U.S. DEPARTMENT 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.

SECTION A - PROPERTY INFOR	MATION		FOR INSUR	ANCE COMPANY USE
A1. Building Owner's Name			Policy Numb	per:
ROBERT BLANDINE				
 A2. Building Street Address (including Apt., Unit, Suite, and/o Box No. 5502 MONMOUTH AVENUE 	r Bldg. No.) o	P.O. Route and	Company N	AIC Number:
City	State		ZIP Code	
VENTNOR	New Jers	-	08406	
A3. Property Description (Lot and Block Numbers, Tax Parce LOT 10.01 BLOCK 152	l Number, Leg	al Description, etc	.)	
A4. Building Use (e.g., Residential, Non-Residential, Addition	, Accessory, e	etc.) RESIDENT	ΓIAL	
A5. Latitude/Longitude: Lat. 39.34417 Long.	74.47778	Horizontal	Datum: NAD 1	927 🗵 NAD 1983
A6. Attach at least 2 photographs of the building if the Certific	cate is being u	sed to obtain flood	l insurance.	
A7. Building Diagram Number7				
A8. For a building with a crawlspace or enclosure(s):		•		
a) Square footage of crawlspace or enclosure(s)		896.00 sq ft		
b) Number of permanent flood openings in the crawlspace	e or enclosure	e(s) within 1.0 foot	above adjacent gra	ide. 5
c) Total net area of flood openings in A8.b	1000.00 sq in			
d) Engineered flood openings? 🗵 Yes 🗌 No				
A9. For a building with an attached garage:		•		
a) Square footage of attached garage	0.00 sq ft			
b) Number of permanent flood openings in the attached of			cent grade 0	
c) Total net area of flood openings in A9.b	0.00 sq	in		
d) Engineered flood openings? ☐ Yes ☒ No				
			ODREATION	15-347
SECTION B - FLOOD INSURA			URINATION	B3. State
B1. NFIP Community Name & Community Number CITY OF VENTNOR 345326	B2. County ATLANTIC	Name		New Jersey
Number Date Eff	RM Panel ective/ vised Date	B8. Flood Zone(s)	B9. Base Flood E (Zone AO, us	llevation(s) e Base Flood Depth)
345326 0001 B 06-18-1971 09-15-		A8	10.0	
B10. Indicate the source of the Base Flood Elevation (BFE) o			in Item B9:	
B11. Indicate elevation datum used for BFE in Item B9: 🗵 N	IGVD 1929	NAVD 1988	Other/Source:	
B12. Is the building located in a Coastal Barrier Resources S	ystem (CBRS) area or Otherwis	e Protected Area (OPA)? ☐ Yes ⊠ No
	☐ OPA			

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the correspond	ing information from S	ection A.	FOR INSURA	NCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and 5502 MONMOUTH AVENUE	d/or Bldg. No.) or P.O. Ro	oute and Box No.	Policy Numbe	г:
1 ,		Code 406	Company NAI	C Number
SECTION C - BUILDING	ELEVATION INFORMA	TION (SURVEY RE	EQUIRED)	
*A new Elevation Certificate will be required when C2. Elevations – Zones A1–A30, AE, AH, A (with BF) Complete Items C2.a–h below according to the best Benchmark Utilized: LOCAL BENCH Indicate elevation datum used for the elevations i NGVD 1929 NAVD 1988 Other Datum used for building elevations must be the second a) Top of bottom floor (including basement, craw	E), VE, V1–V30, V (with ouilding diagram specified vertical Datun nitems a) through h) belen/Source: ame as that used for the	ding is complete. BFE), AR, AR/A, AR/ I in Item A7. In Puerte BGVD 1929 bow. BFE.	AE, AR/A1-A30 o Rico only, ent	ter meters. measurement used. meters
b) Top of the next higher floor				
c) Bottom of the lowest horizontal structural men	nber (V Zones only)		N/A [] fee	
d) Attached garage (top of slab)			N/A fee	et 🗌 meters
 e) Lowest elevation of machinery or equipment s (Describe type of equipment and location in C 	ervicing the building omments)	·	12.48 × fee	
f) Lowest adjacent (finished) grade next to build	ing (LAG)	•		et 🖸 meters
g) Highest adjacent (finished) grade next to build	ling (HAG)		6.12 × fee	et 🗌 meters
 h) Lowest adjacent grade at lowest elevation of c structural support 	deck or stairs, including	*	5.67 ⊠ fee	et 🔲 meters
SECTION D - SURVEYO	R, ENGINEER, OR AR	CHITECT CERTIFI	CATION	15-347
This certification is to be signed and sealed by a land a land to entify that the information on this Certificate representatement may be punishable by fine or imprisonment. Were latitude and longitude in Section A provided by a	nts my best efforts to inte under 18 U.S. Code, Se	rpret the data availa ction 1001.	ble. I understan	levation information. Indicate that any false Inere if attachments.
Certifier's Name	License Number			
HOWARD A. TRANSUE	GS33541			
Title PROFESSIONAL LAND SURVEYOR				s <i>3</i> 3547 Place
Company Name SCHAEFFER NASSAR SCHEIDEGG, CE, LLC				Seal
Address 1425 CANTILLON BOULEVARD] ; 	Here
City MAYS LANDING	State New Jersey	ZIP Code 08330	-	5/21/2016
Signature ADD. C	Date 05-21-2018	Telephone (609) 625-7400	Ext.	
Copy all pages of this Elevation Certificate and all attachr	nents for (1) community o	fficial, (2) insurance a	gent/company,	and (3) building owner.
Comments (including type of equipment and location, possible ITEM A8b VENTS ARE SMART VENTS MODEL 1540- ITEM C2e IS THE A.C. PAD. THERE IS NO DUCTWORK IN THE ENCLOSURE.		IN. EACH.		

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/o 5502 MONMOUTH AVENUE	r Bldg. No.) or P.O. R	toute and Box No.	Policy Number:
City Sta	ite Z	IP Code	Company NAIC Number
VENTNOR Ne	w Jersey 0	8406	
SECTION E - BUILDING ELEY FOR ZONE	/ATION INFORMAT AO AND ZONE A (V	TION (SURVEY NOT VITHOUT BFE)	REQUIRED)
For Zones AO and A (without BFE), complete Items E1–E complete Sections A, B,and C. For Items E1–E4, use nat enter meters.	5. If the Certificate is ural grade, if available	intended to support a e. Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,
 E1. Provide elevation information for the following and check the highest adjacent grade (HAG) and the lowest adjacent floor (including basement, 	eck the appropriate ta acent grade (LAG).	ooxes to show whethe	r the elevation is above or below
crawlspace, or enclosure) is		feet _ meter	s above or below the HAG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is		feet _ meter	rs
E2. For Building Diagrams 6–9 with permanent flood ope	nings provided in Sec	ction A Items 8 and/or	9 (see pages 1-2 of Instructions),
the next higher floor (elevation C2.b in the diagrams) of the building is	3- P	_	
E3. Attached garage (top of slab) is		feet _ meter	rs above or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		_	rs above or below the HAG.
E5. Zone AO only: If no flood depth number is available, floodplain management ordinance? Yes 1	is the top of the botto lo Пикпоwл. Т	m floor elevated in ac he local official must	cordance with the community's certify this information in Section G.
SECTION F - PROPERTY OWNE	R (OR OWNER'S RE	PRESENTATIVE) CI	RTIFICATION 15-347
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Section	ons A, B, and E for Zons A, B, and E are cor	one A (without a FEMA-issued or rect to the best of my knowledge.
Property Owner or Owner's Authorized Representative's	Name		
Address	City	St	ate ZIP Code
Signature	Date	Тє	lephone
Comments			
·			
·			
. ,	•		
į .			
			-
			Check here if attachments.

ELEVATION CERTIFICATE

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

IMPORTANT: In these spaces, copy the co	prresponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, 5502 MONMOUTH AVENUE	Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City VENTNOR	State New Jersey	ZIP Code 08406	Company NAIC Number
SEC	TION G - COMMUNITY INF	ORMATION (OPTIONAL)	15-347
The local official who is authorized by law or Sections A, B, C (or E), and G of this Elevati used in Items G8–G10. In Puerto Rico only,	on Certificate. Complete the	community's floodplain man applicable item(s) and sign	nagement ordinance can complete below. Check the measurement
G1. The information in Section C was t engineer, or architect who is autho data in the Comments area below.	rized by law to certify eleval		
G2. A community official completed Se or Zone AO.	ction E for a building located	d in Zone A (without a FEMA	A-issued or community-issued BFE)
G3. The following information (Items G	4-G10) is provided for com	munity floodplain manageme	ent purposes.
G4. Permít Number	G5. Date Permit Issued		Pate Certificate of ompliance/Occupancy Issued
G7. This permit has been issued for:	☐ New Construction ☐ S	ubstantial Improvement	
G8. Elevation of as-built lowest floor (includ of the building:	ing basement)	feet	meters Datum
G9. BFE or (in Zone AO) depth of flooding a	at the building site:	feet	meters Datum
G10. Community's design flood elevation:		feet	meters Datum
Local Official's Name		itle	
Dino Cavalicia Community Name Ventron		elephone	
V sa ba a n	•	•	-3-7987
Signature		Pate	-, (, 0, 1
C=		6-5-18	
Comments (including type of equipment and I	ocation, per C2(e), if applica		
		•	
			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	py the corresponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including a 5502 MONMOUTH AVENUE	Apt., Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
VENTNOR	New Jersey	08406	

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.



FRONT VIEW AND RIGHT SIDE VIEW Photo One Caption

15-347

Clear Photo One

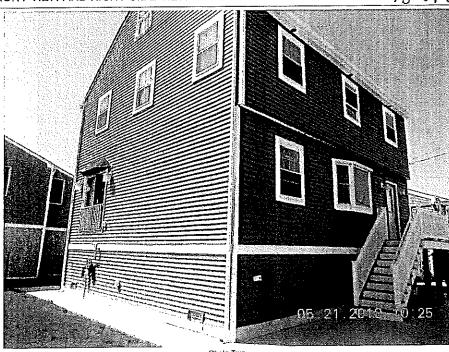


Photo Two

FRONT VIEW & LEFT SIDE VIEW Photo Two Caption

Clear Photo Two

BUILDING PHOTOGRAPHS

Continuation Page

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

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

5502 MONMOUTH AVENUE

City State ZIP Code Company NAIC Number
VENTNOR New Jersey 08406

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.

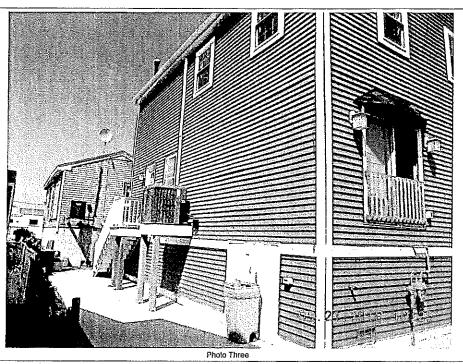
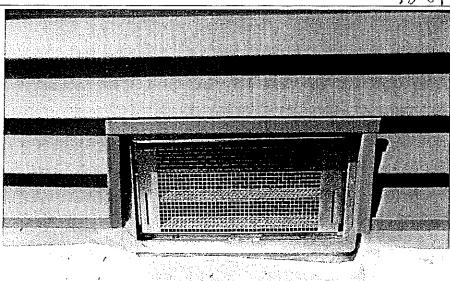


Photo Three Caption REAR VIEW

ELEVATION CERTIFICATE

15-347

Clear Photo Three



05.21.2018 10:25

Photo Four

Photo Four Caption SMART VENT MODEL 1540-510 TYPICAL OF 5

Clear Photo Four

Most Widely Accepted and Trusted

ICC-ES Evaluation Report

ESR-2074

Reissued February 2015 Revised May 2016

This report is subject to renewal February 2017.

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

A Subsidiary of the International Code Council®

DIVISION: 08 00 00—OPENINGS

Section: 08 95 43-Vents/Foundation Flood Vents

REPORT HOLDER:

SMARTVENT PRODUCTS, INC. 430 ANDBRO DRIVE, UNIT 1 PITMAN, NEW JERSEY 08071 (877) 441-8368 www.smartvent.com info@smartvent.com

EVALUATION SUBJECT:

SMART VENT[®] AUTOMATIC FOUNDATION FLOOD VENTS: MODELS #1540-520; #1540-521; #1540-510; #1540-511; #1540-570; #1540-574; #1540-524; #1540-514

1.0 EVALUATION SCOPE

Compliance with the following codes:

- 2015, 2012, 2009 and 2006 International Building Code® (IBC)
- 2015, 2012, 2009 and 2006 International Residential Code[®] (IRC)
- 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.

4.0 DESIGN AND INSTALLATION

SmartVENT® and FloodVENT® are designed to be installed into walls or overhead doors of existing or new construction from the exterior side. Installation of the vents must be in accordance with the manufacturer's instructions, the applicable code and this report. Installation clips allow mounting in masonry and concrete walls of any thickness. In order to comply with the engineered opening design principle noted in Section 2.7.2.2 and 2.7.3 of ASCE/SEI 24-14 [Section 2.6.2.2 of ASCE/SEI 24-05 (2012, 2009, 2006 IBC and IRC)], the Smart Vent® FVs must be installed as follows:

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one FV for every 200 square feet (18.6 m²) of enclosed area, except that the SmartVENT® Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 must be installed with a minimum of one FV for every 400 square feet (37.2 m²) of enclosed area.



- Below the base flood elevation.
- With the bottom of the FV located a maximum of 12 inches (305.4 mm) above the higher of the final grade or floor and finished exterior grade immediately under each opening.

5.0 CONDITIONS OF USE

The Smart Vent® 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

Data in accordance with the ICC-ES Acceptance Criteria for Mechanically Operated Flood Vents (AC364), dated August 2015.

7.0 IDENTIFICATION

The Smart VENT® models recognized in this report must be identified by a label bearing the manufacturer's name (Smartvent Products, Inc.), the model number, and the evaluation report number (ESR-2074).

TABLE 1-MODEL SIZES

MODEL NAME	MODEL NUMBER	MODEL SIZE (in.)	COVERAGE (sq. ft.)
FloodVENT®	1540-520	15 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

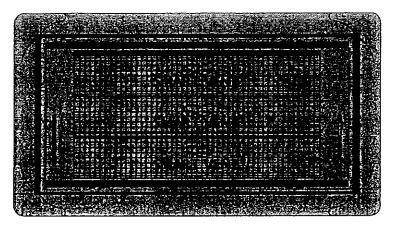


FIGURE 1—SMART VENT: MODEL 1540-510

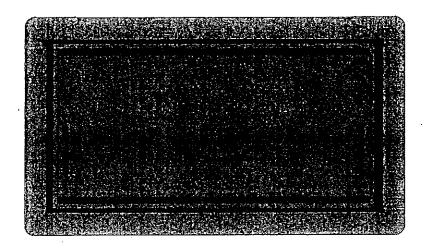


FIGURE 2—SMART VENT MODEL 1540-520

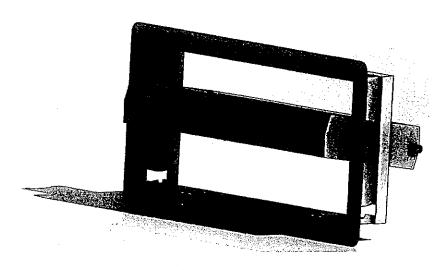


FIGURE 3—SMART VENT: SHOWN WITH FLOOD DOOR PIVOTED OPEN