

# 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<br><b>Marcus Thompson</b>   |                        |  |  |                                | Policy Number:  |  |
| A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br><b>924 EAST BEACH BOULEVARD</b>  |                        |  |  |                                | Company NAIC Number:  |  |
| City<br><b>GULFPORT</b>   |                        | State<br><b>MISSISSIPPI</b>              |  | ZIP Code<br><b>39501</b>       |   |  |
| A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)<br><b>TAX PARCEL # 0911E-03-023.000, LOTS 3, 4, &amp; 5, JORDAN BROTHERS SUB'D</b>   |                        |  |  |                                |   |  |
| A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>RESIDENTIAL</b>   |                        |  |  |                                |   |  |
| A5. Latitude/Longitude: Lat. <b>N 30°22'27.12"</b> Long. <b>W 89°04'01.84"</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>723</b> sq ft   |                        |  |  |                                |   |  |
| b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>3</b>  |                        |  |  |                                |   |  |
| c) Total net area of flood openings in A9.b <b>600</b> sq in  |                        |  |  |                                |   |  |
| d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |                        |  |  |                                |   |  |
| SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION   |                        |  |  |                                |   |  |
| B1. NFIP Community Name & Community Number<br><b>CITY OF GULFPORT 285253</b>  |                        |  | B2. County Name<br><b>HARRISON COUNTY</b>                  |                                | B3. State<br><b>MISSISSIPPI</b>   |  |
| B4. Map/Panel Number<br><b>28047C0377</b>   | B5. Suffix<br><b>G</b> | B6. FIRM Index Date<br><b>12/21/2017</b> | B7. FIRM Panel Effective/ Revised Date<br><b>6/16/2009</b> | B8. Flood Zone(s)<br><b>AE</b> | B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth)<br><b>18'</b> |  |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:<br><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<br>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.<br><b>924 EAST BEACH BOULEVARD</b> |                             |                          | Policy Number:                   |
| City<br><b>GULFPORT</b>  | State<br><b>MISSISSIPPI</b> | ZIP Code<br><b>39501</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: **NGS R 191, PID BHO862** 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.

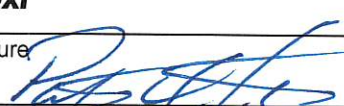
Check the measurement used.

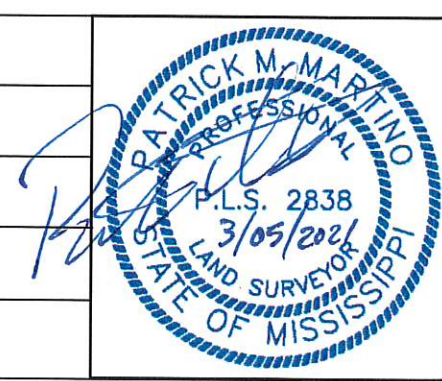
- |   |             |  |                                 |
|---|-------------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor)   | <u>20.4</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor   | <u>32.9</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (V Zones only)   | <u>N/A</u>  | <input type="checkbox"/> feet            | <input type="checkbox"/> meters |
| d) Attached garage (top of slab)  | <u>18.0</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of machinery or equipment servicing the building<br>(Describe type of equipment and location in Comments) | <u>20.4</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest adjacent (finished) grade next to building (LAG)  | <u>17.4</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest adjacent (finished) grade next to building (HAG)   | <u>18.0</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support                                  | <u>17.9</u> | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> 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<br><b>PATRICK M. MARTINO</b>  |                             | License Number<br><b>02838</b>     |                            |
| Title<br><b>PROFESSIONAL LAND SURVEYOR</b>   |                             |                                    |                            |
| Company Name<br><b>PATRICK M. MARTINO, P.L.S. INC.</b>   |                             |                                    |                            |
| Address<br><b>13010 KAYLEIGH COVE</b>  |                             |                                    |                            |
| City<br><b>BILOXI</b>  | State<br><b>MISSISSIPPI</b> | ZIP Code<br><b>39532</b>           |                            |
| Signature<br> | Date<br><b>3/05/2021</b>    | Telephone<br><b>(228) 396-2283</b> | Ext.<br><b>JOB# P21241</b> |



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)

**THE LOWEST MACHINERY SERVICING THE STRUCTURE IS THE AIR CONDITIONER UNIT C-2-E. EXISTING GENERATOR IS ALSO AT AN ELEVATION OF 20.4'. 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 CONSTRUCTION.**

**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.<br><b>924 EAST BEACH BOULEVARD</b> |                             |                          | Policy Number:                   |
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**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.



# BUILDING PHOTOGRAPHS

## ELEVATION CERTIFICATE

See Instructions for Item A6.

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

|  |                             |                          |                                  |
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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 3/05/2021.**



Photo Two

Photo Two Caption **REAR VIEW OF RESIDENCE. THIS PICTURE WAS TAKEN ON 3/05/2021.**

**ELEVATION CERTIFICATE**

**BUILDING PHOTOGRAPHS**

Continuation Page

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

|  |                             |                          |                                  |
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| City<br><b>GULFPORT</b>  | State<br><b>MISSISSIPPI</b> | ZIP Code<br><b>39501</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 **RIGHT SIDE OF RESIDENCE. PICTURE WAS TAKEN ON 3/05/2021.**



Photo Four Caption **LEFT SIDE OF RESIDENCE. PICTURE WAS TAKEN ON 3/05/2021.**

**BUILDING PHOTOGRAPHS**

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

**ELEVATION CERTIFICATE**

Continuation Page

|  |                    |                          |                                  |
|--|--------------------|--------------------------|----------------------------------|
| <b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>  |                    |                          | <b>FOR INSURANCE COMPANY USE</b> |
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| City<br><b>GULFPORT</b>  | State<br><b>MS</b> | ZIP Code<br><b>39501</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.

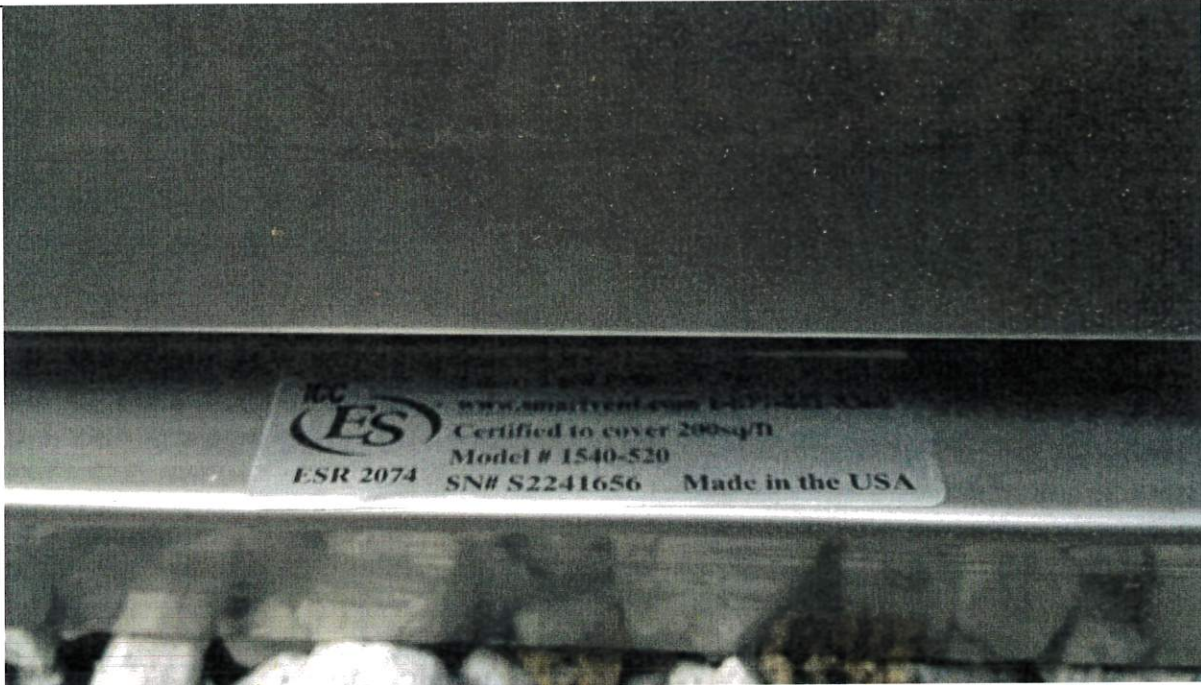


Photo Three

Photo Three Caption **PICTURE OF FLOOD VENTS. PICTURE WAS TAKEN ON 3/05/2021.**



**MODEL #1540-20 SN# 2241658**



**MODEL #1540-20 SN#2241661**

Photo Four

Photo Four Caption **PICTURE OF FLOOD VENTS. PICTURE WAS TAKEN ON 3/05/2021.**

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

Reissued December 1, 2012

This report is subject to renewal February 1, 2015.

[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 00—Vents**
**REPORT HOLDER:**
**SMARTVENT PRODUCTS, INC.**  
 450 ANDBRO DRIVE, SUITE 2B  
 PITMAN, NEW JERSEY 08071  
 (856) 307-1468

[www.smartvent.com](http://www.smartvent.com)  
[eval@smartvent.com](mailto:eval@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, and each opening provides 76 square inches (49 032 mm<sup>2</sup>) of net free area for flood mitigation in the open position. The SmartVENT™ Stacking Model #1540-511 and FloodVENT™ Stacking Model #1540-521 units each contain two vertically arranged openings per unit, providing 152 square inches (98 064 mm<sup>2</sup>) of net free area for flood mitigation in the open position.

**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<sup>3</sup>/<sub>4</sub> inches wide by 7<sup>3</sup>/<sub>4</sub> 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<sup>3</sup>/<sub>4</sub> 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 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 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 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<sup>®</sup> 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 m<sup>2</sup>) 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 m<sup>2</sup>) 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<sup>®</sup> 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:

All engineered vents are model 1540-520.

5.1 The Smart Vent<sup>®</sup> 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<sup>®</sup> 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 2007.

#### 7.0 IDENTIFICATION

The Smart VENT<sup>®</sup> 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).

feet (18.6 m<sup>2</sup>) of enclosed area, except that the SmartVENT<sup>®</sup> Stacking Model #1540-511 and FloodVENT<sup>®</sup> Stacking Model #1540-521 must be installed with a minimum of one FV for every 400 square feet (37.2 m<sup>2</sup>) 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<sup>®</sup> 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<sup>®</sup> 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<sup>®</sup> 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<sup>®</sup> 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 October 2017).
- 6.2 Test report on air infiltration in accordance with ASTM E283.

**7.0 IDENTIFICATION**

- 7.1 The Smart VENT<sup>®</sup> models and the Flood Vent Sealing Kit 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).
- 7.2 The report holder's contact information is the following:

**SMART VENT PRODUCTS, INC.**  
**430 ANDBRO DRIVE, UNIT 1**  
**PITMAN, NEW JERSEY 08071**  
**(877) 441-8368**  
[www.smartvent.com](http://www.smartvent.com)  
[info@smartvent.com](mailto:info@smartvent.com)

TABLE 1—MODEL SIZES

| MODEL NAME                                     | MODEL NUMBER | MODEL SIZE (in.)   | COVERAGE (sq. ft.) |
|--|--------------|--|--------------------|
| FloodVENT <sup>®</sup>                         | 1540-520     | 15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> " | 200                |
| SmartVENT <sup>®</sup>                         | 1540-510     | 15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> " | 200                |
| FloodVENT <sup>®</sup> Overhead Door           | 1540-524     | 15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> " | 200                |
| SmartVENT <sup>®</sup> Overhead Door           | 1540-514     | 15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> " | 200                |
| Wood Wall FloodVENT <sup>®</sup>               | 1540-570     | 14" X 8 <sup>3</sup> / <sub>4</sub> "                              | 200                |
| Wood Wall FloodVENT <sup>®</sup> Overhead Door | 1540-574     | 14" X 8 <sup>3</sup> / <sub>4</sub> "                              | 200                |
| SmartVENT <sup>®</sup> Stacker                 | 1540-511     | 16" X 16"  | 400                |
| FloodVent <sup>®</sup> Stacker                 | 1540-521     | 16" X 16"  | 400                |

For SI: 1 inch = 25.4 mm; 1 square foot = m<sup>2</sup>

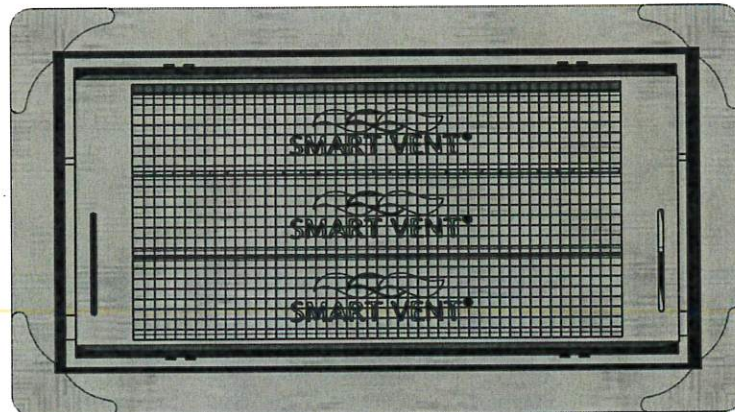


FIGURE 1—SMART VENT: MODEL 1540-510



