

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: <u>Imperial Homes of Naples, LLC</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>5921 Estero Blvd.</u>	Company NAIC Number: _____
City: <u>Ft. Myers Beach</u> State: <u>FL</u> ZIP Code: <u>33931</u>	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>Lot 3, Block F, McPhie Park, Unit Unit No. 2, Plat Book 8 page 54, Lee County, Florida.</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>Residential</u>	
A5. Latitude/Longitude: Lat. <u>N26°25'35.52"</u> Long. <u>W-81°54'31.90"</u> Horiz. Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> WGS 84	
A6. Attach at least two and when possible four clear color photographs (one for each side) of the building (see Form pages 7 and 8).	
A7. Building Diagram Number: <u>6</u>	
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s): <u>1152</u> sq. ft. b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>N/A</u> Engineered flood openings: <u>9</u> d) Total net open area of non-engineered flood openings in A8.c: <u>N/A</u> sq. in. e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): <u>3600</u> sq. ft. f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): <u>N/A</u> sq. ft.	
A9. For a building with an attached garage: a) Square footage of attached garage: <u>N/A</u> sq. ft. b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: <u>N/A</u> Engineered flood openings: <u>N/A</u> d) Total net open area of non-engineered flood openings in A9.c: <u>N/A</u> sq. in. e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): <u>N/A</u> sq. ft. f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): <u>N/A</u> sq. ft.	

SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1.a. NFIP Community Name: <u>Town of Fort Myers Beach</u>	B1.b. NFIP Community Identification Number: <u>120673</u>		
B2. County Name: <u>Lee</u>	B3. State: <u>FL</u>	B4. Map/Panel No.: <u>12071C566</u>	B5. Suffix: <u>G</u>
B6. FIRM Index Date: <u>11/17/2022</u>	B7. FIRM Panel Effective/Revised Date: <u>11/17/2022</u>		
B8. Flood Zone(s): <u>AE</u>	B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>12</u>		
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____			
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			
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

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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, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: NGS BM K-408 EL = 4.64 Vertical Datum: NAVD88

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 factor used? Yes No

If Yes, describe the source of the conversion factor in the Section D Comments area.

Check the measurement used:

a) Top of bottom floor (including basement, crawlspace, or enclosure floor): 6.0 feet meters

b) Top of the next higher floor (see Instructions): 18.1 feet meters

c) Bottom of the lowest horizontal structural member (see Instructions): 16.0 feet meters

d) Attached garage (top of slab): N/A 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): 17.9 feet meters

f) Lowest Adjacent Grade (LAG) next to building: Natural Finished 5.0 feet meters

g) Highest Adjacent Grade (HAG) next to building: Natural Finished 5.9 feet meters

h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: N/A 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 state 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 and describe in the Comments area.

Certifier's Name: John P. Maloney

License Number: 4493

Title: Professional Surveyor and Mapper, P.S.M.

Company Name: Peninsula Engineering

Address: 2600 Golden Gate Parkway

City: Naples

State: FL

ZIP Code: 34105

Telephone: (239) 403-6700

Ext.: 6730

Email: jmaloney@pen-eng.com

Signature: John P. Maloney

Date: 02/18/2025



Place Seal Here

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):

A8.a) See attached vent and area diagram.

C2.a) Is garage/storage. Entry foyer = 6.8'. Storage = 6.5'. C2.b) Is 2nd level finish floor. C2.c) Is Lowest horizontal beam.

C2.e) Is AC Pad. Pool equipment pad = 5.8'.

Vents smart vent model 1540-521. (2) Stacked vents rated 200 sq in each. Total = 400 sq in.

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SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)

For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.

Building measurements are based on: Construction Drawings* Building Under Construction* Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the appropriate boxes to show whether the measurement is above or below the natural HAG and the 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 (C2.b in applicable Building Diagram) 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 AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for 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*

Check here if attachments and describe in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Telephone: _____ Ext.: _____ Email: _____

Signature: _____ Date: _____

Comments: _____

ELEVATION CERTIFICATE

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SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.a. A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.
- G2.b. A local official completed Section H for insurance purposes.
- G3. In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.
- G4. The following information (Items G5–G11) is provided for community floodplain management purposes.
- G5. Permit Number: 235494 G6. Date Permit Issued: 12/11/2023
- G7. Date Certificate of Compliance/Occupancy Issued: N/A
- G8. This permit has been issued for: New Construction Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: 18.1 feet meters Datum: NAVD
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: 16.0 feet meters Datum: NAVD
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: 12.0 feet meters Datum: NAVD
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: 13.0 feet meters Datum: NAVD
- G11. Variance issued? Yes No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. *I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.*

Local Official's Name: Carl B Thomas Title: Floodplain Administrator

NFIP Community Name: Town of Fort Myers Beach

Telephone: (239) 765-0202 Ext.: _____ Email: cthomas@fmbgov.com

Address: 2731 Oak St

City: Fort Myers Beach State: FL ZIP Code: 33931

Signature: _____ Date: _____

Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):

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FOR INSURANCE COMPANY USE

Policy Number: _____

Company NAIC Number: _____

SECTION H – BUILDING'S FIRST FLOOR HEIGHT INFORMATION FOR ALL ZONES (SURVEY NOT REQUIRED) (FOR INSURANCE PURPOSES ONLY)

The property owner, owner's authorized representative, or local floodplain management official may complete Section H for all flood zones to determine the building's first floor height for insurance purposes. Sections A, B, and I must also be completed. Enter heights to the nearest tenth of a foot (nearest tenth of a meter in Puerto Rico). **Reference the Foundation Type Diagrams (at the end of Section H Instructions) and the appropriate Building Diagrams (at the end of Section I Instructions) to complete this section.**

H1. Provide the height of the top of the floor (as indicated in Foundation Type Diagrams) above the Lowest Adjacent Grade (LAG):

a) **For Building Diagrams 1A, 1B, 3, and 5–8.** Top of bottom _____ feet meters above the LAG floor (include above-grade floors only for buildings with crawlspaces or enclosure floors) is:

b) **For Building Diagrams 2A, 2B, 4, and 6–9.** Top of next higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is: _____ feet meters above the LAG

H2. Is **all** Machinery and Equipment servicing the building (as listed in Item H2 instructions) elevated to or above the floor indicated by the H2 arrow (shown in the Foundation Type Diagrams at end of Section H instructions) for the appropriate Building Diagram?

Yes No

SECTION I – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and H must sign here. *The statements in Sections A, B, and H are correct to the best of my knowledge.* **Note:** If the local floodplain management official completed Section H, they should indicate in Item G2.b and sign Section G.

Check here if attachments are provided (including required photos) and describe each attachment in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Telephone: _____ Ext.: _____ Email: _____

Signature: _____ Date: _____

Comments:

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11
BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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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 02/18/2025

Clear Photo One



Photo Two

Photo Two Caption: Rear View 02/18/2025

Clear Photo Two

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BUILDING PHOTOGRAPHS

Continuation Page

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FOR INSURANCE COMPANY USE

Policy Number: _____

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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 view 02/18/2025

Clear Photo Three



Photo Four

Photo Four Caption: Left side view 02/18/2025



Vent 02/18/2025

Clear Photo Four

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BUILDING PHOTOGRAPHS

See Instructions for Item A6.

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Photo One

Photo One Caption: Left side vents typical 02/18/2025

Clear Photo One



Photo Two

Photo Two Caption: Rear View vents typical 02/18/2025

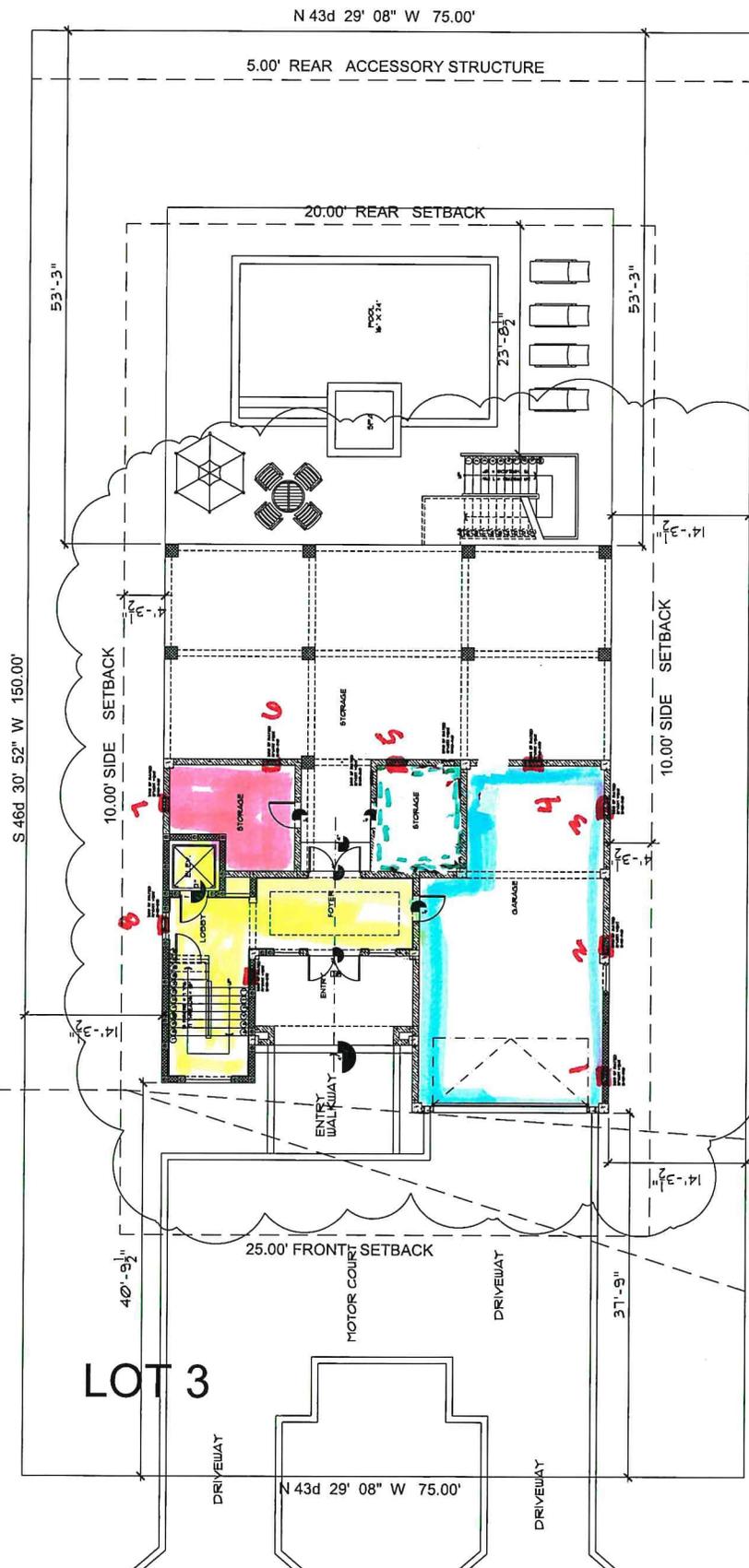
Clear Photo Two

Date	Revisions #	Date
08/24/23	REVISIONS	
Project #	MAS23-1005	
Drawn by	MAS	
Checked by	MAS	
Total sheets	2	
	1	
	2	
	3	
	4	

The Imperial Model
5921 Estero Boulevard
Fort Myers Beach Florida

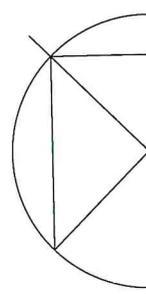
MAS Design, Planning
and Construction
www.masdesignplan.com
239 625 0853

A2.1



LOT COVERAGE

Lot area 11,250 SF
Structure area 2,595 SF
Coverage 23%



- 1 ENCLOSED GARAGE/STORAGE, 610 SQ.FT. 4 VENTS = 1600 SQ. IN.
- 2 ENCLOSED LOBBY STAIRS & ELEVATOR, 320 SQ. FT. 2 VENTS = 800 SQ. IN.
- 3 NORTH ENCLOSED STORAGE = 119 SQ. FT. 2 VENTS = 800 SQ. IN.
- 4 SOUTH ENCLOSED STORAGE = 95 SQ. FT. 1 VENT = 400 SQ. IN.

COASTAL CONSTRUCTION CONTROL
LINE, RECORDED MAY 30, 1991
PLAT BOOK 48, PAGES 15-34

LOT 4

VENT AND AREA DIAGRAM

NEW SITE PLAN
SCALE 3/16" = 1'-0"

DETAIL DIAGRAM
 MODEL 1540-521
 FLOOD VENT INSULATED

HURRIBOND GRIP & SEAL
 ADHESIVE LOCATION
 (FLANGE)

HURRIBOND GRIP & SEAL
 ADHESIVE LOCATION
 (FLANGE)

CLIPS INSTALLED:
 TWO ON TOP
 TWO ON BOTTOM

VENT
 FRAME

VENT
 DOOR

16.25 ROUGH OPENING

16.38 ROUGH OPENING

DETAIL "C"

DETAIL "A"

CLIP SLOTS USE TWO TOP

CLIPS SLOTS USE TWO BOTTOM

12" MAX FROM
 FINAL GRADE

FIGURE 3
 SIDE VIEW

FIGURE 1
 FRONT VIEW

FIGURE 2
 SIDE VIEW

DETAIL "B"
 SNAP-IN NYLON
 1/2 INCH STANDOFF



SMART VENT FOUNDATION FLOOD VENTS
 430 ANDREO DR UNIT 1
 PITMAN NJ 08071

FLOOD VENT
 INSULATED
 MODEL 1540-521

SIZE A	DWG NO. 1540-521	REV A
DATE: 6-21-16	SHEET	1 OF 2



Smart VENT

877-441-8368

www.smartvent.com

INSTALLATION INSTRUCTIONS
& DETAILS
MODEL 1540-521
FLOOD VENT INSULATED

REV. 6-21-16

INSTALLATION INSTRUCTIONS

1. PREPARE A CLEAN 16-1/4" WIDE X 16-3/8" HIGH ROUGH OPENING FOR EACH SET OF STACKING VENTS (1 BLOCK WIDE X 2 BLOCKS HIGH) WITH THE BOTTOM OF THE HOLE NO MORE THAN 12" ABOVE FINISHED GRADE.
2. REMOVE DOORS FROM FRAMES. (TURN UPSIDE DOWN, ROTATE BOTTOM OF DOOR OUTWARD AND SLIDE OUT OF SLOTS).
3. ASSEMBLE TWO FRAMES TOGETHER USING TWO NYLON SPACERS SNAPPED INTO HOLES IN REAR OF FRAMES AS SHOWN IN DETAIL "B". PLACE TOP FRAME (ONE WITH SHORT BOTTOM FLANGE) OVER AND IN FRONT OF BOTTOM FRAME (ONE WITH SHORT TOP FLANGE) AND FASTEN FRONT OF FRAMES TOGETHER WITH TWO SELF TAPPING SCREWS AS SHOWN IN DETAILS "A" AND "C". DO NOT OVER TIGHTEN SCREWS.
4. INSERT INSTALLATION CLIPS INTO THE TWO SLOTS ON THE TOP OF THE FRAME ASSEMBLY AND INTO THE TWO SLOTS ON THE BOTTOM OF THE FRAME ASSEMBLY.
5. HURRIBOND GRIP & SEAL OR EQUIVALENT ADHESIVE IS APPLIED TO BACK OF FLANGES FOR A BETTER SEAL TO WALL FACE. PLACE FRAME ASSEMBLY INTO WALL OPENING BY COMPRESSING THE BOTTOM TWO CLIPS AND SLIPPING THE FRAME INTO THE OPENING. ENSURE THE BOTTOM CLIPS ARE IN THE OPENING BEFORE ALLOW THEM TO DECOMPRESS. NEXT COMPRESS THE TOP SPRINGS AND PUSH THE VENT FRAME INTO THE OPENING COMPLETELY. PRESS FLANGES TIGHT TO WALL FACE.
6. MAKE SURE BOTH FRAMES ARE FLUSH TO WALL FACE, SECURE, SQUARE, LEVEL AND ALL SLOTS ARE CLEAR OF DEBRIS, MORTAR AND CAULK.
7. HOLD DOORS FROM THE BOTTOM, PARALLEL TO GROUND WITH BACK FACING GROUND AND RE-INSTALL INTO FRAMES BY INSERTING TOP FIRST AND LETTING METAL PINS FIND SLOTS/PUSH ALL THE WAY BACK AND ALLOW DOOR TO DROP AND ROTATE DOWN ON BOTH SIDES LATCHED CLOSED.
8. INSERT THE SECURITY CLIPS INTO THE SLOTS THE DOOR PINS SLID INTO.
9. TO OPEN THE DOOR, INSERT TWO CREDIT CARDS INTO THE FLOAT SLOTS. THIS WILL UNLATCH THE DOOR FOR REMOVAL AND CLEANING.

DETAILED SPECIFICATIONS:

MATERIAL: STAINLESS STEEL
OPERATION FLOOD: AUTOMATIC NON-POWERED ACTIVATION AND OPERATION
VENT REMAINS CLOSED AND LOCKED UNTIL ACTIVATED

INSTALLATION:

SECURED W/ 4 STAINLESS STEEL INSTALLATION CLIPS SUPPLIED AND AN ADHESIVE
HYDROSTATIC RELIEF: 200 SQ. FT PER VENT (400 SQ. FT. PER THIS 2 UP ASSEMBLY)

REQUIREMENTS FLOOD: MINIMUM OF 2 VENTS PER ENCLOSED AREA MOUNTED ON AT LEAST TWO DIFFERENT WALLS
COLORS: STAINLESS (STANDARD)
EXTERIOR POWDER COATED WHITE, WHEAT, GRAY, AND BLACK (AVAILABLE)

MEETS THE REQUIREMENTS FOR ENGINEERED OPENINGS AS SET FORTH BY:
FEMA, NFIP, ICC, & ASCE
SUPPORTIVE DOCUMENTS, TB 1-08, 44CFR 60.3(c)(5), ASCE 24-14
ICC EVALUATION # ESR-2074