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

OMENO1660[DOMS 国 DOMES DOMES DOMES DE LA COLOR DE LA

MAY 12 6 2017

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 abent/company, and (3) building owner. FOR MININGE OF OF PANY USE SECTION A - PROPERTY INFORMATION A1. Building Owner's Name Policy Number: Jerrold & Linda Young A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: Box No. 204 N. 36th Avenue City State ZIP Code Longport New Jersey 08403 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Block 117, Lot 15.01 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. N39°19'19" Long, W74°31'16" 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 7 A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) 1,353 sq ft b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b 1,600 sq in d) Engineered flood openings? A9. For a building with an attached garage: a) Square footage of attached garage 0 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 0 sq in SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State Longport 345302 Atlantic New Jersey B4. Map/Panel B5. Suffix B6. FIRM Index B7. FIRM Panel B8. Flood Zone(s) B9. Base Flood Elevation(s) Number (Zone AO, use Base Flood Depth) Date Effective/ Revised Date 345302/0001 07/12/1970 08/15/1983 **A8**

١		Form	086-0-33	(7/1E)
	LIVIA	L OILLI	1100-11-00	(//13)

Designation Date:

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Tyes 🗵 No

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:

☐ CBRS ☐ OPA

B11. Indicate elevation datum used for BFE in Item B9: X NGVD 1929 NAVD 1988 Other/Source:

☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other/Source:

ELEVATION CERTIFICATE

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.			FOR INSURANCE COMPANY USE Policy Number:
204 N. 36th Avenue	701 Blag. 110.) 01 1 .0.	Noute and Box No.	r oney reamber.
		ZIP Code 08403	Company NAIC Number
SECTION C – BUILDING E	LEVATION INFORM	MATION (SURVEY RI	EQUIRED)
		Building Under Constru	
*A new Elevation Certificate will be required when			_
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE Complete Items C2.a–h below according to the bu Benchmark Utilized: GPS	ilding diagram specifi	n BFE), AR, AR/A, AR/ ed in Item A7. In Puert um: NGVD 1929	AE, AR/A1–A30, AR/AH, AR/AO. o Rico only, enter meters.
Indicate elevation datum used for the elevations in ☑ NGVD 1929 ☐ NAVD 1988 ☐ Other	r/Source:		
Datum used for building elevations must be the sa	me as that used for th	e BFE.	Check the measurement used.
a) Top of bottom floor (including basement, crawls	space, or enclosure flo	oor)7. <u>3</u>	
b) Top of the next higher floor		16. 5	
c) Bottom of the lowest horizontal structural memb	per (V Zones only)	N/A	X feet meters
d) Attached garage (top of slab)		7. <u>1</u>	X feet meters
 e) Lowest elevation of machinery or equipment se (Describe type of equipment and location in Col 	rvicing the building mments)	<u>16</u> . <u>1</u>	x feet meters
f) Lowest adjacent (finished) grade next to buildin	g (LAG)	7. <u>1</u>	X feet meters
g) Highest adjacent (finished) grade next to buildir	ng (HAG)		X feet meters
 h) Lowest adjacent grade at lowest elevation of de structural support 	ck or stairs, including	<u> </u>	X feet meters
SECTION D - SURVEYOR	, ENGINEER, OR A	RCHITECT CERTIFIC	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 in	ternret the data availah	law to certify elevation information. le. I understand that any false
Were latitude and longitude in Section A provided by a li	censed land surveyor	? ⊠Yes □No	
Certifier's Name	License Number		
James R. Boney, PLS Title	31264		
Professional Land Surveyor			
Company Name			Place
James R. Boney & Associates, LLC			Seal
Address 3 Stone Mill Court			Here
City Egg Harbor Twp	State New Jersey	ZIP Code 08234	
Signature SmMh	Date 05/22/2017	Telephone (609) 788-8013	
opy all pages of this Elevation Certificate and all attachme	nts for (1) community o	fficial, (2) insurance age	ent/company, and (3) building owner.
comments (including type of equipment and location, per uilding is a two story dwelling on full-story foundation wa utside on a platform. All other mechanicals serving the d arage finished floor. Building has eight (8) vent openings	C2(e), if applicable) ills. The ground floor is welling are in the gara	s primarily used for par	king and storage. A/C unit is

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and 204 N. 36th Avenue	or Bldg. No.) or P.O	. Route and Box No.	Policy Number:		
City	tate	ZIP Code	Company NAIC Number		
Longport	lew Jersey	08403			
SECTION E – BUILDING ELE FOR ZONE	VATION INFORMA AO AND ZONE A	ATION (SURVEY NOT (WITHOUT BFE)	REQUIRED)		
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		feet meter	s 🔲 above or 🔲 below the HAG.		
 Top of bottom floor (including basement, crawlspace, or enclosure) is 			s above or below the LAG.		
E2. For Building Diagrams 6-9 with permanent flood op	enings provided in S	ection 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			s above or below the HAG.		
E3. Attached garage (top of slab) is			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 available, floodplain management ordinance? Yes	is the top of the bott No Unknown.	om floor elevated in acc The local official must c	cordance with the community's certify this information in Section G.		
SECTION F - PROPERTY OWNE	R (OR OWNER'S R	EPRESENTATIVE) CE	RTIFICATION		
The property owner or owner's authorized representative community-issued BFE) or Zone AO must sign here. The	who completes Sectionstatements in Section	tions A, B, and E for Zor ons 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	Name				
Address	City	Sta	te ZIP Code		
Signature	Date	Tele	ephone		
Comments					
			Check here if attachments.		

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the co	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, 204 N. 36th Avenue	Suite, and/or Bldg. No.) or	r P.O. Route and Box No.	Policy Number:		
City Longport	State New Jersey	ZIP Code 08403	Company NAIC Number		
SECT	ION G - COMMUNITY IN	FORMATION (OPTIONAL			
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 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 Second or Zone AO.	tion E for a building locate	ed in Zone A (without a FEN	MA-issued or community-issued BFE)		
G3. The following information (Items G4	-G10) is provided for com	nmunity floodplain manager	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:	g basement)	fee	t meters Datum		
G9. BFE or (in Zone AO) depth of flooding at	the building site:	fee	t meters Datum		
G10. Community's design flood elevation:			meters Datum		
Local Official's Name		Title			
Community Name	7	Геlephone			
Signature	0	Date			
Comments (including type of equipment and loc	cation, per C2(e), if applica	able)			
			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,	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 204 N. 36th Avenue			Policy Number:
City	State	ZIP Code	Company NAIC Number
Longport	New Jersey	08403	Schrifts (Barrier - American - American Schrifts (Barrier - American Schri

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 5/19/17

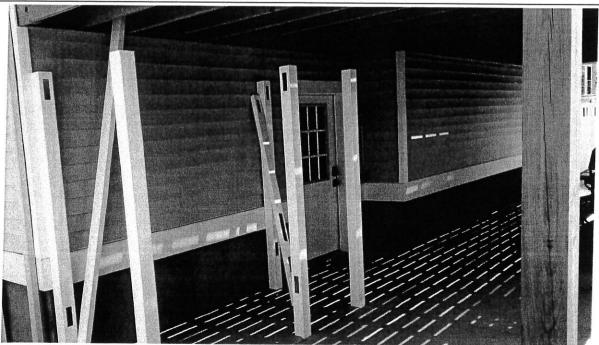


Photo Two

FEMA Form 086-0-33 (7/15)

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

			Expiration Bate. November 50, 2016
IMPORTANT: In these spaces, copy the corres	ponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suit 204 N. 36th Avenue	e, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Longport	New Jersey	08403	
If submitting more photographs than will fit on with: date taken; "Front View" and "Rear Viphotographs must show the foundation with repr	ew"; and, if required,	"Right Side View" and "	'Left Side View." When applicable.
9			
	Photo O	ne	
Photo One Continu	Photo One		
Photo One Caption			
	Photo Tw	0	
*			
noto Two Caption	Photo Two		
ioto Two Caption			



ICC-ES Evaluation Report

ESR-2074*

Reissued December 2012

This report is subject to renewal February 1, 2015.

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: FLOODVENT™ MODEL #1540-520: FLOODVENT™ STACKING MODEL #1540-521; SMARTVENT™ MODEL #1540-510; SMARTVENT™ STACKING MODEL #1540-511; WOOD WALL FLOOD MODEL #1540-570; WOOD WALL FLOOD **OVERHEAD** DOOR MODEL #1540-574: FLOODVENT™ OVERHEAD DOOR MODEL #1540-524: SMARTVENT™ OVERHEAD DOOR MODEL #1540-514

1.0 EVALUATION SCOPE

Compliance with the following codes:

- 2009 and 2006 International Building Code® (IBC)
- 2009 and 2006 International Residential Code® (IRC)

Properties evaluated:

- Physical operation
- Water flow

2.0 USES

The Smart Vent® units are automatic foundation flood vents (AFFVs) employed to equalize hydrostatic pressure on nonfire-resistance-rated foundation walls, rolling-type overhead doors and building walls subject to rising or falling flood waters. The Smart Vent® units are intended for use where flood hazard areas have been established in accordance with IBC Section 1612.3 or IRC Section R3222.1. Certain models also allow natural ventilation in accordance with Section 1203 of the IBC or Section 408.1 of the IRC.

3.0 DESCRIPTION

3.1 General:

When subjected to pressure from rising water, the Smart Vent® AFFVs disengage, 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 AFFV 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 plate to rotate out of the way and allow flow. The water level stabilizes, equalizing the lateral forces. Each unit is fabricated from stainless steel. The SmartVENT™ Stacking Model #1540-511 FloodVENT™ Stacking Model #1540-521 units each contain two vertically arranged openings per unit.

3.2 Engineered Opening:

The AFFVs comply with the design principle noted in Section 2.6.2.2 of ASCE/SEI 24 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 AFFVs must be installed in accordance with Section 4.0.

3.3 Model Sizes:

The FloodVENT™ Model #1540-520, SmartVENT™ Model #1540-510, FloodVENT™ Overhead Door Model #1540-524, and SmartVENT™ Overhead Door Model #1540-514 units measure $15^3/_4$ inches wide by $7^3/_4$ inches high (400 by 196.9 mm). The Wood Wall Flood Model #1540-570 and Wood Wall Flood Overhead Door Model #1540-574 units measure 14 inches wide by 83/4 inches high (355.6 by 222.25 mm). The SmartVENT™ Stacking Model #1540-511 and FloodVENT™ Stacking Model #1540-521 units measure 16 inches wide by 16 inches high (406.4 by 406.4 mm).

3.4 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 AFFVs recognized in this report do not offer natural ventilation.

4.0 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. The mounting straps allow mounting in wood, masonry and

*Revised June 2014



concrete walls up to 12 inches (305 mm) thick. In order to comply with the engineered opening design principle noted in Section 2.6.2.2 of ASCE/SEI 24, the Smart Vent® AFFVs must be installed as follows:

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one AFFV 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 AFFV for every 400 square feet (37.2 m²) of enclosed area.
- Below the base flood elevation.
- With the bottom of the AFFV located a maximum of 12 inches (305.4 mm) above grade.

5.0 CONDITIONS OF USE

The Smart Vent® AFFVs 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® AFFVs 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® AFFVs 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 Automatic Foundation Flood Vents (AC364), dated October 2013 (editorially revised May 2014).

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).

Engineered Flood Openings Certificate To satisfy requirements of the National Flood Insurance Program

This certification must be submitted to, and kept on file by, the local jurisdiction's permit authority. A copy should be retained by the owner to demonstrate compliance in order to receive the best flood insurance rating.

The Smart VENT® and Flood VENT™ Foundation Flood Vent is certified as meeting the flood opening requirements for engineered openings as set forth in the Federal Emergency Management Agency's National Flood Insurance Program regulations (44 CFR 60.3(c)(5)) and ASCE 24-98, provided it is installed according to the those references, as summarized below. Flood openings are required in enclosures below elevated buildings, attached and detached garages, and accessory structures that meet the required limitations. For a copy of the report documenting this certification dated June 21, 2002, and a copy of the National Evaluation Service report NER 624, contact Smart VENT, Inc., at 877/441-8368 or visit.

www.smartvent.com

I do hereby certify that the Smart VENT® Louvered Foundation Flood Vent and the FloodVENT™ Insulated Foundation Flood Vent opening (s) is designed for installation in buildings, will allow for the automatic equalizing of hydrostatic flood forces on exterior walls by allowing for the automatic entry and exit of floodwater during floods up to and including the base (100-year) flood. One Smart VENT® or one FloodVENT™ for every 200 Sq.Ft. of enclosed area will provide sufficient hydrostatic pressure equalization during a flood provided the installation limitations and instructions are followed as listed below. To Calculate the required number of Smart VENTS® or FloodVENTS™ divide the Square Feet of enclosed area by 200.

Example: A 2000 Sq.Ft. enclosed area requires 10 vents. 2000 Sq.Ft / 200 = 10 Vents

Zinam province		
Signature Pole Ju	·,	NEW
Title Professional Engineer		A STATE OF THE STA
Type of License Professional Engineering		2 800 2
License Number NJPE GE26637		68 48117
*Project Name		TO WALL
*Date Submitted		Professional Seal
* Required Fields*		Professional Seal

Installation Limitations and Instructions

- The Smart VENT® or FloodVENT™ unit provides sufficient automatic equalization of hydrostatic pregsure on walls and foundations of buildings located in flood hazard areas where the rate of rise is expected to be less than or approximately 5 feet per hour.
- Enclosed areas below otherwise elevated buildings, non-elevated attached and detached garages, and certain non-elevated
 accessory structures located in flood hazard areas are to be used solely for parking of vehicles, building access, or storage.
- 3. Each enclosed area shall have at least two flood openings, installed on different sides of the enclosed area.
- The bottom of the flood openings shall be no more than one foot above the adjacent finished ground level.
- 5. Installation must be in accordance with manufacturer's instructions.

"REFERENCE ONLY" From FEMA TB 1-93 Guidance for Engineered Openings

Openings in Foundation Walls

National Flood Insurance Program (NFIP) Technical Bulletin TB 1-93

"In situations where it is not feasible or desirable to meet the openings criteria stated previously, a design professional (registered engineer or architect) may design and certify openings. This section provides guidance for such engineered designs. For openings not meeting all four requirements for non-engineered openings listed on page 2 and 3 of TB 1-93, certification by a registered professional engineer or architect is required. Such certification must be submitted to, and kept on file by, the community. These certifications must assure community officials that the openings are designed in accordance with accepted standards of practice. A certification may be affixed to the design drawings or submitted separately. It must include appropriate certification language, and the name, title, address, signature, type of license, license number, and professional seal of the certifier." (TB 1-93 is available through Smart VENT® or online at www.fema.gov)

Form: SMRT100 Rev.A July 2002

This form is the property of Smart VENT Inc. Modification or Duplication is Strictly Prohibited without authorization.