

# CERTIFICATE OF OCCUPANCY

Residential building

Permit: BP-2024-0041

Property: 423 ROCKLAND

Floodplain: Zone AE

Owner: Duncan & Dana Adylett

1031 WALKER LANE Ronceverte, WV 24970 Issued Date: 07/31/2024 Zoning: Forest Recreation

Map: 735F

Contractor: Higginbotham

Construction LLC WV047280 Po Box 81

Frankford, WV 24938

**Special Stipulations:** 

This is to certify that the construction located at this address has been inspected and approved for occupancy by the Greenbrier County Building Code Official in accordance with the 2018 International Residential Code on March 12, 2025.

Stephen R Simmons AN Kelly Banton, CFM

Stephen Robert Simmons II
Greenbrier County Building Code Official

Kelly Banton

Greenbrier County Flood Plain Manager

## 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 INSTRUCTION PAGES 1-11
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name: Dana and Duncan Aydlett	Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 423 Walker Lane	Company NAIC Number:
City: Ronceverte State: WV	ZIP Code: 24970
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Nur PAR ID 06 24C001100000000 Lot 14 Wallace Camp Sites	mber:
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): Residential	
A5. Latitude/Longitude: Lat. N37° 43' 19.78" Long. W80° 30' 21.26" Horiz. Datum:	NAD 1927 ☑ NAD 1983 ☐ WGS 84
A6. Attach at least two and when possible four clear color photographs (one for each side) of the b	
A7. Building Diagram Number6	
A8. For a building with a crawlspace or enclosure(s):	
a) Square footage of crawlspace or enclosure(s): 692 sq. ft.	
b) Is there at least one permanent flood opening on two different sides of each enclosed area?	? ⊠ Yes ☐ No ☐ N/A
c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot Non-engineered flood openings:	
d) Total net open area of non-engineered flood openings in A8.c. 0 sq. in.	E-T-COLOR CONTROL
e) Total rated area of engineered flood openings in A8.c (attach documentation - see Instruction)	ons): 800 sq. ft.
f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): 800 sq. ft.	
A9. For a building with an attached garage:	
a) Square footage of attached garage:	
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:0 Engineered flood openings:0	acent grade:
d) Total net open area of non-engineered flood openings in A9.c: 0 sq. in.	A Samuel Land Mary Mary
e) Total rated area of engineered flood openings in A9.c (attach documentation - see Instruction	ons):0 sq. ft.
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): o sq. ft.	
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFO	RMATION
B1.a. NFIP Community Name: Greenbrier County B1.b. NFIP Com	rmunity Identification Number: 540040
B2. County Name: Greenbrier B3. State: W B4. Map/Panel No.:	54025C0735 B5. Suffix: F
B6. FIRM Index Date: 07/05/2023 B7. FIRM Panel Effective/Revised Date: 07/05/20	
B8. Flood Zone(s): AE B9. Base Flood Elevation(s) (BFE) (Zone AO, use	Base Flood Depth): 1648.4
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: CBRS OPA	tected 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 INSTRUCTION PAGES 1-11

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Bo	x No.: FOR	INSURANCE COMPANY USE			
423 Walker Lane           City: Ronceverte         State: W ZIP Code: 24970	)	Policy Number:  Company NAIC Number:			
SECTION C - BUILDING ELEVATION INFORMATION	(SURVEY REQU	IRED)			
C1. Building elevations are based on:  Construction Drawings*  Building Und *A new Elevation Certificate will be required when construction of the building is construction.	3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	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 Benchmark Utilized: See Comments  Vertical Datum: No.	Item A7. In Puerto				
Indicate elevation datum used for the elevations in items a) through h) below.  ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other:		WE THE WORLD LAND			
Datum used for building elevations must be the same as that used for the BFE. Convertified Yes, describe the source of the conversion factor in the Section D Comments area.	rsion factor used?	☐ Yes ☐ No Check the measurement used:			
a) Top of bottom floor (including basement, crawlspace, or enclosure floor):	1644.3	☐ feet ☐ meters			
b) Top of the next higher floor (see Instructions):	1655.6	⊠ feet ☐ meters			
c) Bottom of the lowest horizontal structural member (see Instructions):	n/a	☐ feet ☐ meters			
d) Attached garage (top of slab):	n/a	feet meters			
<ul> <li>e) Lowest elevation of Machinery and Equipment (M&amp;E) servicing the building (describe type of M&amp;E and location in Section D Comments area):</li> </ul>	1650.5	☑ feet ☐ meters			
f) Lowest Adjacent Grade (LAG) next to building:   Natural  Finished	1643.8	☐ feet ☐ meters			
g) Highest Adjacent Grade (HAG) next to building: Natural X Finished	1644.3	☐ feet ☐ meters			
<ul> <li>Finished LAG at lowest elevation of attached deck or stairs, including structura support</li> </ul>	1643.4	☑ feet ☐ meters			
SECTION D - SURVEYOR, ENGINEER, OR ARCHIT	ECT CERTIFICA	TION			
This certification is to be signed and sealed by a land surveyor, engineer, or architect a information. I certify that the information on this Certificate represents my best efforts to 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?	o interpret the data a on 1001.	aw to certify elevation available. I understand that any			
Check here if attachments and describe in the Comments area.	and the same				
Certifier's Name: Philip Reed, PE License Number. 16632		W POW			
Title: Senior Engineer		S DON'TENDE			
Company Name: PhilReed Engineering, LLC		May			
Address: 1463 Second Creek Road		01/09/2025 # =			
City: Second Creek State: W ZIP Code:		ON VIROLET			
Telephone: (304) 646-1237	<u> </u>	SIONAL ETT			
Signature: Philip Reed Digitally signed by Philip Reed Date: 2025.01.10 08:24:41 -05:00 Date: 01.	/10/2025	Place Seal Here			
Copy all pages of this Elevation Certificate and all attachments for (1) community official, (	2) insurance agent/c	ompany, and (3) building owner.			
Comments (including source of conversion factor in C2; type of equipment and location GPS observations used to establish elevations based off WVDOT Real Time nail set in Power pole. Top of nail elevation = 1643.90'. Lowest equipment se system is set at elevation 1652.3'. Smart Vent Model 1540-520 installed in four	Network, NAD83(2 rvicing building an	2011). Benchmark set is 60d			

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

Building Street Address (including Apt., U. 423 Walker Lane	nit, Suite, and/or Blo	dg. No.) (	or P.O. Route	and E	Box N	0.:	FOR INSURA	NCE COMPANY USE
City: Ronceverte	State:	w	ZIP Code:	249	70		Policy Number Company NAI	3
SECTION E - BUI	LDING MEASUR ZONE AO, ZONE	REMEN	T INFORMA	TIOI	V (SI	JRVEY	NOT REQUIR	
For Zones AO, AR/AO, and A (without B								lo If the Cartificate is
intended to support a Letter of Map Cha enter meters.	nge request, comp	lete Sec	tions A, B, ar	d C.	Chec	k the mea	surement used	In Puerto Rico only,
Building measurements are based on: *A new Elevation Certificate will be requ	Construction Dired when construc	rawings tion of th	• Duilding is	g Und	ler Co	onstructio	n*  Finishe	d Construction
E1. Provide measurements (C.2.a in ap measurement is above or below the	plicable Building D natural HAG and t	iagram) the LAG	for the follow	ing ar	nd ch	eck the a	ppropriate boxe	s to show whether the
<ul> <li>a) Top of bottom floor (including ba crawlspace, or enclosure) is:</li> </ul>	sement,			feet		meters	above or	☐ below the HAG.
<ul> <li>Top of bottom floor (including ba crawlspace, or enclosure) is;</li> </ul>	sement,	7	П	feet		meters	☐ above or	below the LAG.
E2. For Building Diagrams 6–9 with per	manent flood openi	nas arm	vided in Secti		tome		_	
next riigher floor (C2.b in applicable		ga pro	indea iii decti	JII A	terns	o and/or	a (see pages 1	-2 of instructions), the
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 servicing the building is:	equipment			feet		meters	above or	below the HAG.
E5. Zone AO only: If no flood depth num floodplain management ordinance?	nber is available, is	the top	of the bottom	floor The lo	eleva	ited in acc	cordance with the	ne community's primation in Section G.
SECTION F - PROPERTY	OWNER (OR OV	VNER'S				Carrier III		
The property owner or owner's authorize	d representative wi	ho comp	letes Section	s A. E	3. and	SECTION OF SECTION		TANKS STATES THE STATES OF THE
sign here. The statements in Sections A,	B, and E are corre	ct to the	best of my k	nowle	dge	1		a, or constitution
Check here if attachments and descr								
Property Owner or Owner's Authorized R	epresentative Nam	ne:						
Address:	Jack Company			-	-de		Valley	
City:				1	Stat	le:	ZIP Code:	
Telephone: E	xt.: Email:	1000	pellog.		0	14	BBJ Ty	17-15
Signature:			Dat	e:		1000	18 Inc	
Comments:	The second second						- Partici	<del>diago - 5</del>
							and Same	H.W

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

State:   W   ZIP Code: 24970   Policy Number:   Company NAIC Naic Naic Naic Naic Naic Naic Naic	luilding Street Address (including Apt., Unit, S	uite, and/or Bldg. No.)	or P.O. Route	and Box No.:	FOR INSU	JRANCE COMPANY US
SECTION G - COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)  local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete toon A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:    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)    A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when its E5 is completed for a building located in Zone AO.   A local official completed Section H for insurance purposes.   In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E at the following information (Items GS-G11) is provided for community floodplain management purposes.    Permit Number	23 Walker Lane	State: VAV	7IP Code:	24970	Policy Nun	nber:
local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete tion A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:    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.)   A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when ite Es is completed for a building located in Zone AA.   A local official completed Section H for insurance purposes.   In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E at The following information (Items GS-G11) is provided for community floodplain management purposes.   Permit Number:	ry. Ronceverte	State. VVV	_ ZIF Code.	24370	Company NAIC Number:	
tion A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:  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.)  A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when ite Es is completed for a building located in Zone AO.  A local official completed Section H for insurance purposes.  In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E at The following information (Items G5–G11) is provided for community floodplain management purposes.  Permit Number:  G6. Date Permit Issued:  This permit has been issued for:  New Construction   Substantial Improvement    a. Elevation of as-built lowest floor (including basement) of the building:  b. Elevation of bottom of as-built lowest horizontal structural member:  b. Elevation of bottom of as-built lowest horizontal structural feet   meters   Datum:    c. B. BFE (or depth in Zone AO) of flooding at the building site:   feet   meters   Datum:    c. D. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:   feet   meters   Datum:    c. Local official who provides information in Section G must sign here. I have completed the information in Section G and certify that rect to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.  al Official's Name:   Kelly Bonton   Fisher Local Section   Fisher Local Section   State:   WY   ZIP Code:   Zygol   mature:   WY	SECTION G - COMMUNITY INFO	DRMATION (RECO	MMENDED I	OR COMMUN	TY OFFICIA	L COMPLETION)
A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when ite E5 is completed for a building located in Zone AO.    A local official completed Section H for insurance purposes.   In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and The following information (Items G5–G11) is provided for community floodplain management purposes.    Permit Number:	Section A, B, C, E, G, or H of this Elevation ( 61. The information in Section C was engineer, or architect who is auth	Certificate. Complete to staken from other doc norized by state law to	he applicable umentation that	tem(s) and sign t it has been signe	elow when: d and sealed	by a licensed surveyor,
In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E at the following information (Items G5–G11) is provided for community floodplain management purposes.  Permit Number:	G2.a. A local official completed Section	E for a building locate	ed in Zone A (	vithout a BFE), Z	one AO, or Zo	ne AR/AO, or when item
The following information (Items G5-G11) is provided for community floodplain management purposes.  Permit Number:	62.b. A local official completed Section	H for insurance purpo	oses.			
Date Certificate of Compliance/Occupancy Issued:  This permit has been issued for. New Construction   Substantial Improvement  a. Elevation of as-built lowest floor (including basement) of the building:  b. Elevation of bottom of as-built lowest horizontal structural member:  D. BFE (or depth in Zone AO) of flooding at the building site:   feet   meters   Datum:    D. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:   feet   meters   Datum:    D. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:   feet   meters   Datum:    D. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:   feet   meters   Datum:    D. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:   feet   meters   Datum:    D. Community Similar member:   feet   meters   Datum:    D. Community Name:   Feet   meters   Datum:    D. Communi	3. In the Comments area of Section	G, the local official de	escribes speci	ic corrections to t	he information	n in Sections A, B, E and
Date Certificate of Compliance/Occupancy Issued:  This permit has been issued for. New Construction Substantial Improvement  a. Elevation of as-built lowest floor (including basement) of the building:  b. Elevation of bottom of as-built lowest horizontal structural member:  c) a. BFE (or depth in Zone AO) of flooding at the building site:  c) b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:  d) b. Community's minimum elevation of depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:  d) b. Variance issued? Yes No If yes, attach documentation and describe in the Comments area.  elocal official who provides information in Section G must sign here. I have completed the information in Section G and certify that rect to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.  all Official's Name: Kelly Bonton Title: Floodplain Monager  P Community Name: Greenbrier County  ephone: 304-647-6489 Ext: 689 Email: Kelly, banton & greenbriercounty, net dress: 912 Court Street N.  State: Wy ZIP Code: 24901  mature: Hully Bonton Date: 3-12-25  mements (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information	34.  The following information (Items	G5-G11) is provided f	for community	floodplain manag	ement purpos	ses.
This permit has been issued for. New Construction   Substantial Improvement  a. Elevation of as-built lowest floor (including basement) of the building:  b. Elevation of bottom of as-built lowest horizontal structural member:  c) a. BFE (or depth in Zone AO) of flooding at the building site:  c) b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:  d) b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:  d) b. Variance issued?   Yes   No   If yes, attach documentation and describe in the Comments area.  elocal official who provides information in Section G must sign here. I have completed the information in Section G and certify that rect to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.  all Official's Name:   Kelly Bonton   Title: Floodplain Manager    P Community Name:   Greenbrier County    State:   WV   ZIP Code: 24901    mature:   Multiple State   No    State:   WV   ZIP Code: 24901    mature:   Multiple State   No    Total Court   State   State   State    Date:   3-12-25    mements (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information    Date:   3-12-25    mements (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information    Date:   3-12-25    mements (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information    Date:   3-12-25    Manager   PC    Date:   3-12-25    Dat	35. Permit Number:	G6. Date F	Permit Issued:			
a. Elevation of as-built lowest floor (including basement) of the building:  b. Elevation of bottom of as-built lowest horizontal structural member:  c) a. BFE (or depth in Zone AO) of flooding at the building site:  c) b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:  d) b. Variance issued?   Yes   No   If yes, attach documentation and describe in the Comments area.  elocal official who provides information in Section G must sign here. I have completed the information in Section G and certify that rect to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.  al Official's Name:   Kelly Bonton   Title: Floodplain Monager    P Community Name:   Greenbrier County    aphone: 304-647-6489   Ext:   689   Email:   kelly   banton @ greenbriercounty   net    there is the section of equipment and location, per C2.e; description of any attachments; and corrections to specific information of any attachments; and corrections to specific information.	G7. Date Certificate of Compliance/Occu	pancy Issued:				
building:	38. This permit has been issued for.	New Construction	Substantial	Improvement		
member:		uding basement) of th	e	feet	meters	Datum:
b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member:    Variance issued?   Yes   No   If yes, attach documentation and describe in the Comments area.	하게 하다 이 그는 이번에 가는 하면 하는데 가장하다. 한 경기를 하게 하는데 하는데 하는데 하는데 하는데 없다.	t horizontal structural		leet	meters	Datum:
requirement for the lowest floor or lowest horizontal structural member:    Variance issued?   Yes   No   If yes, attach documentation and describe in the Comments area.   Iocal official who provides information in Section G must sign here. I have completed the information in Section G and certify that rect to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.    Part   Barton   Title   Floodplain Manager	310.a. BFE (or depth in Zone AO) of flooding	ig at the building site:	-	feet	meters	Datum:
e local official who provides information in Section G must sign here. I have completed the information in Section G and certify that rect to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.  Title: Floodplain Manager  P Community Name: Greenbrier County  ephone: 304-647-6689 Ext: 689 Email: kelly.banton@greenbriercounty.net  tress: 912 Court Street N.  State: WV ZIP Code: 24901  nature: Helly Banton Date: 3-12-25  mments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information	requirement for the lowest floor or lo	depth in Zone AO) west horizontal structu	ural	☐ feet	☐ meters	Datum:
e local official who provides information in Section G must sign here. I have completed the information in Section G and certify that rect to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.  Title: Floodplain Manager  P Community Name: Greenbrier County  ephone: 304-647-6689 Ext: 689 Email: kelly.banton@greenbriercounty.net  tress: 912 Court Street N.  State: WV ZIP Code: 24901  nature: Helly Banton Date: 3-12-25  mments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information	G11. Variance issued? Yes No	If yes, attach docur	nentation and	describe in the C	omments area	a.
P Community Name: Greenbrier County  ephone: 304-647-6689 Ext: 689 Email: kelly.banton@greenbriercounty.net  dress: 912 Court Street N.  Lewisburg State: WV ZIP Code: 24901  nature: Xelly Banton Date: 3-12-25  mments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information	The local official who provides information in correct to the best of my knowledge. If appli	n Section G must sign cable, I have also prov	here. I have c vided specific o	ompleted the info corrections in the	rmation in Sec Comments an	ction G and certify that it is ea of this section.
ephone: 304-647-6689 Ext: 689 Email: kelly.banton@greenbriercounty.net  tress: 912 Court Street N.  Lewisburg State: WV ZIP Code: 24901  nature: Xelly Banton Date: 3-12-25  mments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information				tle: Floodp	lain Ma	nager
tress: 912 Court Street N.  Lewisburg State: WV ZIP Code: 24901  nature: Xully Banton Date: 3-12-25  mments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information						
nature: Hewisburg State: WV ZIP Code: 24901  Date: 3-12-25  mments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information	Telephone: 304-647-6689 Ext.:	689 Email: Kell	ly.bant	on @ green	nbriercou	inty.net
nature: Xully Banton  Date: 3-12-25  mments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information	Address: 912 Court Stree	+ N.				
mments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information	city: <u>Lewisburg</u>			State: V	OV ZIP C	Code: 24901
	Signature: Helly Banton	2	Da	te: 3-12-2	5_	
	Comments (including type of equipment and Sections A, B, D, E, or H):	d location, per C2.e; de	escription of a	ny attachments; a	nd corrections	s to specific information in
1013 7, D, O, E, VI 17.	3601011374, 0, 0, 1, 0, 11)					

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11

Build 423	ing Street Address (includi Walker Lane	rig Ape, One, Saite, and/or b	ug. 110.) t	A F.O. Route and D	OA 140		ISURANCE COMPANY US
-	Ronceverte	State:	w	ZIP Code: 2497	70		lumber: ny NAIC Number:
	SEСТІО	N H – BUILDING'S FIRS	T FLOO	R HEIGHT INFO	RMATIO	N FOR ALL	
V <sub>0</sub> E		(SURVEY NOT REQUIR					
near	est tenth of a foot (neares	outhorized representative, or t floor height for insurance p t tenth of a meter in Puerto priate Building Diagrams (	urposes. Rico). Re	Sections A, B, and ference the Found	I must als	so be complet	(at the end of Section H
H1.	Provide the height of the	op of the floor (as indicated	in Found	ation Type Diagran	ns) above	the Lowest A	djacent Grade (LAG):
- 1	<ul> <li>a) For Building Diagram floor (include above-grade crawlspaces or enclosure</li> </ul>	s 1A, 1B, 3, and 5–8. Top floors only for buildings wit floors) is:	of bottom h		[] feet	meters	above the LAG
1	b) For Building Diagram nigher floor (i.e., the floor enclosure floor) is:	as 2A, 2B, 4, and 6–9. Top above basement, crawlspace	of next e, or		feet	meters	above the LAG
	s all Machinery and Equi d2 arrow (shown in the Fo	pment servicing the building bundation Type Diagrams at	(as listed end of S	f in Item H2 instruction	tions) elevis) for the	rated to or ab appropriate B	ove the floor indicated by the fullding Diagram?
	SECTION I - PRO	PERTY OWNER (OR O	WNER'S	AUTHORIZED F	REPRES	ENTATIVE	CERTIFICATION
ndica	ate in Item G2.b and sign	iest of my knowledge. <b>Note</b>	: If the loc		gement of	ficial complet	ed Section H, they should
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### IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON INSTRUCTION PAGES 1-11 **BUILDING PHOTOGRAPHS**

	See Instruct	ions for Item	A6.	
Building Street Address (including A 423 Walker Lane	pt., Unit, Suite, and/or Bldg. No.) o	r P.O. Route	and Box No.:	FOR INSURANCE COMPANY USE
City: Ronceverte	State: WV	ZIP Code:	24970	Policy Number: Company NAIC Number:
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Photo Two

Clear Photo Two

Photo Two Caption: Rear View 01/09/2025

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

Continuation Page

Building Street Address (including Apt.	, Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:	FOR INSURANCE COMPANY USE
423 Walker Lane City: Ronceverte	State: WV ZIP Code: 24970	Policy Number: Company NAIC Number:
Insert the third and fourth photograph View," or "Left Side View." When floo vents, as indicated in Sections A8 an	ns below. Identify all photographs with the date taken and " od openings are present, include at least one close-up phot nd A9.	Front View" "Rear View" "Right Side
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District Constitution	odel 1540-520 ( typical of 4) 01/09/2025	Clear Photo Four



# **Most Widely Accepted and Trusted**

# **ICC-ES Evaluation Report**

ESR-2074

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Reissued 02/2025 This report is subject to renewal 02/2027.

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

ESR-2074

Reissued February 2025

This report also contains:

- CA Supplement

Subject to renewal February 2027

- FL 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; #1540-574; #1540-

524; #1540-514

FLOOD VENT SEALING

KIT #1540-526



### 1.0 EVALUATION SCOPE

### Compliance with the following codes:

- 2024, 2021, 2018, 2015, 2012, 2009 and 2006 International Building Code® (IBC)
- 2024, 2021, 2018, 2015, 2012, 2009 and 2006 International Residential Code® (IRC)
- 2024, 2021 and 2018 International Energy Conservation Code® (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 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 ¹/₄-inch-by-¹/₄-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:

- With a minimum of two openings on different sides of each enclosed area.
- With a minimum of one FV for every 200 square feet (18.6 m2) of enclosed area, except that the SmartVENT® Stacking Model #1540-511 and FloodVENT® Stacking Model #1540-521 must be installed with a minimum of one FV for every 400 square feet (37.2 m2) of enclosed area.
- Below the base flood elevation.
- With the bottom of the FV located a maximum of 12 inches (305.4 mm) above the higher of the final grade or floor and finished exterior grade immediately under each opening.

#### 4.2 Flood Vent Sealing Kit

The Flood Vent Sealing Kit Model 1540-526 is used in conjunction with FloodVENT® Model #1540-520. When installed and tested in accordance with ASTM E283, the FV and Flood Vent Sealing Kit assembly have an air leakage rate of less than 0.2 cubic feet per minute per lineal foot (18.56 l/min per lineal meter) at a pressure differential of 1 pound per square foot (50 Pa) based on 12.58 lineal feet (3.8 lineal meters) contained by the Flood Vent Sealing Kit.

#### 5.0 CONDITIONS OF USE:

The Smart Vent® FVs described in this report comply with, or are suitable alternatives to what is specified in, those codes listed in Section 1.0 of this report, subject to the following conditions:

- 5.1 The Smart Vent® FVs must be installed in accordance with this report, the applicable code and the manufacturer's installation instructions. In the event of a conflict, the instructions in this report govern.
- 5.2 The Smart Vent® FVs must not be used in the place of "breakaway walls" in coastal high hazard areas, but are permitted for use in conjunction with breakaway walls in other areas.

#### 6.0 EVIDENCE SUBMITTED

- 6.1 Data in accordance with the ICC-ES Acceptance Criteria for Mechanically Operated Flood Vents (AC364), dated August 2015 (editorially revised February 2024).
- 6.2 Test report on air infiltration in accordance with ASTM E283.

#### 7.0 IDENTIFICATION

- 7.1 The ICC-ES mark of conformity, electronic labeling, or the evaluation report number (ICC-ES ESR-2074) along with the name, registered trademark, or registered logo of the report holder must be included in the product label.
- 7.2 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).
- 7.3 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

TABLE I—MODEL SIZES							
MODEL NAME	MODEL NUMBER	MODEL SIZE (in.)	COVERAGE <sup>1</sup> (ft <sup>2</sup> )				
FloodVENT®	1540-520	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200				
SmartVENT®	1540-510	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200				
FloodVENT® Overhead Door	1540-524	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200				
SmartVENT® Overhead Door	1540-514	15 <sup>3</sup> / <sub>4</sub> " X 7 <sup>3</sup> / <sub>4</sub> "	200				
Wood Wall FloodVENT®	1540-570	14" X 8 <sup>3</sup> / <sub>4</sub> "	200				
Wood Wall FloodVENT® Overhead Door	1540-574	14" X 8 <sup>3</sup> / <sub>4</sub> "	200				
SmartVENT® Stacker	1540-511	16" X 16"	400				
FloodVent® Stacker	1540-521	16" X 16"	400				

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

¹The coverage area in square feet for each model is equivalent to the performance of the same number of square inches of non-engineered openings.

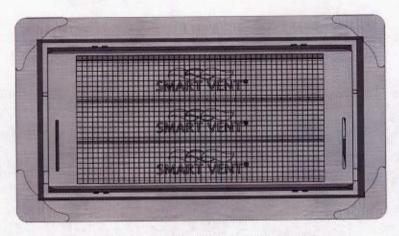


FIGURE 1-SMART VENT: MODEL 1540-510

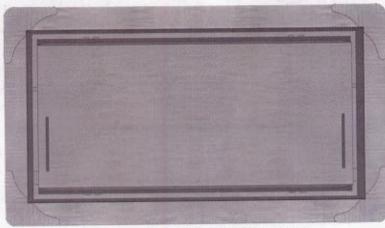


FIGURE 2—SMART VENT MODEL 1540-520

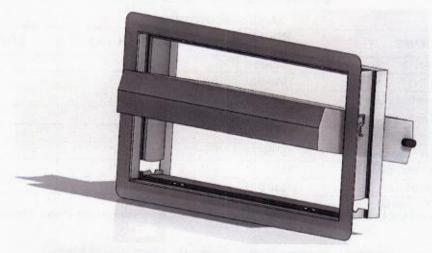


FIGURE 3—SMART VENT: SHOWN WITH FLOOD DOOR PIVOTED OPEN

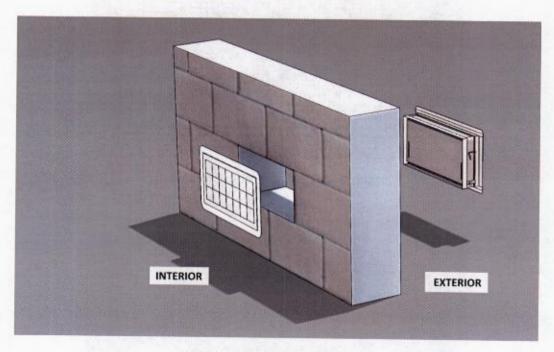


FIGURE 4—FLOOD VENT SEALING KIT



# ICC-ES Evaluation Report

# ESR-2074 CA Supplement

Reissued February 2025

This report is subject to renewal February 2027.

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A Subsidiary of the International Code Council®

**DIVISION: 08 00 00—OPENINGS** 

Section: 08 95 43-Vents/Foundation Flood Vents

REPORT HOLDER:

SMART VENT PRODUCTS, INC.

**EVALUATION SUBJECT:** 

SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS: MODELS #1540-520; #1540-521; #1540-510; #1540-511; #1540-570; #1540-574; #1540-524; #1540-514 FLOOD VENT SEALING KIT #1540-526

#### 1.0 REPORT PURPOSE AND SCOPE

#### Purpose:

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

#### Applicable code editions:

2022 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.

■ 2022 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 CBC Chapter 12, provided the design and installation are in accordance with the 2021 International Building Code® (IBC) provisions noted in the evaluation report and the additional requirements of CBC Chapters 12 and 16, as applicable.

#### 2.1.1 OSHPD:

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

#### 2.1.2 DSA:

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

#### 2.2 CRC:

The Smart Vent® Automatic Foundation Flood Vents, described in Sections 2.0 through 7.0 of the evaluation report ESR-2074, comply with the CRC, provided the design and installation are in accordance with the 2021 International Residential Code® (IRC) provisions noted in the evaluation report.

This supplement expires concurrently with the evaluation report, reissued February 2025.



Page 6 of 7



# **ICC-ES Evaluation Report**

# ESR-2074 FL Supplement

Reissued February 2025 This report is subject to renewal February 2027.

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A Subsidiary of the International Code Council®

DIVISION: 08 00 00—OPENINGS

Section: 08 95 43—Vents/Foundation Flood Vents

REPORT HOLDER:

SMART VENT PRODUCTS, INC.

**EVALUATION SUBJECT:** 

SMART VENT® AUTOMATIC FOUNDATION FLOOD VENTS: MODELS #1540-520; #1540-521; #1540-510; #1540-511; #1540-570; #1540-574; #1540-524; #1540-514 FLOOD VENT SEALING KIT #1540-526

#### 1.0 REPORT PURPOSE AND SCOPE

#### Purpose:

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

#### Applicable code editions:

- 2023 Florida Building Code—Building
- 2023 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 must be 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 2021 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 2025.



