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

OMB No. 1660-0008

Expiration Date: November 30, 2022

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.

SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE			
A1. Building Owner's Name	Policy Number:			
NEEL				
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 8014 MONMOUTH AVENUE 	Company NAIC Number:			
City State MARGATE New Jersey	ZIP Code 08402			
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.				
BLOCK 308, LOT 13				
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENT	IAL			
A5. Latitude/Longitude: Lat. 39° 19' 57" Long. 74° 30' 09" 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 Number7				
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 a	above adjacent grade 8			
c) Total net area of flood openings in A8.b sq in				
d) Engineered flood openings? X 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 adja-	cent grade N/A			
c) Total net area of flood openings in A9.b N/A sq in				
d) Engineered flood openings?				
OFOTION D. EL COD INCUDANCE DATE MAD (FIRM) INIC	DEMATION			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFO				
B1. NFIP Community Name & Community Number MARGATE CITY 345304 B2. County Name ATLANTIC COUNTY	B3. State New Jersey			
B4. Map/Panel B5. Suffix B6. FIRM Index Date B7. FIRM Panel Effective/ Effective/ Provinced Date	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)			
34001C0434 F 08-28-2018 Revised Date 08-28-2018 AE	8			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:				
FIS Profile X FIRM Community Determined Other/Source:				
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:				
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes X No				
Designation Date: CBRS DPA				
· · · · · · · · · · · · · · · · · · ·				

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

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. 8014 MONMOUTH AVENUE				Policy Number:	
City MARGATE	State New Jersey	ZIP Code 08402	Compan	ny NAIC Number	
SECTION C – BUIL	DING ELEVATION INFO	RMATION (SURVEY R	EQUIRE	D)	
C1. Building elevations are based on: C1. Building elevations are based on: C2. Elevations – Zones A1–A30, AE, AH, A (w1) Complete Items C2.a–h below according to	ed when construction of the vith BFE), VE, V1–V30, V (with BFF) AR AR/A AR	/AF AR/A	★ Finished Construction ↓ A30, AR/AH, AR/AO.	
Benchmark Utilized:		etum: NAVD 1988	O RICO OII	ry, enter meters.	
Indicate elevation datum used for the elevation 1929 ☐ NGVD 1929 ☐ NAVD 1988 [Other/Source:	,			
Datum used for building elevations must be	e the same as that used for	r the BFE.	Chec	k the measurement used.	
 a) Top of bottom floor (including basement 	t, crawlspace, or enclosure	e floor)		x feet meters	
b) Top of the next higher floor		-	<u>16.3</u>	x feet meters	
c) Bottom of the lowest horizontal structure	al member (V Zones only)			x feet meters	
d) Attached garage (top of slab)			7.1	x feet meters	
 e) Lowest elevation of machinery or equip (Describe type of equipment and location 	ment servicing the building on in Comments)			x feet meters	
f) Lowest adjacent (finished) grade next to	• ,		5.7	x feet meters	
g) Highest adjacent (finished) grade next t			7.1	x feet meters	
h) Lowest adjacent grade at lowest elevati structural support	on of deck or stairs, includ	ing	6.1	x feet meters	
	VEYOR, ENGINEER, OF	·			
This certification is to be signed and sealed by a I certify that the information on this Certificate re statement may be punishable by fine or imprison	epresents mv best efforts to	o interpret the data availa	law to ce ble. I unde	rtify elevation information. erstand that any false	
Were latitude and longitude in Section A provide	ed by a licensed land surve	yor? 🗵 Yes 🗌 No	☐ Ch	neck here if attachments.	
Certifier's Name DANIEL J. PONZIO, SR.	License Numbe GS37603	Г		1.	
Title PROFESSIONAL LAND SURVEYOR				Place	
Company Name ARTHUR W. PONZIO COMPANY & ASSOCIAT	ES, INC.		1	Seal	
Address 400 NORTH DOVER AVENUE			1	Here	
City ATLANTIC CITY	State New Jersey	ZIP Code 08401			
Signature WWW A	Date 04-21-2021	Telephone (609) 344-8194	Ext.		
Copy all bages of this Elevation Continued and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.					
Comments (including type of equipment and location, per C2(e), if applicable)					
	TVENT MODEL NO.: 154	0-520			
HEATER: 16.32'					
DUCTS: 14.76'					

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the correspondin	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/o 8014 MONMOUTH AVENUE	or Bldg. No.) or P.O. Ro	ute and Box No.	Policy Number:	
	ate ZIP ew Jersey 084	Code 02	Company NAIC Number	
SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)				
FOR ZONE AO AND ZONE A (WITHOUT BFE) 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 and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or enclosure) is				
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Sections statements in Sections	s A, B, and E for Zo A, B, and E are corr	ne A (without a FEMA-issued or ect to the best of my knowledge.	
Property Owner or Owner's Authorized Representative's I	Name			
Address	City	Sta	te ZIP Code	
Signature	Date	Tel	ephone	
Comments			☐ Check here if attachments.	
			Chock hold it attachments.	

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corr			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Standard MONMOUTH AVENUE	uite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City MARGATE	State New Jersey	ZIP Code 08402	Company NAIC Number
SECTIO	ON G COMMUNITY IN	FORMATION (OPTIONAL)	
The local official who is authorized by law or or Sections A, B, C (or E), and G of this Elevation used in Items G8–G10. In Puerto Rico only, en	Certificate. Complete the ter meters.	e applicable item(s) and sig	n below. Check the measurement
G1. The information in Section C was take engineer, or architect who is authorized data in the Comments area below.)	ed by law to certify eleva	ition information. (Indicate t	ne source and date of the elevation
G2. A community official completed Section or Zone AO.			•
G3. The following information (Items G4–	G10) is provided for com	munity floodplain managen	nent purposes.
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued
G7. This permit has been issued for:	New Construction S	Substantial Improvement	
G8. Elevation of as-built lowest floor (including of the building:	basement)		t
G9. BFE or (in Zone AO) depth of flooding at the	he building site:	fee	meters Datum
G10. Community's design flood elevation:			t meters Datum
Local Official's Name	n Galantone	Title	
Community Name	n Galantine	Telephone	22-1912
Signature		Date	12/2
Comments (including type of equipment and local	ation, per C2(e), if application	able)	, , , , , , , , , , , , , , , , , , , ,
			Chock hors if street-
			Check here if attachments.

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy t	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 8014 MONMOUTH AVENUE			p. 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 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.

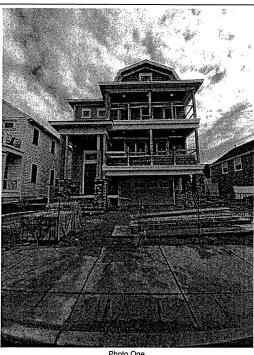


Photo One

FRONT VIEW 04-21-2021 Photo One Caption

Clear Photo One

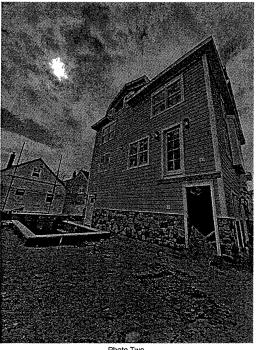


Photo Two

Photo Two Caption REAR VIEW 04-21-2021

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008

Expiration Date: November 30, 2022

			Expiration Bate. November 30, 2022
IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Ap 8014 MONMOUTH AVENUE	Policy Number:		
City	State	ZIP Code	Company NAIC Number
MARGATE	New Jersey	08402	

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 LEFT SIDE VIEW 04-21-2021

Clear Photo Three



Photo Four

Photo Four Caption RIGHT SIDE VIEW 04-21-2021

Clear Photo Four



Most Widely Accepted and Trusted

ICC-ES Evaluation Report

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ESR-2074

Reissued 02/2019
This report is subject to renewal 02/2021.

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



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

A Subsidiary of CODE C



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ICC-ES Evaluation Report

ESR-2074

Reissued February 2019

This report is subject to renewal February 2021.

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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:

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.

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

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 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 I/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 www.smartvent.com info@smartvent.com

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 = m²

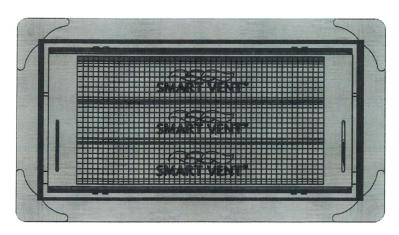


FIGURE 1-SMART VENT: MODEL 1540-510

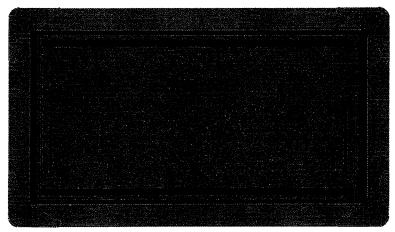


FIGURE 2—SMART VENT MODEL 1540-520

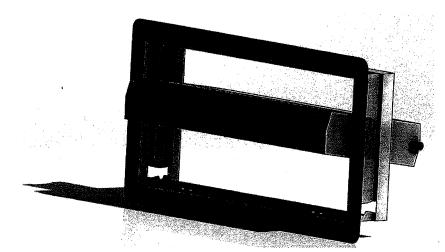


FIGURE 3—SMART VENT: SHOWN WITH FLOOD DOOR PIVOTED OPEN

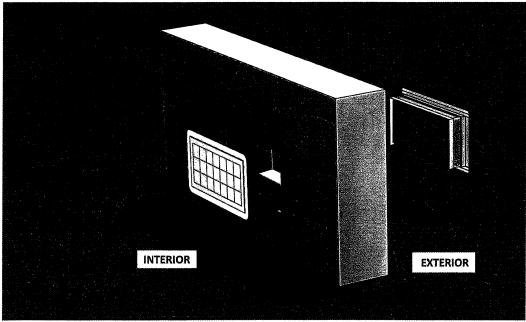


FIGURE 4—FLOOD VENT SEALING KIT