U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

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ELEVATION CERTIFICATE

A1. Building Owner	SECTION A PROPERTY INFORMATION					FOR INSURANCE COMPANY USE	
A1. Building Owner's Name Bendyl Development					Policy Number:		
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. #13 North Benson Avenue Unit #A 						Company NAIC Number:	
City CITY OF MARG	ATE			State New Jersey		ZIP Code 08402	1999-11
A3. Property Descr Block 224.01 Lot 79		Block Numbers, Ta	ax Parcel	Number, Legal De	scription, etc.)		
A4. Building Use (e	.g., Residentia	al, Non-Residential,	Addition,	Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Longitu	ude: Lat. <u>39.3</u>	3235	Long74	4.5132	Horizontal Datun	n: 🗌 NAD 1	927 🗙 NAD 1983
A6. Attach at least 2	2 photographs	of the building if th	e Certifica	ate is being used to	o obtain flood insur	ance.	
A7. Building Diagra	m Number	6					
A8. For a building w	/ith a crawlspa	ace or enclosure(s):					
a) Square foota	age of crawlsp	ace or enclosure(s)) 1	,711 sq ft			
b) Number of p	ermanent floo	d openings in the c	rawlspace	or enclosure(s) w	ithin 1.0 foot above	e adjacent gra	ade 10
c) Total net are	a of flood ope	nings in A8.b 2,	000 so	ą in			
d) Engineered	flood opening:	s? 🛛 Yes 🔲 I	No				
A9. For a building w	ith an attache	d garage:					
		d garage 0		a ft			
		od openings in the a		•	ot abovo adiacont	arado	0
b) Number of p					ot above adjacent (0
	a of flood ope	nings in A9.b	0	sq in			
c) Total net are			No				
		s? 🗌 Yes 🔀 I	NU				
	flood opening:						
d) Engineered	flood openings	TION B – FLOOD				ATION	B3. State
	flood openings SEC y Name & Cor	TION B – FLOOD		NCE RATE MAP B2. County Name ATLANTIC COUN)	ATION	B3. State New Jersey
d) Engineered B1. NFIP Communit CITY OF MARGATE	flood openings SEC y Name & Cor E & 34530	TION B – FLOOD mmunity Number 04	INSURA	B2. County Name ATLANTIC COUN	ITY		New Jersey
d) Engineered B1. NFIP Communit CITY OF MARGATE	flood openings SEC y Name & Cor E & 34530	TION B – FLOOD	INSURAI	B2. County Name)	s) B9. Bas (Zoi	New Jersey e Flood Elevation(s) ne AO, use Base
 d) Engineered B1. NFIP Communit CITY OF MARGATE 4. Map/Panel 	flood openings SEC y Name & Cor E & 34530 B5. Suffix	TION B – FLOOD mmunity Number 04 B6. FIRM Index	INSURAI	B2. County Name ATLANTIC COUN RM Panel ective/ vised Date	ITY	s) B9. Bas (Zoi	New Jersey e Flood Elevation(s)
d) Engineered B1. NFIP Communit CITY OF MARGATE 4. Map/Panel Number 4001C0434 B10. Indicate the so	flood openings SEC y Name & Cor E & 34530 B5. Suffix F F	TION B – FLOOD mmunity Number 4 B6. FIRM Index Date 08/28/2018	B7. FII B7. FII Eff Re 08/28/	B2. County Name ATLANTIC COUN RM Panel ective/ vised Date 2018 ta or base flood de	ITY B8. Flood Zone(s AE	s) B9. Bas (Zor Floo 9	New Jersey e Flood Elevation(s) ne AO, use Base

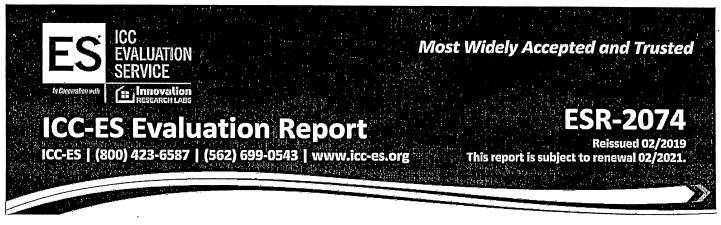
MPORTANT: In	these spaces, copy the	correspondin	ig information fro	m Section	Α.	F	FOR INSURANCE COMPANY		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box P No. #13 North Benson Avenue Unit #A					Policy Number:				
City			tate	ZIP Cod	Э	С	ompany NAIC	C Number	
CITY OF MARG	ATE	Ne	ew Jersey	08402					
	SECTION C -	BUILDING E	LEVATION INFO	RMATION	(SURVE	Y REQ	UIRED)		
5	evations are based on: evation Certificate will be r	_	tion Drawings* [construction of the	_ •			on* 🗙 Fin	ished Construct	
C2. Elevations Complete	– Zones A1–A30, AE, AH Items C2.a–h below acco	I, A (with BFE) ding to the bu), VE, V1–V30, V (ilding diagram spe	with BFE), cified in Ite	AR, AR/A m A7. In I	, AR/AE Puerto F	, AR/A1–A30 Rico only, ente	, AR/AH, AR/A0 er meters.	
Benchmar	k Utilized: private		Vertical D	atum: <u>NA\</u>	/D88				
	evation datum used for the			ı) below.					
	NGVD 1929 🔀 NAVD 19								
Datum use	d for building elevations n	nust be the sa	me as that used fo	r the BFE.			Check the r	neasurement us	
a) Top of	bottom floor (including bas	sement, crawls	space, or enclosure	e floor)	5	5	X fee		
<i>,</i> .	the next higher floor	,		,	13		X fee	_	
, .	of the lowest horizontal st	ructuralmam	ner (V Zones only)		N/A		🔀 fee		
	ed garage (top of slab)				N/A		X fee		
,			un dialana dha ha dilalin.		12	 N	_		
e) Lowest (Descri	elevation of machinery or be type of equipment and	location in Co	mments)			<u> </u>	X fee	t 📋 meters	
f) Lowest	adjacent (finished) grade	next to buildin	ıg (LAG)	proposition of	4.	8	X fee	t 🔲 meters	
g) Highes	t adjacent (finished) grade	next to buildir	ng (HAG)		5.	2	X fee	t 🔲 meters	
h) Lowest structu	adjacent grade at lowest al support	elevation of de	eck or stairs, inclue	ling	<u> 4</u> . (б	X fee	t 🔲 meters	
	SECTION D -	- SURVEYOF	R, ENGINEER, OI	R ARCHIT	ECT CE	RTIFICA			
I certify that the	n is to be signed and seal information on this Certifi be punishable by fine or i	cate represen	ts my best efforts t	o interpret	the data a	ed by la available	w to certify el e. I understan	evation informat d that any false	
	nd longitude in Section A				_	No	🗙 Check h	ere if attachmer	
Certifier's Name			License Number						
Paul M. Koellin	J, PLS, CFM		NJ24GS 04328	5000					
Title Licensed Land	Survevor								
Company Name	-		*****				F	lace	
	Paul Koelling & Associates, LLC NJ C.O.A. No. 24GA28256300							Seal	
Address							I	Here	
2161 Shore Ro	ad								
City			State	ZIF	P Code				
Linwood		de la compañía de la	New Jersey	08	221				
Signature	Tay Ofer		Date		ephone 9) 927-02	279			
Copy all pages of	f this Elevation Certificate	and all attachm	· · · · · · · · · · · · · · · · · · ·	inity official	(2) insura	ance age	ent/company.	and (3) building	
Comments (incl	uding type of equipment a ents Model #1540-570 eng	nd location, p	er C2(e), if applica	ble)					
**C2a.) enclosu	re (1,711 sq ft) (elev 5.5)	elevator sh	afts (50 sq. ft.) (ele	ev 4.2)					
	r air unit (elev 12.7)furr								

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ELEVATION CERTIFICATE			OMB No. 1660-0008 Expiration Date: November 30, 2018				
IMPORTANT: In these spaces, copy the correspon	nding informatior	from Section A.	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, a #13 North Benson Avenue Unit #A			Policy Number:				
City CITY OF MARGATE	State New Jersey	ZIP Code 08402	Company NAIC Number				
SECTION E – BUILDING I		ORMATION (SURVEY NO	T REQUIRED)				
FOR ZO	NE AO AND ZON	IE A (WITHOUT BFE)					
For Zones AO and A (without BFE), complete Items complete Sections A, B,and C. For Items E1–E4, use enter meters.							
 E1. Provide elevation information for the following a the highest adjacent grade (HAG) and the lowes a) Top of bottom floor (including basement, 			her the elevation is above or below				
crawlspace, or enclosure) is b) Top of bottom floor (including basement,		feet me	ters above or below the HAG.				
crawlspace, or enclosure) is		feet 🗌 me	ters above or below the LAG.				
E2. For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in	d openings provide	d in Section A Items 8 and/	or 9 (see pages 1–2 of Instructions),				
the diagrams) of the building is	·	feet 🗌 me	ters above or below the HAG.				
E3. Attached garage (top of slab) is	······································	feet 🗌 me	ters above or below the HAG.				
E4. Top of platform of machinery and/or equipment servicing the building is		feet 🗌 me	ters 🔲 above or 🗌 below the HAG.				
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.							
SECTION F – PROPERTY O	WNER (OR OWNE	ER'S REPRESENTATIVE)	CERTIFICATION				
The property owner or owner's authorized representa community-issued BFE) or Zone AO must sign here.	ative who complete The statements in	es Sections A, B, and E for Sections A, B, and E are o	Zone A (without a FEMA-issued or correct to the best of my knowledge.				
Property Owner or Owner's Authorized Representativ	ve's Name						
Address		City	State ZIP Code				
Signature		Date	Telephone				
Comments							
			Check here if attachments.				

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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 No. #13 North Benson Avenue Unit#A	Policy Number:						
City CITY OF MARGATE	State New Jersey	ZIP Code 08402	Company NAIC Number				
	ON G – COMMUNITY IN						
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	dinance to administer th Certificate. Complete th	ne community's floodpla	ain management ordinance can complete				
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)							
G2. A community official completed Section or Zone AO.	ion E for a building locat	ed in Zone A (without a	a FEMA-issued or community-issued BFE)				
G3. The following information (Items G4–	-G10) is provided for co	nmunity floodplain mar	nagement purposes.				
G4. Permit Number	G5. Date Permit Issue	əd	G6. Date Certificate of Compliance/Occupancy Issued				
G7. This permit has been issued for:	New Construction	Substantial Improveme	ent				
G8. Elevation of as-built lowest floor (including of the building:	g basement)		feet meters Datum				
G9. BFE or (in Zone AO) depth of flooding at	the building site:		feet meters Datum				
G10. Community's design flood elevation:			feet meters Datum				
Local Official's Name	J. ~ Galant.	Title (\mathcal{A})	M				
Community Name	CATE	Telephone	609-882-1974				
	.cote	Date 9	609.822.1974 /13/15				
Comments (including type of equipment and loo	cation, per C2(e), if appl	icable)					
2							
			Check here if attachments.				



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



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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 Code[®] (IBC)
- 2018, 2015, 2012, 2009 and 2006 International *Residential Code*[®] (IRC)
- 2018 International Energy Conservation Code[®] (IECC)
- 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.

Reissued February 2019 This report is subject to renewal February 2021.

A Subsidiary of the International Code Council®

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 Homasote 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

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feet (18.6 m^2) 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 m^2) 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 tested 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[®] 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

- 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 <u>www.smartvent.com</u> <u>info@smartvent.com</u>

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

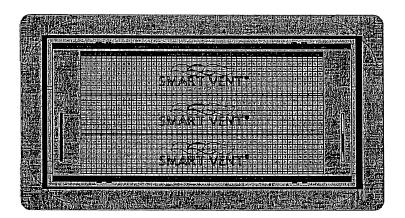


FIGURE 1-SMART VENT: MODEL 1540-510

Building Photographs

	For Insurance Company Use:		
Building Street Address (inclu #13 North Benson A	Policy Number		
City Margate	State New Jersey	ZIP Code 08402	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.



Front View – Date of Photograph: (See Photo Stamp)

Rear View – Date of Photograph: (See Photo Stamp)



Right Side View – Date of Photograph: (See Photo Stamp)