

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 INFORMATION						RANCE COMPANY USE	
A1. Building Owner's Name SELCO BUILDERS					Policy Nun	nber:	
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2 NORTH EVERGREEN AVENUE 					. Route and	Company I	NAIC Number:
City LONGPORT				State New Jersey		ZIP Code 08403	
A3. Property Des BLOCK 64 LOT		nd Block Numbers, Ta	x Parc	el Number, Legal De	escription, etc.)		
A4. Building Use	(e.g., Resider	ntial, Non-Residential,	Additio	n, Accessory, etc.)	RESIDENTIAL		
A5. Latitude/Long	itude: Lat. 3	9 19' 02.7"	Long.	74 31' 24.8"	Horizontal Datum	NAD	1927 × NAD 1983
A6. Attach at leas	t 2 photograp	hs of the building if the	Certifi	cate is being used t	o obtain flood insura	nce.	
A7. Building Diag	am Number	6					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	otage of crawl	space or enclosure(s)		1,188 sq ft			
b) Number of	permanent fl	ood openings in the cra	wlspa	ce or enclosure(s) w	vithin 1.0 foot above	adjacent gr	ade7
c) Total net a	rea of flood o	penings in A8.b1,4	00	sq in			
d) Engineered	d flood openir	igs? X Yes N	0				
A9. For a building	with an attack	ned garage:					
		ned garage0		sa fi			
		ood openings in the att			ot above adjacent or	ade	0
					or above adjacent gr		
· ·		penings in A9.b		sq in			-
d) Engineered	flood openin	gs? ☐ Yes ☒ N	0				
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMAT	ION	
B1. NFIP Commun	ity Name & C	ommunity Number		B2. County Name			B3. State
LONGPORT	345302			ATLANTIC			New Jersey
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/ evised Date	B8. Flood Zone(s)	(Zor	e Flood Elevation(s) ne AO, use Base d Depth)
345302/0001	В	08/12/1970		/1983	A-8	10.00'	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:							
☐ FIS Profile ☐ Community Determined ☐ Other/Source:							
B11. Indicate elevation datum used for BFE in Item B9: X 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 D	Designation Date: CBRS OPA						

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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 2 NORTH EVERGREEN AVENUE	Box No. Policy Number:			
City State ZIP Code	Company NAIC Number			
LONGPORT New Jersey 08403				
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)				
*A new Elevation Certificate will be required when construction of the building is concern. C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR Complete Items C2.a–h below according to the building diagram specified in Item Benchmark Utilized: RM-3 Vertical Datum: NGVD	, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. A7. In Puerto Rico only, enter meters.			
Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988 Other/Source:				
Datum used for building elevations must be the same as that used for the BFE.	Check the measurement used.			
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	6. 62 × feet meters			
	17. 70			
b) Top of the next higher floor	NI/A			
c) Bottom of the lowest horizontal structural member (V Zones only)	f 63			
d) Attached garage (top of slab)	12.02			
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)				
f) Lowest adjacent (finished) grade next to building (LAG)	6. 30 × feet meters			
g) Highest adjacent (finished) grade next to building (HAG)	6. 52 X feet meters			
 h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 	6. 34 X feet meters			
SECTION D – SURVEYOR, ENGINEER, OR ARCHITEC	T CERTIFICATION			
This certification is to be signed and sealed by a land surveyor, engineer, or architect au I certify that the information on this Certificate represents my best efforts to interpret the statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 100	data available. I understand that any false			
Were latitude and longitude in Section A provided by a licensed land surveyor?	S ☐ No ☐ Check here if attachments.			
Certifier's Name License Number DANIEL J. PONZIO, SR. GS37603				
Title				
PROFESSIONAL LAND SURVEYOR	Disco			
Company Name	Place Seal			
ARTHUR W. PONZIO CO. & ASSOC., INC.	Here			
Address 400 NORTH DOVER AVENUE				
City State ZIP Co ATLANTIC CITY New Jersey 08401	de			
Date Telephi 06/06/2017 (609) 3	one 44-8194			
Copy all pages of this Elevation Certificate 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)				
PROJECT #33464 A/C UNIT ELEV = 17.20' HEATER ELEV = 13.82' DUCT WORK ELEV = 15.72'				

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IMPORTANT: In these spaces, copy the corresponding information from Section A.					FOR INSURA	NCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2 NORTH EVERGREEN AVENUE					Policy Number	fül
City		State	ZIP Code		Company NAI	C Number
LON	IGPORT - DIM DIM S	New Jersey	08403	/EV NOT	DECITION.	
	SECTION E – BUILDING E FOR ZO	NE AO AND ZONE	A (WITHOUT B	FE)	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 o	r 🗌 below the HAG.
	 Top of bottom floor (including basement, crawlspace, or enclosure) is 		feet	meter	s 🗌 above o	r Delow the LAG.
E2.	For Building Diagrams 6–9 with permanent flood the next higher floor (elevation C2.b in	openings provided in	n Section A Items	s 8 and/or	9 (see pages 1	–2 of Instructions),
	the diagrams) of the building is		feet	meter	s above o	r Delow the HAG.
E3.	Attached garage (top of slab) is		feet	meter	s above o	r Delow the HAG.
E4.	Top of platform of machinery and/or equipment servicing the building is		feet	meter	s 🗌 above o	r below the HAG.
E5.	Zone AO only: If no flood depth number is availa floodplain management ordinance? Yes [ble, is the top of the No Unknow	bottom floor eleven. The local office	ated in acc cial must c	cordance with the certify this inform	ne community's nation in Section G.
	SECTION F - PROPERTY OV	WNER (OR OWNER'	S REPRESENTA	ATIVE) CE	RTIFICATION	
The	property owner or owner's authorized representa munity-issued BFE) or Zone AO must sign here.	tivo who completes	Sections A. B. an	d F for Zo	ne A (without a	FEMA-issued or of my knowledge.
	perty Owner or Owner's Authorized Representative					
Addr	ress	Cit	y	Sta	ate	ZIP Code
Sign	ature	Da	te	Tel	ephone	is.
Com	ments	, , , , , , , , , , , , , , , , , , ,				
	,				Check	here if attachments.

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IMPORTANT: In these spaces, copy the corres	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Sui 2 NORTH EVERGREEN AVENUE	Policy Number:				
City LONGPORT	State New Jersey	ZIP Code 08403	Company NAIC Number		
		MATION (OPTIONAL)			
SECTION G – COMMUNITY INFORMATION (OPTIONAL) 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 Section or Zone AO.	n E for a building located in	Zone A (without a FEM)	A-issued or community-issued BFE)		
G3. The following information (Items G4–G	G10) is provided for commu	nity floodplain managem	ent purposes.		
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction Subs	stantial Improvement			
G8. Elevation of as-built lowest floor (including of the building:	basement)		meters Datum		
G9. BFE or (in Zone AO) depth of flooding at th	e building site:	feet	meters Datum		
G10. Community's design flood elevation:	-	feet	meters Datum		
Local Official's Name	Title				
Community Name	Tele	ephone			
Signature	Date	9			
Comments (including type of equipment and local	ition, per C2(e), if applicable	e)			
2.8.			8		
	* /				
	_				
			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

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City LONGPORT	State New Jersey	ZIP Code 08403	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.

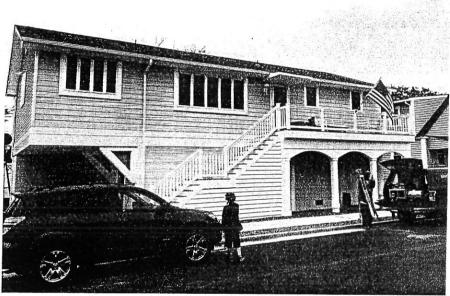


Photo One

Photo One Caption FRONT VIEW 6/6/17



Photo Two

Photo Two Caption LEFT SIDE VIEW 6/6/17

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

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IMPORTANT: In these spaces, copy	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt 2 NORTH EVERGREEN AVENUE	, Unit, Suite, and/or Bldg. No.) or	P.O. Route and Box No.	Policy Number:
City LONGPORT	State New Jersey	ZIP Code 08403	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 RIGHT SIDE VIEW 6/6/17

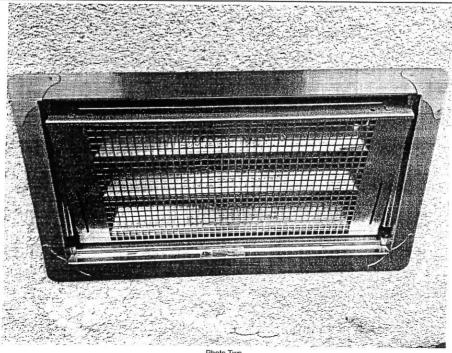


Photo Two Caption SMART VENT MODEL #1540-510 6/6/17



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 and 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 $8^3/_4$ 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 article.

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

Example: A 2000 Sq.Ft. enclosed area requires to years	
Signature Title Professional Engineer Type of License Professional Engineerine License Number NJ PE GE26637	S HO Z
*Project Name*Project Address	MALL WAR
*Date Submitted * 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.
 Each enclosed area shall have at least two flood openings, installed on different sides of the enclosed area.
- Each enclosed area shall have at reast two frood openings, and affect the adjacent finished ground level.
 The bottom of the flood openings shall be no more than one foot above the adjacent finished ground level.
- 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.