number	A5. Latitude/Longi	tude: Lat. <u>N</u>	39°03'38.88"	Long. W	V 074°45'17.0	4" Horiz	ontal Datur	n: 🔲 NAD 1	927 🗵 NAD 1983
A8. For a building with a crawispace or enclosure(s):  a) Square footage of crawispace or enclosure(s)  b) Number of permanent flood openings in the crawispace or enclosure(s) within 1.0 foot above adjacent grade 8  c) Total net area of flood openings in A8.b  d) Engineered flood openings?									
a) Square footage of crawlspace or enclosure(s)  1372.00 sq ft  b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 8  c) Total net area of flood openings?	A7. Building Diagra	am Number _	8						
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 8  c) Total net area of flood openings in A8.b	A8. For a building	with a crawlsp	pace or enclosure(s):						
c) Total net area of flood openings in A8.b	a) Square foo	tage of crawls	pace or enclosure(s)	<u> </u>		372.00 sq ft			
d) Engineered flood openings?	b) Number of p	ermanent floo	od openings in the cr	awlspace	e or enclosure	e(s) within 1.0	foot above	adjacent gra	de <u>8</u>
A9. For a building with an attached garage:  a) Square footage of attached garage	c) Total net are	ea of flood op	enings in A8.b	1	600.00 sq ir			FO COM	
a) Square footage of attached garage N/A sq ft b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade (N/A.  c) Total net area of flood openings in A9.b N/A sq in d) Engineered flood openings? Yes No    SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION   B1. NFIP Community Name & Community Number B2. County Name Cape May   B2. County Name B3. State New Jersey	d) Engineered	flood opening	gs? ⊠Yes □ N	lo	·		51.11.11.11.11.11.11.11.11.11.11.11.11.1	N 125 -	in in the Paper land
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade (N/A c) Total net area of flood openings in A9.b	A9. For a building w	vith an attache	ed garage:					St	-P 2 C 2019
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade (N/A	a) Square foots	age of attache	ed garage		N/A sq ft			ورود المعارض المراجعة	- 1580.00 (127.75p) %
c) Total net area of flood openings in A9.b N/A sq in d) Engineered flood openings?	b) Number of p	ermanent floo	od openings in the att	ached g	arage within	i.0 foot above	e adjacent e	rade (N/A	1 - H - 12 (1 전통한 2014 - 112) (4 1112) 왕 전 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  B1. NFIP Community Name & Community Number Borough of Stone Harbor #345323  B4. Map/Panel Number B5. Suffix Date B7. FIRM Panel Effective/Revised Date B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)  AE B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  FIS Profile FIRM Community Determined Other/Source:  B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No							i		and the state of t
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION  B1. NFIP Community Name & Community Number Borough of Stone Harbor #345323  B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: FIS Profile FIRM Community Determined Other/Source:  B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No				ln					
B1. NFIP Community Name & Community Number Borough of Stone Harbor #345323  B2. County Name Cape May  B3. State New Jersey  B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s)  B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)  AE B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  FIS Profile FIRM Community Determined Other/Source:  B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No									
Berough of Stone Harbor #345323  Cape May  New Jersey  B4. Map/Panel Number  B5. Suffix B6. FIRM Index Date Date Perfective/ Revised Date  B7. FIRM Panel Effective/ Revised Date  B8. Flood Zone(s)  AE  B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)  B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  FIS Profile FIRM Community Determined Other/Source:  B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No	r. v - v - v - v - v - v - v - v - v - v	SE(	CTION B - FLOOD I	NSURA	NCE RATE	MAP (FIRM)	INFORMA	TION	
B4. Map/Panel Number B5. Suffix B6. FIRM index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s) (Zone AO, use Base Flood Depth)  34009C0242 F 10-05-2017 B8. B8. Flood Zone(s) (Zone AO, use Base Flood Depth)  B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  FIS Profile FIRM Community Determined Other/Source:  B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source;  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No	T .	-	•	1	, -	Name	1-1-1 <u>1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1</u>	(44. 1.1. <u>14. 17. 17. 17. 17. 17. 17. 17. 17. 17. 17</u>	
Number  Date   Effective/  Revised Date   Effective/  Revised Date   Date   Effective/  Revised Date   Date   Effective/  Revised Date   Date   Date   Effective/  Revised Date	Borough of Stone H	larbor #34532	23		Cape May				New Jersey
34009C0242 F 10-05-2017 10-05-2017 AE 8.0¹  B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:  ☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:  B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source:  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No	B4. Map/Panel Number	B5. Suffix		Effe	ective/		B9. E	Base Flood El Zone AO, use	evation(s) Base Flood Depth)
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:  B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source:  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No	34009C0242	F	10-05-2017			AE	8.0'		
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:  B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source;  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No	B10. Indicate the s	ource of the B	lase Flood Elevation	(BFE) da	eta or base flo	ood depth ent	ered in Iten	n B9·	
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source:  B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No						•			
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes X No	. D44 - January - January	P 1 1		. —	O) (D, 4000				
	B11. Indicate eleva	ition datum us	sed for BFE in Item B	9: [_] N	GVD 1929	XI NAVD 198	88 [] OI	ner/Source:	The second secon
Designation Date: CBRS OPA	B12. Is the building	located in a	Coastal Barrier Reso	urces Sy	stem (CBRS	area or Othe	erwise Prote	ected Area (C	PA)? 🗌 Yes 🗵 No
	Designation D	oate:		CBRS	☐ OPA				
		3.00							

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

IMPORTANT: In these spaces, copy the corresponding	g information from Se	ection A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/o 284 86th Street	or Bldg. No.) or P.O. Ro	oute and Box No.	Policy Number:
	ate ZIF	P Code	Company NAIC Number
Stone Harbor Ne	ew Jersey 08	247	
SECTION C – BUILDING E	LEVATION INFORMA	TION (SURVEY RE	EQUIRED)
C1. Building elevations are based on: Construct  *A new Elevation Certificate will be required when	- Internal	ilding Under Constru ding is complete.	ction* 🗵 Finished Construction
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE) Complete Items C2.a–h below according to the bui Benchmark Utilized: PID# DP1524	, VE, V1–V30, V (with I Iding diagram specified Vertical Datum	I in Item A7. In Puert	AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters.
Indicate elevation datum used for the elevations in	The state of the s	-	
☐ NGVD 1929 区 NAVD 1988 ☐ Other			
Datum used for building elevations must be the sar	ne as that used for the	BFE.	
c) Top of bottom floor (including bosomert, equals			Check the measurement used.  5.15 ⊠ feet ☐ meters
a) Top of bottom floor (including basement, crawls	pace, or enclosure floo	• • • • • • • • • • • • • • • • • • • •	11. 10.00
b) Top of the next higher floor		) <del></del>	11.30 X feet meters
<ul> <li>c) Bottom of the lowest horizontal structural memb</li> </ul>	er (V Zones only)		N/A X feet  meters
d) Attached garage (top of slab)		•	N/A
<ul> <li>e) Lowest elevation of machinery or equipment set (Describe type of equipment and location in Cor</li> </ul>	ryicing the building nments)		11.32 X feet meters
f) Lowest adjacent (finished) grade next to building	g (LAG)		3.90 X feet meters
g) Highest adjacent (finished) grade next to buildin	g (HAG)	, management of the control of the c	4.07 X feet  meters
<ul> <li>h) Lowest adjacent grade at lowest elevation of de structural support</li> </ul>	ck or stairs, including		3.67 X feet meters
SECTION D - SURVEYOR	, ENGINEER, OR AR	CHITECT CERTIFI	CATION
This certification is to be signed and sealed by a land su I certify that the information on this Certificate represent statement may be punishable by fine or imprisonment un	s my best efforts to inte	roref the data availa	law to certify elevation information. ble. I understand that any false
Were latitude and longitude in Section A provided by a li	•	⊠ Yes □ No	○ Check here if attachments.
Certifier's Name	License Number	n og Seite Meller ble det 19 ferne generale.	and the second s
Steven C. Woodrow	27514	\$599.21752.252.552 T	
Title Land Surveyor			
Company Name		and the second second	Place
Dante Guzzi Engineering Associates			Seal
Address 418 Stokes Road			Here
City Medford	State New Jersey	ZIP Code 08055	
Signature Stem C. Wooding	Date 09-03-2019	Telephone (609) 654-4440	Ext.
Copy all pages of this Elevation Certificate and all attachme	ents for (1) community of	official, (2) insurance a	agent/company, and (3) building owner.
Comments (including type of equipment and location, per The lowest equipment visible at the time of the Survey we "SMARTVENT" Model 1540-510 certified to provide 200	r C2(e), if applicable) as the HVAC units loca	ated on the exterior of	A STATE OF THE PROPERTY OF THE
DGEA Proj# C-18-486			

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

IMPORTANT: In these spaces, copy the correspond	ding information fron	Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, an 284 86th Street	id/or Bldg. No.) or P.O	Route and Box No.	Policy Number:
City Stone Harbor	State New Jersey	ZIP Code 08247	Company NAIC Number
SECTION E – BUILDING EI FOR ZON	LEVATION INFORMA IE AO AND ZONE A	ATION (SURVEY NOT (WITHOUT BFE)	REQUIRED)
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.	1–E5. If the Certificate natural grade, if availa	is intended to support a ole. Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,
E1. Provide elevation information for the following and the highest adjacent grade (HAG) and the lowest	d check the appropriate adjacent grade (LAG).	boxes to show whether	r the elevation is above or below
<ul> <li>a) Top of bottom floor (including basement, crawlspace, or enclosure) is</li> <li>b) Top of bottom floor (including basement,</li> </ul>		feet meter	s above or below the HAG.
crawlspace, or enclosure) is	<del>3 </del>	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 S	ection A Items 8 and/or	
E3. Attached garage (top of slab) is	<del> </del>	feet	s above or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is	·	feet meter	s above or below the HAG.
E5. Zone AO only: If no flood depth number is availabed floodplain management ordinance? Yes			
SECTION F - PROPERTY OW	NER (OR OWNER'S I	REPRESENTATIVE) CE	RTIFICATION
The property owner or owner's authorized representate community-issued BFE) or Zone AO must sign here. T	ive who completes Sec The statements in Sect	tions A, B, and E for Zo ons A, B, and E are cor	ne A (without a FEMA-issued or ect to the best of my knowledge.
Property Owner or Owner's Authorized Representative	e's Name		
Address	City	Sta	ate ZIP Code
Signature	Date	Те	lephone
Comments			
			:
•			
			:
			. :
			Check here if attachments.

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

IMPORTANT: In these spaces, copy the corr	esponding informatio	n from Section A.	FOR INSU	RANCE COMPANY USE
Building Street Address (including Apt., Unit, S 284 86th Street	uite, and/or Bldg. No.) (	or P.O. Route and Box N	No. Policy Num	
City Stone Harbor	State New Jersey	ZIP Code 08247	Company I	NAIC Number
SECTION	ON G - COMMUNITY I	NFORMATION (OPTIO	NAL)	
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	n Certificate, Complete t	he community's floodplathe applicable item(s) ar	ain management on nd sign below. Chec	dinance can complete ck 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 documer ed by law to certify elev	ntation that has been sig vation information. (Indic	ned and sealed by cate the source and	a licensed surveyor, date of the elevation
G2. A community official completed Section Zone AO.	ion E for a building loca	ted in Zone A (without a	FEMA-issued or c	ommunity-issued BFE)
G3.  The following information (Items G4-	-G10) is provided for co	mmunity floodplain man	agement purposes	
G4. Permit Number	G5. Date Permit Issu		G6. Date Certifica	te of cçupancy Issued
18-13058	10/2	5/18	9(2	
G7. This permit has been issued for:	New Construction	Substantial Improveme	nt	
G8. Elevation of as-built lowest floor (including of the building:	g basement)	1.30	₫ feet  meters	Datum NOVD 1988
G9. BFE or (in Zone AO) depth of flooding at t	-		feet meters	Datum NAVD 196
G10. Community's design flood elevation:	······	11.6	feet  meters	Datum 1988
Local Official's Name  MICHAELEOCHEN	3E2E	Title	etron cr	FURL
Community Name BOROUGH OF STONE!	LLARBOR	Telephone	_	
Signature		Date 9 24/1		
Comments (including type of equipment and loc	cation, per C2(e), if appl	licable)		
			Ch	eck here if attachments.

#### **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

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

IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 284 86th Street	t., 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

Photo One Caption FRONT VIEW (08/26/2019)

Clear Photo One

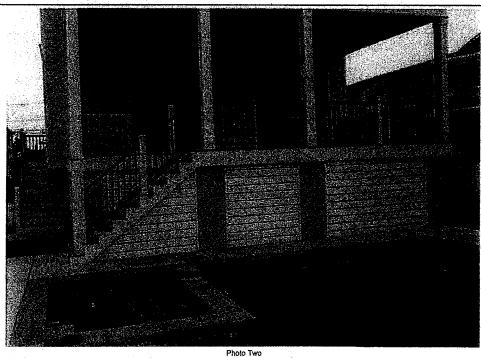


Photo Two Caption REAR VIEW (08/26/2019)

Clear Photo Two

## **BUILDING PHOTOGRAPHS**

Continuation Page

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

IMPORTANT: In these spaces, c	FOR INSURANCE COMPANY USE		
Building Street Address (including 284 86th 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.

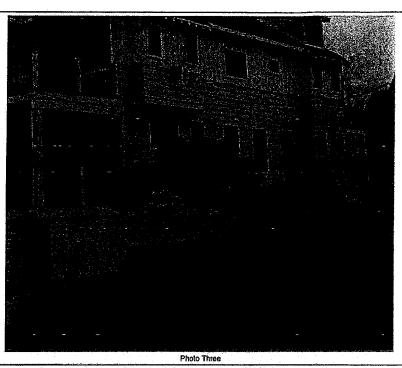


Photo Three Caption RIGHT SIDE VIEW (08/26/2019)

Clear Photo Three

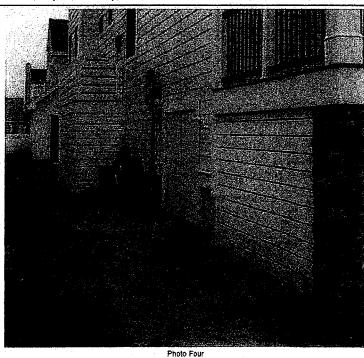


Photo Four Caption LEFT SIDE VIEW (08/26/2019)

Clear Photo Four



# **ICC-ES Evaluation Report**

### **ESR-2074**

Reissued February 2019

This report is subject to renewal February 2021.

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:

SMART VENT PRODUCTS, INC.

#### **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 FLOOD VENT SEALING KIT #1540-526

#### 1.0 EVALUATION SCOPE

#### Compliance with the following codes:

- 2018, 2015, 2012, 2009 and 2006 International Building Gode<sup>®</sup> (IBC)
- 2018, 2015, 2012, 2009 and 2006 International Residential Code (IRC)
- 2018 International Energy Conservation Code® (IECC)
- 2013 Abu Dhabi International Building Code (ADIBC)

<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® 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.

#### 3.4 Flood Vent Sealing Kit:

The Flood Vent Sealing Kit Model #1540-526 is used with SmartVENT® Model #1540-520. It is a Homesote 440 Sound Barrier® (ESR-1374) Insert with 21 — 2-Inch-by-2-Inch (51 mm x 51 mm) squares cut in it. See Figure 4.

#### 4.0 DESIGN AND INSTALLATION

#### 4.1 SmartVENT® and FloodVENT®:

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.

#### 4.2 Flood Vent Sealing Kit

The Flood Vent Sealing Kit Model 1540-526 is used in conjunction with FloodVENT® Model #1540-520. When installed and fested in accordance with ASTM E283, the FV and Flood Vent Sealing Kit assembly have an air leakage rate of less than 0.2 cubic feet per minute per lineal foot (18.56 l/min per lineal meter) at a pressure differential of 1 pound per square foot (50 Pa) based on 12.58 lineal feet (3.8 lineal meters) contained by the Flood Vent Sealing Kit.

#### 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<sup>®</sup> 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 "breakeway walls" in coastal high hazard areas, but are permitted for use in conjunction with breakeway walls in other areas.

#### 6.0 EVIDENCE SUBMITTED

- 6.1 Data in accordance with the ICC-ES Acceptance Criteria for Mechanically Operated Flood Vents (AC364), dated August 2015 (editorially revised October 2017).
- 6.2 Test report on air infiltration in accordance with ASTM E283.

#### 7.0 IDENTIFICATION

- 7.1 The Smart VENT® models and the Flood Vent Sealing Kit 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).
- 7.2 The report holder's contact information is the following:

SMART VENT PRODUCTS, INC. 430 ANDBRO DRIVE, UNIT 1 PITMAN, NEW JERSEY 08071 (877) 441-8368

www.smartvent.com
info@smartvent.com

TABLE 1-MODEL SIZES

MODEL NAME	MODEL NUMBER	MODEL SIZE (in.)	COVERAGE (sq. ft.)	
FloodVENT®	1540-520	15 <sup>3</sup> /₄" X 7 <sup>3</sup> /₄"	200	
Smart/ENT <sup>©</sup>	1540-510	15 <sup>3</sup> / <sub>4</sub> " × 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 <sup>®</sup> Stacker	1540-521	16" X 16"	400	

For SI: 1 inch = 25.4 mm; 1 square foot =  $m^2$ 

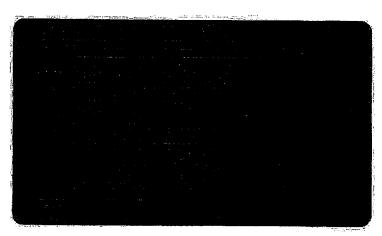


FIGURE 1-SMART VENT: MODEL 1540-510