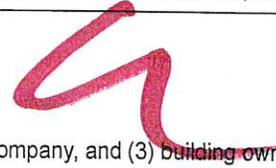


# ELEVATION CERTIFICATE

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						FOR INSURANCE COMPANY USE
A1. Building Owner's Name <b>KENNY BADURAK</b>					Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>10788 EAST TAYLOR ROAD</b>					Company NAIC Number:	
City <b>GULFPORT</b>		State <b>MISSISSIPPI</b>		ZIP Code <b>39503</b>		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>TAX PARCEL NUMBER 10090-02-004.006. SECTION 20, TOWNSHIP 7 SOUTH, RANGE 10 WEST.</b>						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>RESIDENTIAL</b>						
A5. Latitude/Longitude: Lat. <b>N 30°24'50.04"</b> Long. <b>W 88°01'01.94"</b> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983						
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.						
A7. Building Diagram Number <b>1B</b>						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s) <b>N/A</b> sq ft						
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>N/A</b>						
c) Total net area of flood openings in A8.b <b>N/A</b> sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
A9. For a building with an attached garage:						
a) Square footage of attached garage <b>600</b> sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>4</b>						
c) Total net area of flood openings in A9.b <b>800</b> sq in						
d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number <b>CITY OF GULFPORT 285253</b>			B2. County Name <b>HARRISON COUNTY</b>		B3. State <b>MISSISSIPPI</b>	
B4. Map/Panel Number <b>28047C0267</b>	B5. Suffix <b>G</b>	B6. FIRM Index Date <b>12/21/2017</b>	B7. FIRM Panel Effective/Revised Date <b>6/16/2009</b>	B8. Flood Zone(s) <b>AE</b>	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) <b>15'</b>	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA						

**ELEVATION CERTIFICATE**

OMB No. 1660-0008  
Expiration Date: November 30, 2022

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>10788 EAST TAYLOR ROAD</b>			Policy Number:
City <b>GULFPORT</b>	State <b>MISSISSIPPI</b>	ZIP Code <b>39503</b>	Company NAIC Number

**SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: **USM RTK NETWORK** Vertical Datum: **NAVD88**

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) 17.0  feet  meters
- b) Top of the next higher floor N/A  feet  meters
- c) Bottom of the lowest horizontal structural member (V Zones only) N/A  feet  meters
- d) Attached garage (top of slab) 14.0  feet  meters
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 17.0  feet  meters
- f) Lowest adjacent (finished) grade next to building (LAG) 13.6  feet  meters
- g) Highest adjacent (finished) grade next to building (HAG) 14.0  feet  meters
- h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 12.7  feet  meters

**SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor?  Yes  No  Check here if attachments.

Certifier's Name <b>PATRICK M. MARTINO</b>	License Number <b>02838</b>	
Title <b>PROFESSIONAL LAND SURVEYOR</b>		
Company Name <b>PATRICK M. MARTINO, P.L.S. INC.</b>		
Address <b>13010 KAYLEIGH COVE</b>		
City <b>BILOXI</b>	State <b>MISSISSIPPI</b>	

Signature Date **5/15/2020** Telephone **(228) 396-2283** Ext. **JOB# P20626**

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)

**CITY OF GULFPORT HAS ADOPTED 1 FOOT OF FREEBOARD ABOVE THE BASE FLOOD ELEVATION SHOWN IN SECTION B9. CONTACT CITY OF GULFPORT BUILDING OFFICIALS FOR ANY FURTHER BUILDING HEIGHT REQUIREMENTS PRIOR TO ANY NEW CONSTRUCTION. LOWEST MACHINERY SHOWN IS THE AIR CONDITIONER UNIT.**

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expiration Date: November 30, 2022

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>10788 EAST TAYLOR ROAD</b>			Policy Number:
City <b>GULFPORT</b>	State <b>MISSISSIPPI</b>	ZIP Code <b>39503</b>	Company NAIC Number

## SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

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  meters  above or  below the HAG.
  - b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_  feet  meters  above or  below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E3. Attached garage (top of slab) is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_  feet  meters  above or  below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  Yes  No  Unknown. The local official must certify this information in Section G.

## SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_

Comments

Check here if attachments.



**ELEVATION CERTIFICATE**

**BUILDING PHOTOGRAPHS**

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2022

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>10788 EAST TAYLOR ROAD</b>			Policy Number:
City <b>GULFPORT</b>	State <b>MISSISSIPPI</b>	ZIP Code <b>39503</b>	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 OF RESIDENCE. THIS PICTURE WAS TAKEN ON 5/15/2020.**



Photo Two

Photo Two Caption **REAR VIEW OF RESIDENCE. THIS PICTURE WAS TAKEN ON 5/15/2020.**

**ELEVATION CERTIFICATE**

**BUILDING PHOTOGRAPHS**

Continuation Page

OMB No. 1660-0008  
Expiration Date: November 30, 2022

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>10788 EAST TAYLOR ROAD</b>			Policy Number:
City <b>GULFPORT</b>	State <b>MISSISSIPPI</b>	ZIP Code <b>39503</b>	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 AB.



Photo Three

Photo Three Caption **RIGHT VIEW OF RESIDENCE. THIS PICTURE WAS TAKEN ON 5/15/2020.**

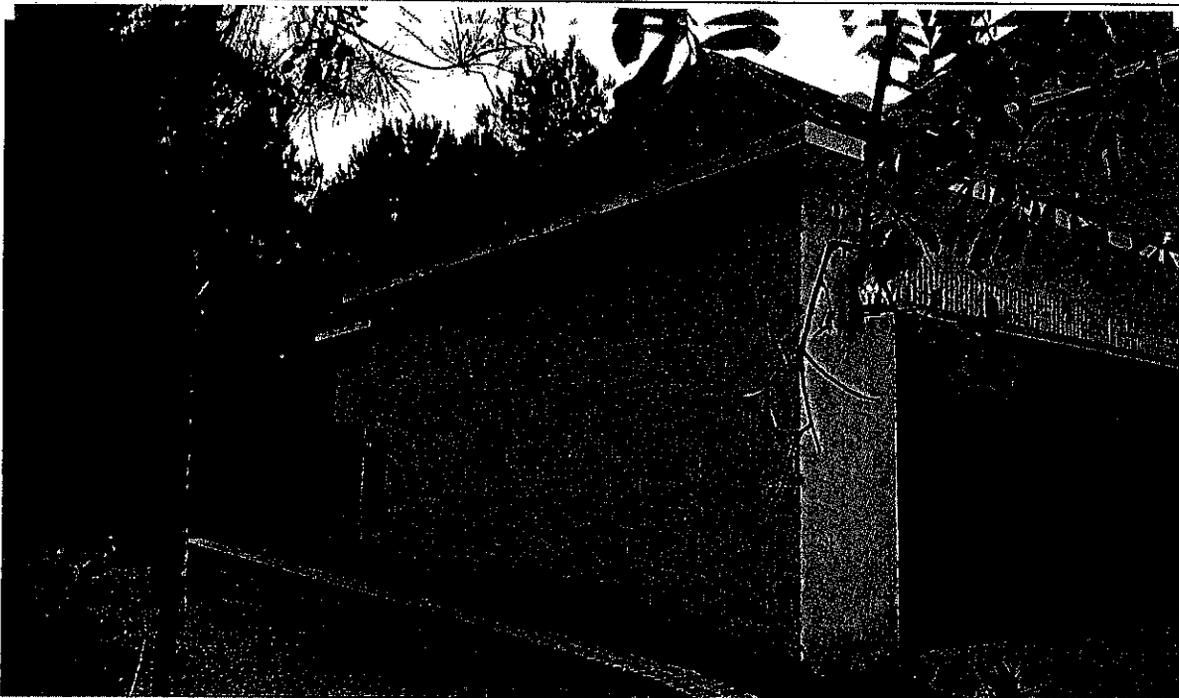


Photo Four Caption **LEFT VIEW OF RESIDENCE. THIS PICTURE WAS TAKEN ON 5/15/2020.**

**ELEVATION CERTIFICATE**

**BUILDING PHOTOGRAPHS**

Continuation Page

OMB No. 1660-0008  
Expiration Date: November 30, 2022

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (Including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>10788 EAST TAYLOR ROAD</b>			Policy Number:
City <b>GULFPORT</b>	State <b>MS</b>	ZIP Code <b>39503</b>	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 Three

Photo Three Caption **PICTURE OF FLOOD VENTS INSTALLED. THIS PICTURE WAS TAKEN ON 5/29/2020.**



Photo Four

Photo Four Caption **PICTURE OF FLOOD VENTS INSTALLED. THIS PICTURE WAS TAKEN ON 5/29/2020.**

# ICC-ES Evaluation Report

# ESR-2074 CBC and CRC Supplement

Issued February 2017

Revised October 16, 2018

This report is subject to renewal February 2019.

10788  
E. Taylor

[www.icc-es.org](http://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:

SMART VENT PRODUCTS, INC.

4 EA

## 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, recognized in ICC-ES master evaluation report ESR-2074, have also been evaluated for compliance with codes noted below.

### Applicable code edition:

- 2016 California Building Code (CBC)
- 2016 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 master evaluation report ESR-2074, comply with 2016 CBC Chapter 12, provided the design and installation are in accordance with the 2015 *International Building Code*® (IBC) provisions noted in the master report and the additional requirements of CBC Chapters 12, 16 and 16A, as applicable.

The products recognized in this supplement have not been evaluated under CBC Chapter 7A for use in the exterior design and construction of new buildings located in any Fire Hazard Severity Zone within State Responsibility Areas or any Wildland-Urban Interface Fire Area.

### 2.2 CRC:

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the master evaluation report ESR-2074, comply with the 2016 CRC, provided the design and installation are in accordance with the 2015 *International Residential Code*® (IRC) provisions noted in the master report.

The products recognized in this supplement have not been evaluated under 2016 CRC Chapter R337, for use in the exterior design and construction of new buildings located in any Fire Hazard Severity Zone within State Responsibility Areas or any Wildland-Urban Interface Fire Area.

The products recognized in this supplement have not been evaluated for compliance with the International Wildland-Urban Interface Code®.

This supplement expires concurrently with the master report, reissued February 2017 and revised October 16, 2018.



Most Widely Accepted and Trusted

# ICC-ES Evaluation Report

## ESR-2074 FBC Supplement

Reissued February 2017

Revised October 16, 2018

This report is subject to renewal February 2019.

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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, recognized in ICC-ES master report ESR-2074, have also been evaluated for compliance with the codes noted below.

### Applicable code editions:

- 2017 Florida Building Code—Building
- 2017 Florida Building Code—Residential

## 2.0 CONCLUSIONS

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the master evaluation report ESR-2074, comply with the Florida Building Code—Building and the FRC, provided the design and installation are in accordance with the 2015 International Building Code® provisions noted in the master report.

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 9N-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 master report, reissued February 2017 and revised October 16, 2018.



Smart Vent Products, Inc  
www.smartvent.com 1-877-441-8368  
Certified to cover 200sq/ft  
Model # 1540-570  
ESR 2074 SN# S7081668 Made in the USA

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↑ New

Vents