## 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      |    |      |
|------------------------|----|------|
| TANTEON PAGE: NOVEMBER | 34 | 2018 |
|                        |    |      |
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| 001 2 0 2017           | ע  |      |

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

| SECTION A - PROPERTY INFORMATION   | I DV              | PANCE COMPANY LISE                                    |  |
|--|-------------------|---|--|
| A1. Building Owner's Name  |                   | FOR INSURANCE COMPANY USE Policy Number:              |  |
| John & Michele Cappello  |                   |   |  |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.                        | Company N         | IAIC Number:  |  |
| 101 N. Argyle Avenue   |                   |   |  |
| City State City of Margate New Jersey  | ZIP Code<br>08402 |   |  |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)                                 | 00402             |   |  |
| Lot 5 Block 301  |                   |   |  |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential                                 |                   |   |  |
| A5. Latitude/Longitude: Lat. 39°20'07.06" Long. 74°29'44.09" Horizontal Datur  | n: NAD 1          | 1927 🛛 NAD 1983                                       |  |
| A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insur                     | ance.             |   |  |
| A7. Building Diagram Number8_  |                   |   |  |
| A8. For a building with a crawlspace or enclosure(s):  |                   |   |  |
| a) Square footage of crawlspace or enclosure(s)sq ft   |                   |   |  |
| b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above                                | adjacent gr       | ade8  |  |
| c) Total net area of flood openings in A8.b 860 sq in  |                   |   |  |
| d) Engineered flood openings? 🛛 Yes 🗌 No   |                   |   |  |
| A9. For a building with an attached garage:  |                   |   |  |
| a) Square footage of attached garage sq ft   |                   |   |  |
| b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent                                  | grade             |   |  |
| c) Total net area of flood openings in A9.b sq in  | ,                 |   |  |
| d) Engineered flood openings?  |                   |   |  |
|  |                   |   |  |
| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMA  | TION              | 1   |  |
| B1. NFIP Community Name & Community Number  B2. County Name  |                   | B3. State   |  |
| City of Margate / 345304 Atlantic County   |                   | New Jersey  |  |
| B4. Map/Panel Number B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Revised Date B8. Flood Zone(s                  | (Zoi              | se Flood Elevation(s)<br>ne AO, use Base<br>od Depth) |  |
| 34001/C0434 F 10/18/1983 10/18/1983 A8   | 1100              | 10.0'   |  |
| 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 |                   |   |  |
| Designation Date: CBRS DPA   |                   |   |  |
|  |                   | J.  |  |

## **ELEVATION CERTIFICATE**

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

| IMPORTANT: In these spaces, copy the corresponding  | FOR INSURANCE COMPANY USE  |                             |   |  |  |  |
|---|----------------------------|-----------------------------|---|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 101 N. Argyle Avenue  |                            |                             | Policy Number:  |  |  |  |
| y State ZIP Code<br>y of Margate New Jersey 08402   |                            | Company NAIC Number         |   |  |  |  |
| SECTION C - BUILDING EL   | EVATION INFORMA            | TION (SURVEY RI             | EQUIRED)  |  |  |  |
| C1. Building elevations are based on: Construction Drawings* Building Under Construction* X 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: Smart Net Vertical Datum: NAVD 88  |                            |                             |   |  |  |  |
| Indicate elevation datum used for the elevations in it  | Source:                    |                             |   |  |  |  |
| Datum used for building elevations must be the sam  | e as that used for the     | BFE.                        | Check the measurement used.   |  |  |  |
| a) Top of bottom floor (including basement, crawlsp   | ace, or enclosure floo     | r)6. 9                      |   |  |  |  |
| b) Top of the next higher floor   |                            | <u>13</u> . <u>3</u>        | x feet meters   |  |  |  |
| c) Bottom of the lowest horizontal structural member  | er (V Zones only)          | N/A                         | x feet meters   |  |  |  |
| d) Attached garage (top of slab)  |                            | N/A                         | x feet meters   |  |  |  |
| <ul> <li>e) Lowest elevation of machinery or equipment sen<br/>(Describe type of equipment and location in Com</li> </ul>   | vicing the building ments) | 12. 8                       | x feet meters   |  |  |  |
| f) Lowest adjacent (finished) grade next to building  | (LAG)                      | <u>6</u> . <u>7</u>         | X feet meters   |  |  |  |
| g) Highest adjacent (finished) grade next to building   | (HAG)                      | 6.9                         | x feet meters   |  |  |  |
| <ul> <li>h) Lowest adjacent grade at lowest elevation of dec<br/>structural support</li> </ul>  | k or stairs, including     | 6. 7                        | x feet meters   |  |  |  |
| SECTION D - SURVEYOR,   | ENGINEER, OR AR            | CHITECT CERTIF              | ICATION   |  |  |  |
| 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  | my best efforts to inte    | rpret the data availa       | r law to certify elevation information.<br>Inble. I understand that any false |  |  |  |
| Were latitude and longitude in Section A provided by a lice   | censed land surveyor?      | ⊠Yes □ No                   |   |  |  |  |
| Certifier's Name<br>Robert L. Vallee, PLS   | License Number<br>43276    |                             |   |  |  |  |
| Title<br>Land Surveyor  |                            |                             | ,   |  |  |  |
| Company Name<br>Vallee Surveying, Inc   |                            |                             | Place<br>Seal   |  |  |  |
| Address<br>1010 Commons Way   |                            |                             | Here  |  |  |  |
| City<br>Toms River  | State<br>New Jersey        | ZIP Code<br>08755           |   |  |  |  |
| Signature Robert VI   | Date<br>06/23/2017         | Telephone<br>(732) 244-2373 |   |  |  |  |
| Copy all pages of this Elevation Certificate and all attachme   | nts for (1) community of   | official, (2) insurance     | agent/company, and (3) building owner.  |  |  |  |
| Comments (including type of equipment and location, per C2(e), if applicable)  A/C on platform at elev. 12.8'. EM at elev. 11.8'. Flood Solutions LLC-Model FS-1608-HEX (Rated 110 sq. ft.) A conversion factor of +1.296 from NAVD88 to NGVD29 was applied to all elevations. ***Preliminary Updated FEMA Flood Hazard Data BFE=AE9(NAVD88). Release date 5/30/14*** This information is to be used for insurance purposes only. |                            |                             |   |  |  |  |
|   |                            |                             |   |  |  |  |

## **ELEVATION CERTIFICATE**

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

| IMPORTANT: In these spaces, copy the corresponding information from Section A.  |  |  |  |  | CE COMPANY USE   |  |
|---|--|--|--|--|--|--|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.   |  |  |  |  |  |  |
| 101 N. Argyle Avenue  |  |  |  | ***************************************  | Annual Control of the |  |
| City City of Margate  | State<br>New Jersey  | ZIP Code<br>08402  |  | Company NAIC                             | Number   |  |
| SECTION E – BUILDING  | Marine Committee of the | · · · · · · · · · · · · · · · · · · ·  | VEY NOT  | PEOLIBED)                                |  |  |
|   | ONE AO AND ZO  |  |  | NEGOINED)                                |  |  |
| 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 the highest adjacent grade (HAG) and the low  | and check the approvest adjacent grade (   | opriate boxes to sho<br>LAG).  | ow whether   | the elevation is                         | above or below   |  |
| <ul> <li>Top of bottom floor (including basement,<br/>crawlspace, or enclosure) is</li> </ul>   |  | feet   | meters   | above or                                 | below the HAG.   |  |
| <ul> <li>Top of bottom floor (including basement,<br/>crawlspace, or enclosure) is</li> </ul>   |  | feet   | meters   | above or                                 | below the LAG.   |  |
| E2. For Building Diagrams 6–9 with permanent flo<br>the next higher floor (elevation C2.b in<br>the diagrams) of the building is  | ood openings provide   | d in Section A Item  |  |  | 2 of Instructions),  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   | nt   | feet   | meters   | above or                                 | below the HAG.   |  |
| E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes  | ailable, is the top of t   | ne bottom floor elev<br>own. The local off   | vated in acc<br>ficial must c                      | cordance with the<br>ertify this informa | e community's<br>ation in Section G.   |  |
| SECTION F - PROPERTY  | OWNER (OR OWN  | R'S REPRESENT  | ATIVE) CE  | RTIFICATION                              |  |  |
| The property owner or owner's authorized represe community-issued BFE) or Zone AO must sign her   | ntative who complete<br>re. The statements in  | es Sections A, B, and<br>Sections A, B, and  | nd E for Zor<br>d E are corr                       | ne A (without a F<br>ect to the best o   | EMA-issued or f my knowledge.  |  |
| Property Owner or Owner's Authorized Representa   | ative's Name   | water and the second se | tenne en se en |  | and the second s |  |
| Address   |  | City   | Sta  | ite                                      | ZIP Code   |  |
| Signature   |  | Date   | Tel  | ephone                                   |  |  |
| Comments  |  |  |  |  |  |  |
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## **ELEVATION CERTIFICATE**

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

| IMPORTANT: In these spaces, copy the corre  | FOR INSURANCE COMPANY USE  |   |  |  |  |  |
|---|--|---|--|--|--|--|
| Building Street Address (including Apt., Unit, St. 101 N. Argyle Avenue   | x No. Policy Number:   |   |  |  |  |  |
| City of Margate   | State ZIP Code<br>New Jersey 08402   | Company NAIC Number   |  |  |  |  |
| SECTIO  | N G - COMMUNITY INFORMATION (OPT   | IONAL)  |  |  |  |  |
| Sections A, B, C (or E), and G of this Elevation  | The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters. |   |  |  |  |  |
| G1. The information in Section C was take engineer, or architect who is authorize data in the Comments area below.) | en from other documentation that has been<br>ed by law to certify elevation information. (In   | signed and sealed by a licensed surveyor, dicate the source and date of the elevation |  |  |  |  |
| G2. A community official completed Section or Zone AO.  | on E for a building located in Zone A (withou  | it a FEMA-issued or community-issued BFE)   |  |  |  |  |
| G3. The following information (Items G4–  | G10) is provided for community floodplain m  | nanagement purposes.  |  |  |  |  |
| G4. Permit Number   | G5. Date Permit Issued   | G6. Date Certificate of Compliance/Occupancy Issued                                   |  |  |  |  |
| G7. This permit has been issued for:  | New Construction  Substantial Improve  | ment  |  |  |  |  |
| G8. Elevation of as-built lowest floor (including of the building:  | basement)  | feet meters Datum   |  |  |  |  |
| G9. BFE or (in Zone AO) depth of flooding at t  | he building site:  | feet meters Datum   |  |  |  |  |
| G10. Community's design flood elevation:  | ***************************************  | feet meters Datum   |  |  |  |  |
| Local Official's Name JIM GALANTINO   | Title<br>CFM   |   |  |  |  |  |
| Community Name  | Telephone  |   |  |  |  |  |
| CITY OF MARGATE   | 609-822-   | 1974  |  |  |  |  |
| Signature Date  |  |   |  |  |  |  |
| Comments (including type of equipment and loc   | ation, per C2(e), if applicable)   |   |  |  |  |  |
| t   |  |   |  |  |  |  |
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|   |  | 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                            | FOR INSURANCE COMPANY USE |                   |                     |
| Building Street Address (including A 101 N. Argyle Avenue | Policy Number:            |                   |                     |
| City City of Margate                                      | State<br>New Jersey       | ZIP Code<br>08402 | Company NAIC Number |
| ,   |                           | 00402             |                     |

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 (6/22/17)



Photo Two

Photo Two Caption Rear View (6/22/17)

#### **BUILDING PHOTOGRAPHS**

### **ELEVATION CERTIFICATE**

Continuation Page

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

| IMPORTANT: In these spaces, copy                           | FOR INSURANCE COMPANY USE |                   |                     |
|--|---------------------------|-------------------|---------------------|
| Building Street Address (including Ap 101 N. Argyle Avenue | Policy Number:            |                   |                     |
| City<br>City of Margate                                    | State<br>New Jersey       | ZIP Code<br>08402 | Company NAIC Number |

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.

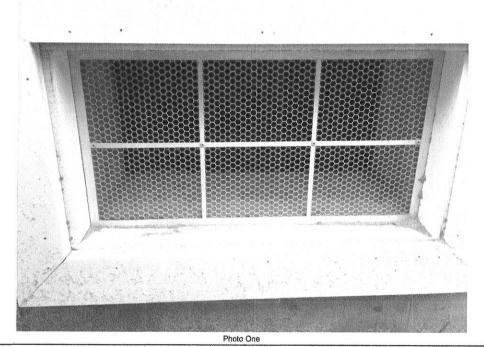


Photo One Caption Flood Vent (6/22/17)

Photo Two

Photo Two

Photo Two Caption



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## **ICC-ES Report**

ICC-ES | (800) 423-6587 | (562) 699-0543 | www.icc-es.org

**ESR-3760** 

Reissued 03/2015 This report is subject to renewal 03/2016

**DIVISION: 08 00 00—OPENINGS** 

SECTION: 08 95 43—VENTS/FOUNDATION FLOOD VENTS

#### **REPORT HOLDER:**

## FLOOD SOLUTIONS, LLC

ONE INDUSTRIAL PARK DRIVE, BUILDING 27 PELHAM, NEW HAMPSHIRE 03076

**EVALUATION SUBJECT:** 

STATIC FLOOD VENTS



Look for the trusted marks of Conformity!

"2014 Recipient of Prestigious Western States Seismic Policy Council (WSSPC) Award in Excellence"





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## **ICC-ES Evaluation Report**

**ESR-3760** 

Issued March 2015

This report is subject to renewal March 2016.

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**DIVISION: 08 00 00—OPENINGS** 

Section: 08 95 43—Vents/Foundation Flood Vents

#### REPORT HOLDER:

FLOOD SOLUTIONS, LLC
ONE INDUSTRIAL PARK DRIVE
BUILDING 27
PELHAM, NEW HAMPSHIRE 03076
(800) 325-9775
www.floodsolutions.com
info@floodsolutions.com

#### **EVALUATION SUBJECT:**

#### STATIC FLOOD VENTS

#### 1.0 EVALUATION SCOPE

#### Compliance with the following codes:

- 2015, 2012 and 2009 International Building Code®
- 2015, 2012 and 2009 International Residential Code®

#### Property evaluated:

Water flow

#### 2.0 USES

Flood Solutions' static flood vents are used to provide for the equalization of hydrostatic flood forces on exterior walls.

#### 3.0 DESCRIPTION

#### 3.1 General:

Flood Solutions' static flood vents are engineered, permanently open flood vents with no moving parts that automatically allow flood waters to enter and exit enclosed areas. The vents are constructed of aluminum and available in four models. See Table 1 for model designations and sizes. See Figure 1 for illustrations of the flood vents.

#### 3.2 Engineered Opening:

The Flood Solutions static flood vents comply with the design principle noted in Section 2.6.2.2 of ASCE/SEI 24 for a rate of rise and fall of 5 feet per hour (0.423 mm/s). In order to comply with the engineered opening requirement of ASCE/SEI 24, the static flood vents must be installed in accordance with Section 4.0 of this report.

#### 3.3 Ventilation:

Flood Solutions' static flood vents may be used to supply natural ventilation for under-floor ventilation. See Table 1

for net free area for under-floor ventilation provided by each of Flood Solutions' static flood vents.

#### 4.0 DESIGN AND INSTALLATION

The Flood Solutions static flood vents are designed to be installed into walls or 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. In order to comply with the engineered opening design principle noted in Section 2.6.2.2 of ASCE/SEI 24, the vents must be installed as follows:

- With a minimum of two opening on different sides of each enclosed area.
- With a minimum of one vent for the square footage of enclosed area noted in Table 1.
- · Below the base flood elevation.
- With the bottom of the vent located a maximum of 12 inches (305 mm) above grade.

#### 5.0 CONDITIONS OF USE

The static flood vents described in this report comply with, or are a suitable alternative to what is specified in, those codes listed in Section 1.0 of this report, subject to the following conditions:

- **5.1** The static flood vents 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 static flood vents 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

- **6.1** Manufacturer's descriptive literature and installation instructions.
- 6.2 Detail drawings.
- 6.3 Engineering calculations in accordance with ASCE/SEI 24.
- **6.4** Quality documentation in accordance with the ICC-ES Acceptance Criteria for Quality Documentation (AC10), dated June 2014.

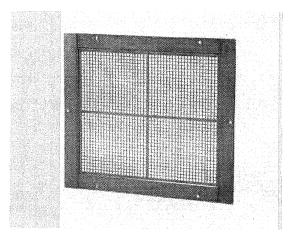
#### 7.0 IDENTIFICATION

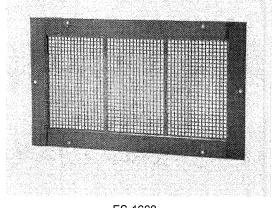
The Flood Solutions static flood vents recognized in this report must be identified by a label bearing the manufacturer's name (Flood Solutions), the model number, and the evaluation report number (ESR-3760).

TABLE 1—FLOOD SOLUTIONS STATIC FLOOD VENTS

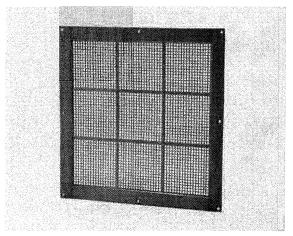
| MODEL       | VENT SIZE<br>(Width x Height)<br>(in) | ROUGH OPENING<br>SIZE<br>(Width x Height)<br>(in) | ENCLOSED<br>AREA COVERAGE<br>(ft²) | NET FREE AREA <sup>1</sup><br>(in <sup>2</sup> ) |
|-------------|---------------------------------------|---|------------------------------------|--|
| FS-1608     | $18^{1}/_{2} \times 10^{1}/_{2}$      | 16 x 8  | 97                                 | 80.7   |
| FS-1616     | $18^{1}/_{2} \times 18^{1}/_{2}$      | 16 x 16   | 191                                | 158.2  |
| FS-1412     | 17 x 14 <sup>1</sup> / <sub>2</sub>   | 14 <sup>1</sup> / <sub>2</sub> x 12               | 129                                | 106.7  |
| FS-1608-Hex | $18^{1}/_{2} \times 10^{1}/_{2}$      | 16 x 8  | 110                                | 91.4   |

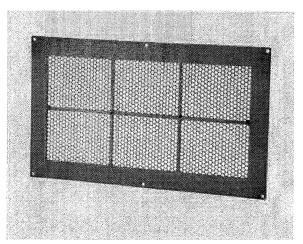
For **SI:** 1 inch = 25.4 mm; 1 ft = 304.8 mm <sup>1</sup>Available for use as under-floor ventilation.





FS-1412 FS-1608





FS-1616 FS-1608-HEX

FIGURE 1—FLOOD SOLUTIONS STATIC FLOOD VENTS



## **ICC-ES Evaluation Report**

## **ESR-3760 FBC Supplement**

Issued March 2015
This report is subject to renewal March 2016.

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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:

FLOOD SOLUTIONS, LLC
ONE INDUSTRIAL PARK DRIVE
BUILDING 27
PELHAM, NEW HAMPSHIRE 03076
(800) 325-9775
www.floodsolutions.com
info@floodsolutions.com

#### **EVALUATION SUBJECT:**

#### STATIC FLOOD VENTS

#### 1.0 REPORT PURPOSE AND SCOPE

#### Purpose:

The purpose of this evaluation report supplement is to indicate that Flood Solutions' flood vents, recognized in ICC-ES master evaluation report ESR-3760, have also been evaluated for compliance with the codes noted below.

#### Applicable code editions:

- 2014 Florida Building Code—Building (FBC)
- 2010 Florida Building Code—Building (FBC)
- 2014 Florida Building Code—Residential (FRC)
- 2010 Florida Building Code—Residential (FRC)

#### 2.0 CONCLUSIONS

The Flood Solutions flood vents, described in Sections 2.0 through 7.0 of the master evaluation report ESR-3760, comply with the FBC and the FRC, provided the design and installation are in accordance with the *International Building Code* (IBC) provisions noted in the master report.

Use of the Flood Solutions' 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 2010 FBC Section 2326.1 or 2010 FRC 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, issued March 2015.