

AUG 0 9 2024

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

OMB Control No. 1660-0008 Expiration Date: 06/30/2026

TOWN OF LONGBOAT KEY Planning, Zoning & Building

### **ELEVATION CERTIFICATE**

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11
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: Dana Wilson	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 590 Companion Way	Company NAIC Number:
City: Longboat Key State: FL	ZIP Code: <u>34228</u>
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Numbers of Legal Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Numbers of Legal Description (e.g., Lot and Block Numbers of Legal Description) and/or Tax Parcel Numbers of Legal Description (e.g., Lot and Block Numbers of Legal Description) and/or Tax Parcel Numbers of Legal Description (e.g., Lot and Block Numbers of Legal Description) and/or Tax Parcel Numbers of Legal Description (e.g., Lot and Block Numbers of Legal Description) and/or Tax Parcel Numbers of Legal Description (e.g., Lot and Block Numbers of Legal Description) and/or Tax Parcel Numbers of Legal Description (e.g., Lot and Block Numbers of Legal Description) and/or Tax Parcel Numbers of Legal Description (e.g., Lot and Block Numbers of Legal Description) and/or Tax Parcel Numbers of Legal Description (e.g., Lot and Block Numbers of Legal Description) and Legal Description (e.g., Lot and Legal Description) and Legal Description (e	mber:
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): Residential	
A5. Latitude/Longitude: Lat. 27.416254 Long82.660219 Horiz. Datum:	
A6. Attach at least two and when possible four clear color photographs (one for each side) of the b	ouilding (see Form pages 7 and 8).
A7. Building Diagram Number:7	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): 235 sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area	? ⊠ Yes ☐ No ☐ N/A
<ul> <li>c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foo Non-engineered flood openings:</li> </ul>	t above adjacent grade: 2
d) Total net open area of non-engineered flood openings in A8.c:0 sq. in.	
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instruct	ions): 400 sq. ft.
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): sq. ft.	
A9. For a building with an attached garage:	
a) Square footage of attached garage: N/A sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage	e? ☐ Yes ☐ No       N/A
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above ad Non-engineered flood openings:N/A Engineered flood openings:N/A	ljacent grade: <u>A</u>
d) Total net open area of non-engineered flood openings in A9.c: N/A sq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instruc	tions): N/A sq. ft.
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): N/A sq. ft.	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFO	DRMATION
B1.a. NFIP Community Name: Town of Longboat Key B1.b. NFIP Co.	mmunity Identification Number: 125126
B2. County Name: Manatee B3. State: FL B4. Map/Panel No.:	<u>12081C0291</u> B5. Suffix: <u>F</u>
B6. FIRM Index Date: 08/10/2021 B7. FIRM Panel Effective/Revised Date: 08/10/2	2021
B8. Flood Zone(s): AE B9. Base Flood Elevation(s) (BFE) (Zone AO, use	e Base Flood Depth): 8'
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9:  ☐ FIS ☐ FIRM ☐ Community Determined ☐ Other:	
B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Oth	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Properties of the Designation Date: CBRS OPA	otected Area (OPA)?
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? Yes	☑ No

CHVHORS

2000 Plus aure

TOWN OF LONGBOAT KEY

Building Street Address (including Apt., Un	it, Suite, and/or Bldg. No.) o	r P.O. Route and Box	No.: FC	R INSU	RANCE	COM	IPANY USE
590 Companion Way  City: Longboat Key	State: FL	ZIP Code: <u>34228</u>		Policy Number:  Company NAIC Number:			
SECTION C -	BUILDING ELEVATION	N INFORMATION (	SURVEY REC	UIRE	))		
C1. Building elevations are based on:  *A new Elevation Certificate will be recognition.			_	⊠ Fir	ished C	onstru	ction
C2. Elevations – Zones A1–A30, AE, Al-A99. Complete Items C2.a–h below Benchmark Utilized: MCBM DL184	according to the Building D	Diagram specified in It	em A7. In Puerl				
Indicate elevation datum used for the ele  ☐ NGVD 1929 ☐ NAVD 1988		h) below.					
Datum used for building elevations must If Yes, describe the source of the convers			on factor used?			No measu	rement used:
a) Top of bottom floor (including bas	sement, crawlspace, or end	losure floor):	3.3	_	feet [		eters
b) Top of the next higher floor (see	Instructions):		14.8	0 🛛	feet [	] me	eters
c) Bottom of the lowest horizontal st	tructural member (see Instr	uctions):	N/.	<u>A</u> $\square$	feet [	] me	ters
d) Attached garage (top of slab):			N/A	<u> </u>	feet [	] me	eters
e) Lowest elevation of Machinery ar (describe type of M&E and location			13.4	0 🛛	feet [	] me	eters
f) Lowest Adjacent Grade (LAG) ne	ext to building:	Finished	3.0	0 🛛	feet [	] me	eters
g) Highest Adjacent Grade (HAG) n	ext to building:   Natural	Finished	3.2	0 🛛	feet [	] me	eters
h) Finished LAG at lowest elevation support:	of attached deck or stairs,	including structural	3.2	0 🛛	feet [	] me	eters
SECTION D	- SURVEYOR, ENGINE	ER, OR ARCHITE	CT CERTIFIC	ATION			
This certification is to be signed and seal information. I certify that the information false statement may be punishable by fire	on this Certificate represen	ts my best efforts to in	nterpret the data				
Were latitude and longitude in Section A	provided by a licensed land	d surveyor? 🛛 Yes	□No				
Check here if attachments and describ	be in the Comments area.						
Certifier's Name: Pablo Alvarez, P.S.M	I. Licens	se Number: LS7274		aniini	O A. ALV	Many.	
Title: Surveyor & Mapper				No.	LICENSE	P. T.	
Company Name: Landtec Surveying a	nd Lien, LLC.			* PR	★ STATE OF	1	
Address: 700 West Hillsboro Bouleva	rd - Suite 4-100			THE SE PO	ORIO	Rychin	
City: Deerfield Beach	State:	FL ZIP Code: 33	3441	100	AND		
Telephone: (561) 367-3587 E	xt.: 12 Email: palvare	z@landtecsurvey.c	com				
Ma Pou arzy a stare or	Digitally signed by Pabl Alvarez	o A Date: 08/12	0/2024		Place	Seal H	ere
Copy all pages of this Elevation Certificate	Date: 2024.08.12 14:43:	17 -04 00		/compar			
Comments (including source of conversion Latitude and Longitude derived from	Google Earth.	ipinient and location p	or Ozie, and de	Soription	orally	attau	o
Section C2 E - A/C unit is located in Lowest crown of road elevation: 2.15							
Two engineered flood openings are	Smart Vents model #154	0-520 with flood co	verage of 200	square	e feet e	ach.	
1							

	Unit, Suite, and/or Bldg. No.)	or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE
590 Companion Way City: Longboat Key	State: FL	ZIP Code: 34228	Policy Number:  Company NAIC Number:
		IT INFORMATION (SUR' O, AND ZONE A (WITHO	VEY NOT REQUIRED)
			tural grade, if available. If the Certificate is e measurement used. In Puerto Rico only,
Building measurements are based on: *A new Elevation Certificate will be rec			truction*  Finished Construction
E1. Provide measurements (C.2.a in a measurement is above or below the			the appropriate boxes to show whether the
a) Top of bottom floor (including because crawlspace, or enclosure) is:	pasement,		eters   above or below the HAG.
<ul> <li>b) Top of bottom floor (including to crawlspace, or enclosure) is:</li> </ul>	pasement,		eters   above or below the LAG.
E2. For Building Diagrams 6–9 with ponext higher floor (C2.b in applicab Building Diagram) of the building i	le		and/or 9 (see pages 1–2 of Instructions), the eters above or below the HAG.
E3. Attached garage (top of slab) is:			eters above or below the HAG.
E4. Top of platform of machinery and/ servicing the building is:	or equipment		eters
E5. Zone AO only: If no flood depth no floodplain management ordinance			d in accordance with the community's ial must certify this information in Section G.
SECTION F - PROPERT	Y OWNER (OR OWNER	S AUTHORIZED REPRE	SENTATIVE) CERTIFICATION
The property owner or owner's authori sign here. The statements in Sections			for Zone A (without BFE) or Zone AO must
Sign field. The statements in Sections			
Check here if attachments and des	scribe in the Comments area		
Check here if attachments and des			
Property Owner or Owner's Authorized			ZIP Code:
Property Owner or Owner's Authorized Address:			ZIP Code:
Property Owner or Owner's Authorized Address:  City:	Representative Name:	State:	
Property Owner or Owner's Authorized Address:  City:  Telephone:	Representative Name:		
Property Owner or Owner's Authorized Address:  City: Telephone:  Signature:	Representative Name:	State:	
Property Owner or Owner's Authorized Address:  City: Telephone:  Signature:	Representative Name:	State:	
Property Owner or Owner's Authorized Address:  City: Telephone:  Signature:	Representative Name:	State:	
Property Owner or Owner's Authorized Address:  City: Telephone:  Signature:	Representative Name:	State:	
Property Owner or Owner's Authorized Address:  City: Telephone:  Signature:	Representative Name:	State:	
Property Owner or Owner's Authorized Address:  City: Telephone:  Signature:	Representative Name:	State:	
Property Owner or Owner's Authorized Address:  City: Telephone:  Signature:	Representative Name:	State:	

Building Street Address (including Apt., Unit, Suite	e, and/or Bldg. No.)	or P.O. Route and Bo	x No.:	FOR INSI	JRANCE COMPANY USE
590 Companion Way  City: Longboat Key	State: FL	ZIP Code: 34228		Policy Nun	nber:
City. Longboat Ney	State	ZIF Code. <u>54220</u>		Company	NAIC Number:
SECTION G - COMMUNITY INFOR	MATION (RECO	MMENDED FOR C	COMMUNI	TY OFFICIA	L COMPLETION)
The local official who is authorized by law or ord Section A, B, C, E, G, or H of this Elevation Cer					rdinance can complete
G1. The information in Section C was ta engineer, or architect who is authori elevation data in the Comments are	zed by state law to				
G2.a. A local official completed Section E E5 is completed for a building locate		ed in Zone A (without	t a BFE), Zo	one AO, or Zo	ne AR/AO, or when item
G2.b.   A local official completed Section H	for insurance purpo	oses.			
G3.	the local official de	escribes specific corr	ections to th	ne informatior	n in Sections A, B, E and H.
G4.	–G11) is provided f	for community floodp	lain manage	ement purpos	es.
G5. Permit Number:	G6. Date F	Permit Issued:			
G7. Date Certificate of Compliance/Occupar	ncy Issued:				
G8. This permit has been issued for: Ne	ew Construction	☐ Substantial Improv	vement		
G9.a. Elevation of as-built lowest floor (includi building:	ng basement) of the	e 	feet	meters	Datum:
G9.b. Elevation of bottom of as-built lowest ho member:	rizontal structural		feet	meters	Datum:
G10.a. BFE (or depth in Zone AO) of flooding a	t the building site:		feet	meters	Datum:
G10.b. Community's minimum elevation (or deprequirement for the lowest floor or lowest member:		ral	☐ feet	☐ meters	Datum:
G11. Variance issued? ☐ Yes ☐ No I	f ves. attach docun	nentation and describ			
The local official who provides information in Se correct to the best of my knowledge. If applicab	ection G must sign h	here. I have complete	ed the inforr	nation in Sec	tion G and certify that it is
Local Official's Name:		Title:			
NFIP Community Name:					
Address:					
City:			State:	ZIP C	ode:
Signature:		Date:			
Comments (including type of equipment and loc Sections A, B, D, E, or H):	ation, per C2.e; de	scription of any attac	chments; an	d corrections	to specific information in

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE
590 Companion Way  City: Longboot Key State: FL 7IP Code: 34228	Policy Number:
City: Longboat Key State: FL ZIP Code: 34228	Company NAIC Number:
SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION F (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES	
The property owner, owner's authorized representative, or local floodplain management official may to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). Reference the Foundation Type Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to	be completed. Enter heights to the Diagrams (at the end of Section H
H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the	E Lowest Adjacent Grade (LAG):
a) For Building Diagrams 1A, 1B, 3, and 5–8. Top of bottom floor (include above-grade floors only for buildings with crawlspaces or enclosure floors) is:	meters above the LAG
b) For Building Diagrams 2A, 2B, 4, and 6–9. Top of next	meters above the LAG
H2. Is <b>all</b> Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the apply Yes No	
SECTION I – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESEN	TATIVE) CERTIFICATION
The property owner or owner's authorized representative who completes Sections A, B, and H mus A, B, and H are correct to the best of my knowledge. <b>Note:</b> If the local floodplain management offici indicate in Item G2.b and sign Section G.	
Check here if attachments are provided (including required photos) and describe each attachme	ent in the Comments area.
Property Owner or Owner's Authorized Representative Name:	
Address:	
	ZIP Code:
Telephone: Ext.: Email:	
Signature: Date:	
Comments:	

# IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11 **BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

Building Street Address (including Apt., U	nit, Suite, and/or Bldg.	No.)	or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE
590 Companion Way				Delian Number
City: Longboat Key	State:	FL	ZIP Code: 34228	Policy Number:
				Company NAIC Number:

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo One

Photo One Caption: Front View 03/26/2024

Clear Photo One



Photo Two

Photo Two Caption: Rear View 03/26/2024

Clear Photo Two

# IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11 **BUILDING PHOTOGRAPHS**

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 590 Companion Way			FOR INSURANCE COMPANY USE
State: FL	ZIP Code:	34228	Policy Number:  Company NAIC Number:
			51

Insert the third and fourth photographs below. Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo Three

Photo Three Caption: Left Side View 03/26/2024

Clear Photo Three



Photo Four

Photo Four Caption: Right Side View 03/26/2024

Clear Photo Four



# **Most Widely Accepted and Trusted**

# **ICC-ES Evaluation Report**

**ESR-2074** 

Reissued 02/2023 This report is subject to renewal 02/2025.

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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



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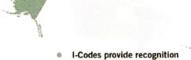
ICC-ES Evaluation Reports are not to be construed as representing aesthetics or any other attributes not specifically addressed, nor are they to be construed as an endorsement of the subject of the report or a recommendation for its use. There is no warranty by ICC Evaluation Service, LLC, express or implied, as to any finding or other matter in this report, or as to any product covered by the report.











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# **ICC-ES Evaluation Report ESR-2074**

**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:

- 2021, 2018, 2015, 2012, 2009 and 2006 International Building Code® (IBC)
- 2021, 2018, 2015, 2012, 2009 and 2006 International Residential Code® (IRC)
- 2021 and 2018 International Energy Conservation Code®
- 2013 Abu Dhabi International Building Code (ADIBC)†

<sup>†</sup>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 Reissued February 2023

This report is subject to renewal February 2025.

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

#### 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  $\frac{1}{4}$ -inch-by- $\frac{1}{4}$ -inch (6.35 by 6.35 mm) openings, yielding 51 square inches (32 903 mm<sup>2</sup>) 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 mm<sup>2</sup>) of net free area to supply natural ventilation. Other FVs described 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 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 February 2021).
- 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 described 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.
19 MANTUA ROAD
MOUNT ROYAL, NEW JERSEY 08061
(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 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
SmartVENT®	1540-510	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
FloodVENT® Overhead Door	1540-524	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
SmartVENT® Overhead Door	1540-514	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200
Wood Wall FloodVENT®	1540-570	14" X 8 <sup>3</sup> / <sub>4</sub> "	200
Wood Wall FloodVENT® Overhead Door	1540-574	14" X 8 <sup>3</sup> / <sub>4</sub> "	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

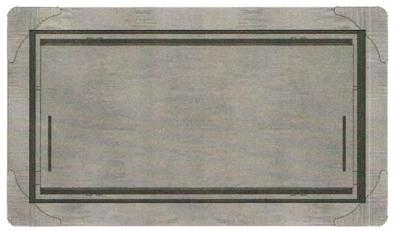


FIGURE 2—SMART VENT MODEL 1540-520



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

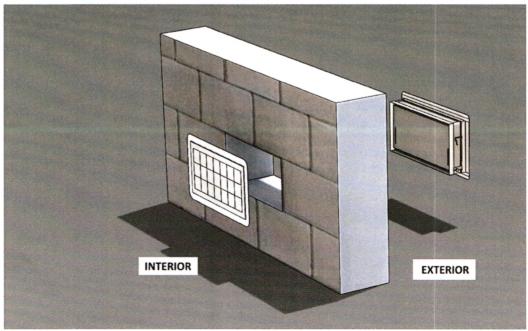


FIGURE 4—FLOOD VENT SEALING KIT



## **ICC-ES Evaluation Report**

## ESR-2074 CBC and CRC Supplement

Reissued February 2023

This report is subject to renewal February 2025.

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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 REPORT PURPOSE AND SCOPE

#### Purpose:

The purpose of this evaluation report supplement is to indicate that Smart Vent® Automatic Foundation Flood Vents, described in ICC-ES evaluation report ESR-2074, have also been evaluated for compliance with codes noted below.

#### Applicable code editions:

■ 2019 California Building Code (CBC)

For evaluation of applicable chapters adopted by the California Office of Statewide Health Planning and Development (OSHPD) AKA: California Department of Health Care Access and Information (HCAI) and the Division of State Architect (DSA), see Sections 2.1.1 and 2.1.2 below.

■ 2019 California Residential Code (CRC)

#### 2.0 CONCLUSIONS

#### 2.1 CBC:

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the evaluation report ESR-2074, comply with 2019 CBC Chapter 12, provided the design and installation are in accordance with the 2018 International Building Code® (IBC) provisions noted in the evaluation report and the additional requirements of CBC Chapters 12 and 16, as applicable.

#### 2.1.1 OSHPD:

The applicable OSHPD Sections and Chapters of the CBC are beyond the scope of this supplement.

#### 2.1.2 DSA:

The applicable DSA Sections and Chapters of the CBC are beyond the scope of this supplement.

#### 2.2 CRC:

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the evaluation report ESR-2074, comply with the 2019 CRC, provided the design and installation are in accordance with the 2018 International Residential Code® (IRC) provisions noted in the evaluation report.

This supplement expires concurrently with the evaluation report, reissued February 2023.





### **ICC-ES Evaluation Report**

### **ESR-2074 FBC Supplement**

Reissued February 2023

This report is subject to renewal February 2025.

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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 REPORT PURPOSE AND SCOPE

#### Purpose:

The purpose of this evaluation report supplement is to indicate that Smart Vent® Automatic Foundation Flood Vents, described in ICC-ES evaluation report ESR-2074, have also been evaluated for compliance with the codes noted below.

#### Applicable code editions:

- 2020 Florida Building Code—Building
- 2020 Florida Building Code—Residential

#### 2.0 CONCLUSIONS

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the evaluation report ESR-2074, comply with the Florida Building Code—Building and the Florida Building Code—Residential, provided the design requirements are determined in accordance with the Florida Building Code—Building or the Florida Building Code—Residential, as applicable. The installation requirements noted in ICC-ES evaluation report ESR-2074 for 2018 International Building Code® meet the requirements of the Florida Building Code—Building or the Florida Building Code—Residential, as applicable.

Use of the Smart Vent® Automatic Foundation Flood Vents has also been found to be in compliance with the High-Velocity Hurricane Zone provisions of the Florida Building Code—Building and the Florida Building Code—Residential.

For products falling under Florida Rule 61G20-3, verification that the report holder's quality assurance program is audited by a quality assurance entity approved by the Florida Building Commission for the type of inspections being conducted is the responsibility of an approved validation entity (or the code official when the report holder does not possess an approval by the Commission).

This supplement expires concurrently with the evaluation report, reissued February 2023.



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