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

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

ELEVATION CERTIFICATE IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

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: Randall S. Welch and Cynthia M. Heit-Welch	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 6201 Gulf of Mexico Drive	Company NAIC Number:
City: Town of Longboat Key State: FL	ZIP Code: 34228
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Nu Lot 8, Sleepy Lagoon, Plat Book 7, Page 14, Public Records of Manatee County, Florida;	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): Residential	ABL DRALLY, SELECTION OF
A5. Latitude/Longitude: Lat. N27°25'23.74" Long. W082°40'15.91" Horizontal Datum:	NAD 1927 ⊠NAD 1983 □ WGS 84
A6. Attach at least two and when possible four clear photographs (one for each side) of the buildin A7. Building Diagram Number:	g (see Form pages 7 and 8).
A0. Face building with a section of the section of	
a) Square footage of crawlspace or enclosure(s): 4,626.00 sq. ft.	SEP 1 4 2023
b) Is there at least one permanent flood opening on two different sides of each enclosed area?	TOWN OF LONGBOAT KEY
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 fool Non-engineered flood openings: Engineered flood openings: 24	above adjacent grade:
d) Total net open area of non-engineered flood openings in A8.c: sq. in.	
e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructi	ons): 4,800.00 sq. ft.
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): 4,800.00 sq. ft.	9655 50330 \$1 (3 (3)
A9. For a building with an attached garage:	
a) Square footage of attached garage:sq. ft.	
b) Is there at least one permanent flood opening on two different sides of the attached garage'	? Yes No N/A
c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adj. Non-engineered flood openings: Engineered flood openings:	acent grade:
d) Total net open area of non-engineered flood openings in A9.αsq. in.	
e) Total rated area of engineered flood openings in A9.c (attach documentation - see Instruction	ons): sq. ft.
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): sq. ft.	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFO	RMATION
B1.a. NFIP Community Name: Town of Longboat Key B1.b. NFIP Community Ide	ntification Number: 125126
B2. County Name: Manatee B3. State: FL B4. Map/Panel No.:	1201C0291 B5. Suffix: F
B6. FIRM Index Date: 08/10/2021 B7. FIRM Panel Effective/Revised Date: 08/10/20	21
B8. Flood Zone(s): AE B9. Base Flood Elevation(s) (BFE) (Zone AO, use B	Base Flood Depth): 11
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 Other	/Source:
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Prot Designation Date:	ected Area (OPA)? Yes No
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? ⊠ Yes ☐	No

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box N	No.: FOR	INSURANCE COMPANY USE		
6201 Gulf of Mexico Drive City: Town of Longboat Key State: FL ZIP Code: 34228	Policy	Policy Number:		
City: Town of Longboat Key State: FL ZIP Code: 34228	Comp	Company NAIC Number:		
SECTION C – BUILDING ELEVATION INFORMATION (S	SURVEY REQU	IRED)		
C1. Building elevations are based on: Construction Drawings* Building Under *A new Elevation Certificate will be required when construction of the building is compared to the construction of the co		Finished Construction		
C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (with BFE), A99. Complete Items C2.a–h below according to the Building Diagram specified in Ite Benchmark Utilized: FDEP Brass Rod #W689 Vertical Datum: NAV	em A7. In Puerto f	AR/A1–A30, AR/AH, AR/AO, Rico only, enter meters.		
Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other:				
Datum used for building elevations must be the same as that used for the BFE. Conversion If Yes, describe the source of the conversion factor in the Section D Comments area.	on factor used?	Yes No		
a) Top of bottom floor (including basement, crawlspace, or enclosure floor):	6.50	Check the measurement (1984):		
b) Top of the next higher floor (see Instructions):	18.00	☐ feet ☐ meters		
c) Bottom of the lowest horizontal structural member/(see Instructions):	16.00	✓ feet ☐ meters		
d) Attached garage (top of slab):	1.80	feet meters		
 e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): 	13.03	⊠ feet ☐ meters		
f) Lowest Adjacent Grade (LAG) next to building: Astural Finished	5.63	☐ feet ☐ meters		
g) Highest Adjacent Grade (HAG) next to building: Natural Finished	6.24			
 Finished LAG at lowest elevation of attached deck or stairs, including structural support: 	6.58	☑ feet ☐ meters		
SECTION D - SURVEYOR, ENGINEER, OR ARCHITEC	CT CERTIFICAT	TION		
This certification is to be signed and sealed by a land surveyor, engineer, or architect auth information. I certify that the information on this Certificate represents my best efforts to in false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section Were latitude and longitude in Section A provided by a licensed land surveyor? Yes Check here if attachments and describe in the Comments area.	terpret the data a	w to certify elevation vailable. I understand that any CEIVED P 1 4 2023 F LONG F LONG ABOVE ABOVE STATE OF FLORIDA Place Seal Here		
Certifier's Name: Walter J. Smith License Number: PSM #48	907 Planning	Suite Bank		
Title: Florida Survey Manager		The cense Number		
Company Name: ESP Associates FI, Inc		Lense Number 4807		
Address: 518 13th Street West		STATE OF		
City: Bradenton State: FL ZIP Code: 34	205	FLORIDA		
Signature: Walter J. Smith Digitally signed by Walter J Smith DN. cn: Walter J Smith On Consultance J Smith On Con	/2023	Jan Surveyor and Surveyor		
Telephone: (941) 345-5451 Ext.: Email: wjsmith@espassociates.co				
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2)				
Comments (in studios acuses of conversion factor in C2; type of equipment and location of	er C2 e. and desc	rintion of any attachments):		

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments): Site BM based on FDEP BM # W689 with a published Elevation= 4.55' feet (NAVD 1988). A8 c) Engineered openings manufactured by Smartvent Products, Inc., model number 1540-520, ICC-ES Report # ESR-2074 (attached). Rated at 200 square feet per unit. C2(e) Lowest equipment servicing the building is an The Bottom of the Electric Panel of the Residence on the North wall inside of Garage 1. Latitude and Longitude are based on the Florida State Plane Coordinate System, West Zone, North American Datum of 1983 (2011 Adjustman):sField data collected on 08/18/2023. See attached for convenience.

Additional Comments to Elevation Certificate in Section D for 6201 Gulf Of Mexico Drive

The Residence plans was permitted under the FEMA FIRM Panel Number 1201C0291 Suffix "E" with the FIRM index Date 03/17/2014, with the Base Flood Elevation at 10.00 feet NAVD 1988. The new Panel is 1201C0291 Suffix "F" and the index Date of 08/10/2021, with the Base Flood Elevation at 11.00 feet NAVD 1988.

There are 3 louvered vents on the Southeast side (Left side of Residence) ground level wall below the pool deck that are for ventilation purpose and not required nor used as flood drainage.

RECEIVED

SEP 1 4 2023
TOWN OF LONGBOAT KEY
Planning, Zoning & Building

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE
6201 Gulf of Mexico Drive	Policy Number:
City: Town of Longboat Key State: FL ZIP Code: 34228	Company NAIC Number:
SECTION E – BUILDING MEASUREMENT INFORMATION (SURV FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHO	EY NOT REQUIRED) UT BFE)
For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use nati intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the enter meters.	ural grade, if available. If the Certificate is measurement used. In Puerto Rico only,
Building measurements are based on: Construction Drawings* Building Under Construction Prawings Building Under Construction of the building is complete.	uction* Finished Construction
E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check t measurement is above or below the natural HAG and the LAG.	ne appropriate boxes to show whether the
a) Top of bottom floor (including basement, crawlspace, or enclosure) is:	ers above or below the HAG.
b) Top of bottom floor (including basement,	ore D shows or D below the LAG
crawlspace, or enclosure) is:	
E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 at next higher floor (C2.b in applicable	nd/or 9 (see pages 1–2 of Instructions), the
Building Diagram) of the building is:	ers 🗌 above or 📗 below the HAG.
E3. Attached garage (top of slab) is:	ers 🗌 above or 📗 below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is:	ers above or below the HAG.
E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated floodplain management ordinance? Yes No Unknown The local official	in accordance with the community's I must certify this information in Section G.
SECTION F - PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRES	SENTATIVE) CERTIFICATION
The property owner or owner's authorized representative who completes Sections A, B, and E f	or Zone A (without BFE) or Zone AO must
sign here. The statements in Sections A, B, and E are correct to the best of my knowledge	
sign here. The statements in Sections A, B, and E are correct to the best of my knowledge Check here if attachments and describe in the Comments area.	
Check here if attachments and describe in the Comments area.	
Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address:	ZIP Code:
Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address:	ZIP Code:
Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address:	
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Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City: Signature: Telephone: Ext.: Email: Comments:	
Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City: State: Signature: Telephone: Ext.: Email: Comments: RECEIVED SEP 14 2023 TOWN OF LONGBOAT KEY	
Check here if attachments and describe in the Comments area. Property Owner or Owner's Authorized Representative Name: Address: City: State: Signature: Telephone: Ext.: Email: Comments: RECEIVED SEP 1 4 2023	

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

	ng Street Address (including Apt., Unit, Suite	e, and/or Bldg. No.)	or P.O. Route and B	Box No.:	FOR INS	SURANCE COMPANY USE
	Gulf of Mexico Drive	Oliver El	710.0.1240	20	Policy Nu	mber:
City:	Town of Longboat Key	State: FL	ZIP Code: 342	28	Company	NAIC Number:
	SECTION G - COMMUNITY INFOR	MATION (RECO	MMENDED FOR	COMMUN	ITY OFFICIA	AL COMPLETION)
	ocal official who is authorized by law or ord on A, B, C, E, G, or H of this Elevation Cer					ordinance can complete
G1.	The information in Section C was tal engineer, or architect who is authoric elevation data in the Comments are:	zed by state law to				
G2.a.	A local official completed Section E E E5 is completed for a building locate		ed in Zone A (witho	ut a BFE), Z	one AO, or Zo	one AR/AO, or when item
G2.b.	A local official completed Section H	for insurance purpo	oses.			
G3.	☐ In the Comments area of Section G,	the local official de	escribes specific co	rrections to	the informatio	n in Sections A, B, E and H.
G4.	☐ The following information (Items G5-	-G11) is provided for	or community flood	plain manag	gement purpos	ses.
G5.	Permit Number:	G6. Date P	Permit Issued:			
G7.	Date Certificate of Compliance/Occupan	cy Issued:				
G8.	This permit has been issued for:	w Construction	Substantial Impro	ovement		10 300()
G9.a.	Elevation of as-built lowest floor (includir building:	ng basement) of the	4. 2	_	meters	Datum:
G9.b.	Elevation of bottom of as-built lowest hor member:	rizontal structural	Aleson edit regeti	feet	meters	Datum:
G10.a	. BFE (or depth in Zone AO) of flooding at	the building site:	i (sateria peresuara	feet	meters	Datum:
G10.b	 Community's minimum elevation (or deprequirement for the lowest floor or lowest member: 		al	☐ feet	meters	Datum:
G11.	Variance issued? Yes No If	yes, attach docum	entation and descr	ibe in the Co	omments area	
Local		ction G must sign h e, I have also provi	ded specific correc	tions in the	Comments are	etion G and certify that it is ea of this section.
	Community Name:					
Telepl						•
Addre	ss:					
City:				State:	ZIP C	ode:
Signat	ure:		Date:			
	ents (including type of equipment and loca ns A, B, D, E, or H):	ation, per C2.e; des	scription of any atta	chments; ar	nd corrections	to specific information in
CCCIIC	10 A, B, B, E, Si H).			R	ECE	VED
					SEP 14	
					/N OF LONganning, Zoning	GBOAT KEY g & Building

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (includi	ing Apt., Unit, Suite	, and/or Bldg. No.) or	P.O. Route and Box No.:	FOR INSURANCE COMPANY USE	
6201 Gulf of Mexico Drive				Policy Number:	
City: Town of Longboat Key	у	_ State: FL	ZIP Code: 34228	Company NAIC Number:	
SECTIO			R HEIGHT INFORMATION R INSURANCE PURPOSE		
to determine the building's firs	t floor height for institute tenth of a meter i	surance purposes. Sin Puerto Rico). Ref	Sections A, B, and I must also ference the Foundation Type	be complete Section H for all flood zones be completed. Enter heights to the Diagrams (at the end of Section Hocomplete this section.	
H1. Provide the height of the	top of the floor (as	indicated in Founda	ation Type Diagrams) above t	ne Lowest Adjacent Grade (LAG):	
 a) For Building Diagram floor (include above-grade subgrade crawlspaces or 	e floors only for bui	ildings with	feet	meters above the LAG	
 b) For Building Diagram higher floor (i.e., the floor enclosure floor) is: 			feet	meters above the LAG	
				ated to or above the floor indicated by the ppropriate Building Diagram?	
SECTION I - PRO	PERTY OWNER	R (OR OWNER'S	AUTHORIZED REPRESE	NTATIVE) CERTIFICATION	
indicate in Item G2.b and sign	Section G.				
Check here if attachments Property Owner or Owner's Au Address:	are provided (inclu uthorized Represe	ntative Name:	Chata	The control of the category	
Check here if attachments Property Owner or Owner's Au Address:	are provided (inclu uthorized Represe		Chata	The state of the second	
Check here if attachments Property Owner or Owner's Au Address:	are provided (inclu uthorized Represe	ntative Name:	Chata	The state of the second of the	
Check here if attachments Property Owner or Owner's Au Address: City:	are provided (inclu uthorized Represe	ntative Name:	State:	The state of the second of the	
Check here if attachments Property Owner or Owner's Au Address: City: Signature:	are provided (inclu uthorized Represe	ntative Name:	State:	The state of the second of the	
Check here if attachments Property Owner or Owner's Au Address: City: Signature: Telephone:	are provided (inclu uthorized Represe	ntative Name:	State:	The state of the second of the	
Check here if attachments Property Owner or Owner's Au Address: City: Signature: Telephone:	are provided (inclu uthorized Represe	ntative Name:	State:	The state of the second of the	
Check here if attachments Property Owner or Owner's Au Address: City: Signature: Telephone:	are provided (inclu uthorized Represe	ntative Name:	State: Date:	ZIP Code:	
Check here if attachments Property Owner or Owner's Au Address: City: Signature: Telephone:	are provided (inclu uthorized Represe	ntative Name:	State:	ZIP Code:	
Check here if attachments Property Owner or Owner's Au Address: City: Signature: Telephone:	are provided (inclu uthorized Represe	ntative Name:	Date:	ZIP Code: EIVED 4 2023	
Check here if attachments Property Owner or Owner's Au Address: City: Signature: Telephone:	are provided (inclu uthorized Represe	ntative Name:	Date: State: SEP 1	ZIP Code: LIVED 4 2023 DNGBOAT KEY	
Check here if attachments Property Owner or Owner's Au Address: City: Signature: Telephone:	are provided (inclu uthorized Represe	ntative Name:	Date: State: SEP 1	ZIP Code: EIVED 4 2023	
Check here if attachments Property Owner or Owner's Au Address: City: Signature: Telephone:	are provided (inclu uthorized Represe	ntative Name:	Date: State: SEP 1	ZIP Code: LIVED 4 2023 DNGBOAT KEY	
Check here if attachments Property Owner or Owner's Au Address: City: Signature: Telephone:	are provided (inclu uthorized Represe	ntative Name:	Date: State: SEP 1	ZIP Code: LIVED 4 2023 DNGBOAT KEY	

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:		FOR INSURANCE COMPANY USE	
6201 Gulf of Mexico Drive City: Town of Longboat Key	State: FL ZIP	Code: 34228	Policy 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 (08/18/2023)

Clear Photo One



Photo Two

Photo Two Caption: Rear View (08/18/2023)

Clear Photo Two

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IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:	FOR I
6201 Gulf of Mexico Drive	Policy I
	Policy

City: Town of Longboat Key State: FL

ZIP Code: 34228

OR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number:

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.

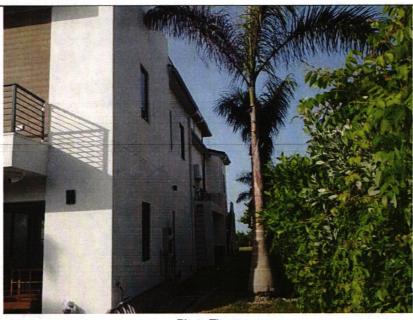


Photo Three

Photo Three Caption: Right Side from Front View (08/18/2023)

Clear Photo Three



Photo Four

Photo Four Caption: Left Side from Front View (08/18/2023)

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:		FOR INSURANCE COMPANY USE
6201 Gulf of Mexico Drive City: Town of 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: Vent 1 (08/18/2023)

Clear Photo One



Photo Two

Photo Two Caption: Vent 2 (08/18/2023)

Clear Photo Two

DWN OF LONGBOAT KI

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 6201 Gulf of Mexico Drive

State: FL ZIP Code: 34228

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number:

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: Vent 3 (08/18/2023)

City: Town of Longboat Key

Clear Photo Three



Photo Four

Photo Four Caption: Vent 4 (08/18/2023)

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:		FOR INSURANCE COMPANY USE
6201 Gulf of Mexico Drive City: Town of Longboat Key	State: FL ZIP Code: 34228	Policy 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: Vent 5 (08/18/2023)

Clear Photo One

OWN OF LONGBOAT KEY Planning, Zoning & Building

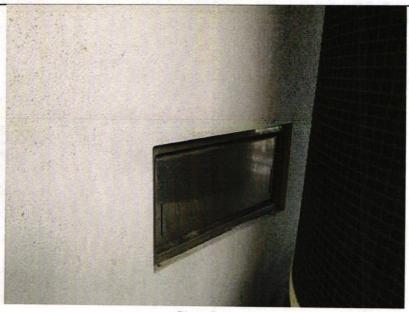


Photo Two

Photo Two Caption: Vent 6 (08/18/2023)

Clear Photo Two

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

BUILDING PHOTOGRAPHS

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:			FOR INSURANCE COMPANY USE		
6201 Gulf of Mexico Drive City: Town of Longboat Key State: FL ZIP Code: 34228					Policy Number: Company NAIC Number:
And the second s					Company NAIC Number.

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: Vent 7 (08/18/2023)

Clear Photo Three



Photo Four

Photo Four Caption: Vent 8 (08/18/2023)

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:			FOR INSURANCE COMPANY USE
6201 Gulf of Mexico Drive City: Town of Longboat Key	State: FL	ZIP Code: 34228	Policy 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: Vent 9 (08/18/2023)

Clear Photo One

WN OF LONGBOAT K Planning, Zoning & Building



Photo Two

Photo Two Caption: Vent 10 (08/18/2023)

Clear Photo Two

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:				FOR INSURANCE COMPANY USE
6201 Gulf of Mexico Drive City: Town of Longboat Key	State:	FL	ZIP Code: <u>34228</u>	Policy Number: Company NAIC Number:

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: Vent 11 (08/18/2023)

Clear Photo Three



Photo Four

Photo Four Caption: Vent 12 (08/18/2023)

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit	FOR INSURANCE COMPANY USE			
6201 Gulf of Mexico Drive City: Town of Longboat Key	State:	FL	ZIP Code: <u>34228</u>	Policy 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: Vent 13 (08/18/2023)

Clear Photo One



Photo Two

Photo Two Caption: Vent 14 (08/18/2023)

Clear Photo Two

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

Continuation Page

Building Street Address (including Apt., Uni	FOR INSURANCE COMPANY USE		
6201 Gulf of Mexico Drive	Policy Number:		
City: Town of Longboat Key	State: FL	ZIP Code: 34228	Company NAIC Number:

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: Vent 15 (08/18/2023)

Clear Photo Three

Planning, Zoning & Building



Photo Four

Photo Four Caption: Vent 16 (08/18/2023)

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit, S	FOR INSURANCE COMPANY USE			
6201 Gulf of Mexico Drive City: Town of Longboat Key	State:	FL	ZIP Code: 34228	Policy 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: Vent 17 (08/18/2023)

Clear Photo One



Photo Two

Photo Two Caption: Vent 18 (08/18/2023)

Clear Photo Two

TOWN OF LONGBOAT K
Planning, Zoning & Building

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

Continuation Page

Building Street Address (including Apt., Unit, 6201 Gulf of Mexico Drive	FOR INSURANCE COMPANY USE			
City: Town of Longboat Key	State:	FL	ZIP Code: 34228	Policy Number: Company NAIC Number:

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: Vent 19 (08/18/2023)

Clear Photo Three



Photo Four

Photo Four Caption: Vent 20 (08/18/2023)

Clear Photo Four

SEP TE MAN

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19 BUILDING PHOTOGRAPHS

See Instructions for Item A6.

	See instructions for item Ab.	
Building Street Address (including Apt., Unit, Su 6201 Gulf of Mexico Drive	uite, and/or Bldg. No.) or P.O. Route and Box N	
City: Town of Longboat Key	State:FL ZIP Code: <u>34228</u>	Policy Number: Company NAIC Number:
Instructions: Insert below at least two and whe able to take front and back pictures of townho "Right Side View," or "Left Side View." Photog close-up photograph of representative flood o	suses/rowhouses). Identify all photographs w graphs must show the foundation. When floor	ith the date taken and "Front View," "Rear View," d openings are present, include at least one
	Photo One	
Photo One Caption: Vent 21 (08/18/2023)		Clear Photo One
	Photo Two	SEP 14 2023 TOWN OF LONGBOAT KEY Planning, Zoning & Building
Photo Two Caption: Vent 22 (08/18/2023)		Clear Photo Two

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

	BUILDING PHOTOGRAPHS Continuation Page	
Building Street Address (including Apt., Unit, S 6201 Gulf of Mexico Drive	FOR INSURANCE COMPANY USE	
City: Town of Longboat Key	State: FL ZIP Code: 34228	Policy Number: Company NAIC Number:
Insert the third and fourth photographs below View," or "Left Side View." When flood open vents, as indicated in Sections A8 and A9.	w. Identify all photographs with the date taken and ings are present, include at least one close-up photographs	l "Front View," "Rear View," "Right Side
	Photo Three	
Photo Three Caption: Vent 23 (08/18/202	3)	Clear Photo Three
		TOWN OF LONGBOAT KEY

Photo Four

Page 8 of 19

Clear Photo Four

Photo Four Caption: Vent 24 (08/18/2023)



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ICC-ES Evaluation Report

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ESR-2074

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

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"



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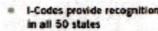


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ICC-ES Evaluation Report ESR-2074

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 Code⁶ (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

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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 ½-inch-by-½-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 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:

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- 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 Smart/ENT® Stacking Model #1540-511 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 Flood/VENT® 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 12.56 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	153/4" X 73/4"	200	
SmartVENT®	1540-510	153/4" X 73/4"	200	
FloodVENT® Overhead Door	1540-524	153/4" X 73/4"	200	
SmartVENT® Overhead Door	1540-514	153/4" X 73/4"	200	
Wood Wall FloodVENT®	1540-570	14" X 83/4"	200	
Wood Wall FloodVENT® Overhead Door	1540-574	14" X 83/4"	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

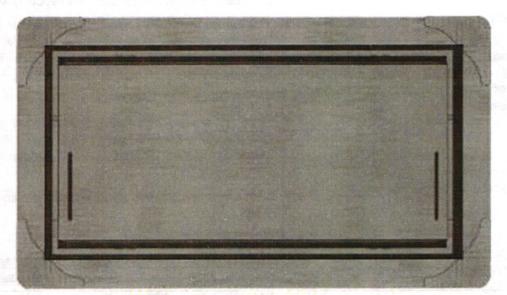


FIGURE 2—SMART VENT MODEL 1540-520

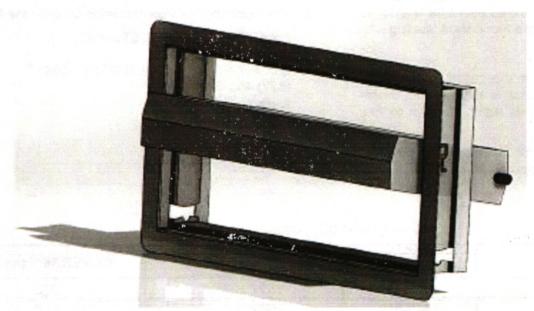


FIGURE 3-SMART VENT: SHOWN WITH FLOOD DOOR PIVOTED OPEN

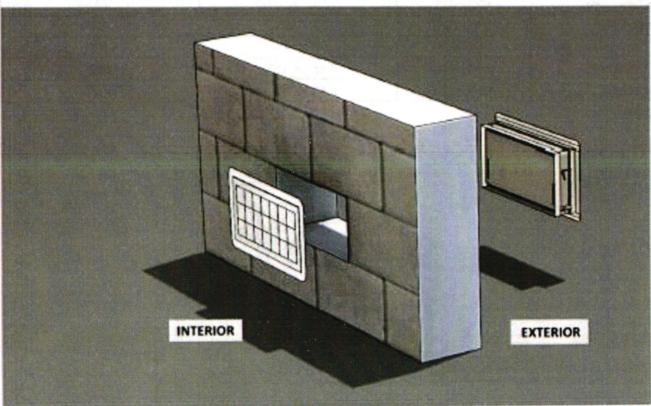


FIGURE 4-FLOOD VENT SEALING KIT



ICC-ES Evaluation Report

ESR-2074 CBC and CRC Supplement

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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; #1540-524; #1540-524; #1540-514 FLOOD VENT SEALNOK IT #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.

22 CRC-

The Smart Verit* 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

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DIVISION: 08 00 00—OPENINGS

Section: 08 95 43—Vents/Foundation Flood Vents

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SMART VENT PRODUCTS, INC.

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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 Verit® 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.

