

Federal Emergency Management Agency
ELEVATION CERTIFICATE

IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 9-16

OMB Control Number: 1660-0008
Expiration: 11/30/2018

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 WEST BAY HILL LLC		Policy Number:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 22220 LEFT BANK LANE PERMIT NUMBER: RES2015-04261		Company NAIC Number:

City **ESTERO** State **FL** Zip Code **33928**

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
STRAP # 31-46-25-E2-33000.0060 FOLIO ID: 10568199, LOT 06, WESTLAKE COURT TWO, INST.#20140000210491

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) **RESIDENTIAL**

A5. Latitude/Longitude: Lat. **26.427159° N** Long. **81.839089° W** Horizontal Datum: NAD 1927 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 **1A**

A8. For a building with a crawlspace or enclosure(s):	A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) n/a sq ft	a) Square footage of attached garage 749 sq ft
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade n/a	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade 5
c) Total net area of flood openings in A8.b n/a sq in	c) Total net area of flood openings in A9.b 618 sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	d) Engineered flood openings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

SECTION B- FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number VILLAGE OF ESTERO 120260		B2. County Name LEE	B3. State FLORIDA
B4. Map/Panel Number 12071C0587F	B5. Suffix F	B6. FIRM Index Date 8/28/08	B7. FIRM Panel Effective/ Revised Date 8/28/08
		B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 10.0

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:
 FIS Profile FIRM Community Determined Other/Source: _____

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 Protected Area (OPA)? Yes No
Designation Date: CBRS OPA

SECTION C- BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction

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

Benchmark Utilized: **NGS PID "AD1340"** Vertical Datum: **NAVD88**


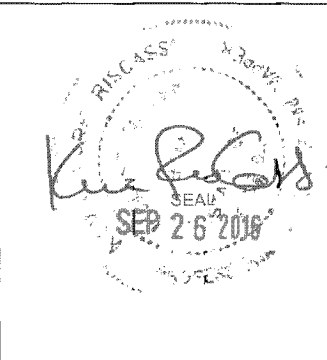

Indicate elevation datum used for the elevations in items a) through h) below. NGVD 1929 NAVD 1988
 Other/Source: _____

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)	10.2	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
b) Top of the next higher floor	NA	<input type="checkbox"/> feet	<input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V zones only)	NA	<input type="checkbox"/> feet	<input type="checkbox"/> meters
d) Attached garage (top of slab)	9.0	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
e) Lowest elevation of machinery of equipment servicing the building (Describe type of equipment and location in Comments)	10.1	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	9.9	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	9.5	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	9.0	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters

ELEVATION CERTIFICATE

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SECTION D- SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION			
<p>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.</p>			
<input checked="" type="checkbox"/> Check here if attachments.		Were latitude and longitude in Section A provided by a licensed land surveyor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Certifier's Name KEVIN M. RisCASSI		License Number LS6433	
Title PROFESSIONAL SURVEYOR & MAPPER		Company Name JOHNSON ENGINEERING, INC.	
Address 2122 JOHNSON STREET		City FORT MYERS	State Zip Code FL 33901
Signature 		Date SEP 26 2016	Telephone 239-334-0046
			
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.			
Comments (including type of equipment and location, per C2(e), if applicable) PROJECT NUMBER 20150078 FB2803, PG 72. LOWEST MACHINERY SERVICING THE BUILDING IS AN A/C UNIT ON A CONCRETE PAD. ENGINEERED FLOOD VENTS IN GARAGE ARE "SMART VENTS" WITH A MODEL NUMBER OF 1540-510.			
Signature 		Date SEP 26 2016	
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.			
E.1 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 _____		<input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG	
b) Top of bottom floor (including basement, crawlspace or enclosure) is _____		<input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG	
E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____			
		<input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG	
E3. Attached Garage (top of slab) is _____			
		<input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> below the HAG	
E4. Top of platform of machinery and / or equipment servicing the building is _____			
		<input type="checkbox"/> feet <input type="checkbox"/> meters <input type="checkbox"/> above or <input type="checkbox"/> 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.			
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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.			
Address _____			
		City _____ State _____ ZIP Code _____	
Signature _____			
		Date _____ Telephone _____	
Comments _____			
<input type="checkbox"/> Check here if attachments.			

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8-G10. In Puerto Rico only, enter meters.

- 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 law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4 -G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters Datum _____

G10. Community's design flood elevation: _____ feet meters Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments

Check here if attachments.

BUILDING PHOTOGRAPHS

See instructions for Item A6

OMB Control Number: 1660-0008
Expiration: 11/30/2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.		FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 22220 LEFT BANK LANE PERMIT NUMBER: RES2015-04261		Policy Number:	
City ESTERO	State FL	Zip Code 33928	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front view" and Rear view"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

Front View
Date Taken: 9/23/16



Left Side View
Date Taken: 9/23/16



Right Side View
Date Taken: 9/23/16



Rear View
Date Taken: 9/23/16



ICC-ES Evaluation Report
ESR-2074*
Reissued December 1, 2012
This report is subject to renewal February 1, 2015.
www.iccses.org | (800) 423-6587 | (562) 699-0543

A Subsidiary of the International Code Council®
DIVISION: 08 00 00--OPENINGS
Section: 08 95 43--Vents/Foundation Flood Vents
REPORT HOLDER:
SMARTVENT PRODUCTS, INC.
430 ANDBRO DRIVE, UNIT 1
PITMAN, NEW JERSEY 08071
(877) 441-8368
www.smartventinc.com
info@smartventinc.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 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 unlash, 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. 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 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 (1.525 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^{3⁄4} inches wide by 7^{3⁄4} 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 3^{3⁄4} 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 1/2-inch-by-1/2-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 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 or 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

*Revised July 2013

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[®] 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 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 AFFV for every 400 square feet (37.2 m²) 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.

6.0 CONDITIONS OF USE

The Smart Vent[®] 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:

6.1 The Smart Vent[®] 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.

6.2 The Smart Vent[®] 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 (AC3084), dated October 2007.

7.0 IDENTIFICATION

The Smart VENT[®] 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).

ICC-ES Evaluation Report

ESR-2074 FBC Supplement

Issued July 1, 2013

This report is subject to renewal February 1, 2015

www.icc-es.org | (800) 423-6587 | (562) 699-0543

A Subsidiary of the International Code Council®

DIVISION: 08 00 00—OPENINGS

Section: 08 96 43—Vents/Foundation Flood Vents

REPORT HOLDER:

SMARTVENT PRODUCTS, INC.

430 ANDBRO DRIVE, UNIT 1

PITMAN, NEW JERSEY 08071

(877) 441-8368

www.smartvent.cominfo@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 REPORT PURPOSE AND SCOPE

Purpose:

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

Applicable code editions:

- 2010 Florida Building Code—Building (FBC)
- 2010 Florida Building Code—Residential (FRC)

2.0 CONCLUSIONS

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

Use of the Smart Vent[®] Automatic Foundation Flood Vents has also been found to be in compliance with the High-Velocity Hurricane Zone provisions of the FBC and the FRC for structures not subject to FBC Section 2326.3.1 or FRC Section 4409.13.3.1 as applicable.

For products falling under Florida Rule 9N-3, verification that the report holder's quality assurance program is audited by a quality assurance entity approved by the Florida Building Commission for the type of inspections being conducted is the responsibility of an approved validation entity (or the code official when the report holder does not possess an approval by the Commission).

This supplement expires concurrently with the master report (reissued December 1, 2012; revised July 2013).

**DETAIL DIAGRAM
MODELS 1540-510 & 1540-520
DUAL FUNCTION FLOOD AND VENTILATION VENT &
FLOOD VENT INSULATED**

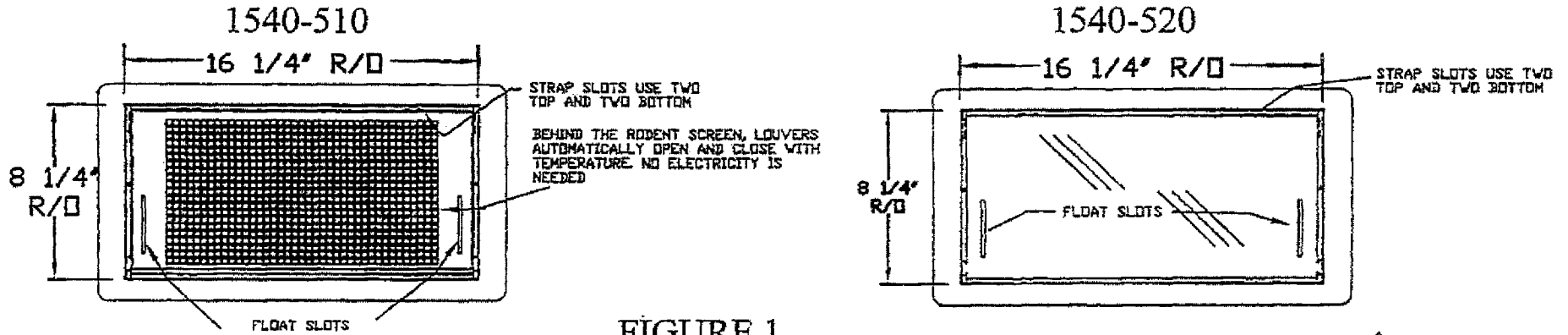


FIGURE 1

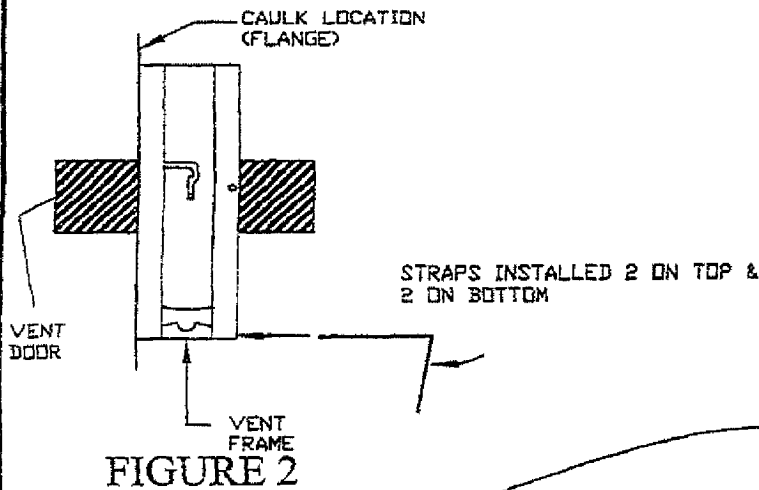


FIGURE 2

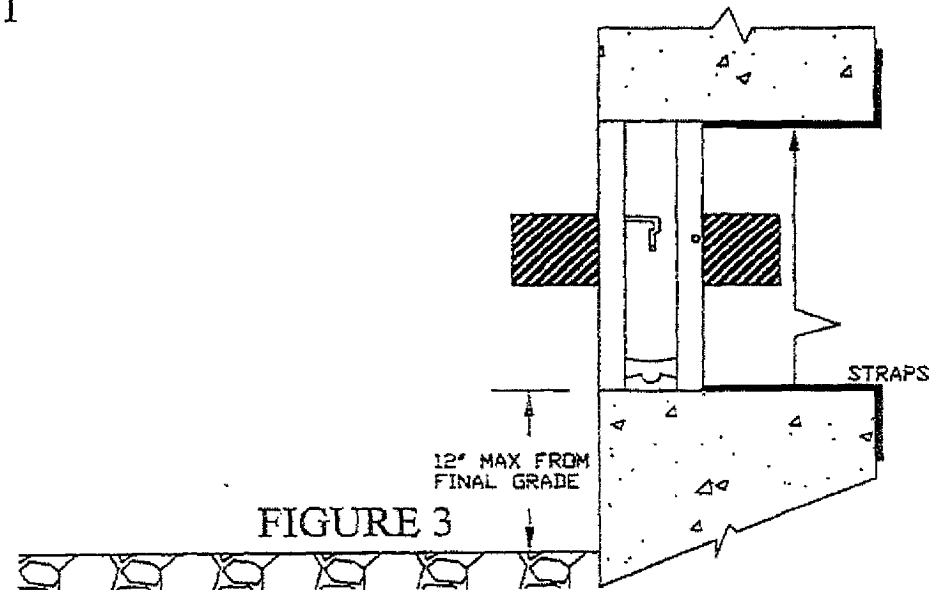
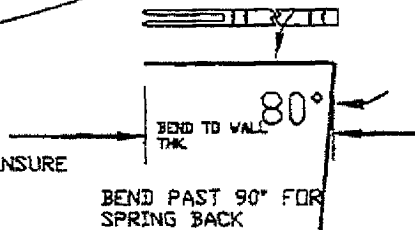


FIGURE 3

STRAP DETAIL.

TEETH MUST CLICK IN TIGHT TO INSURE SECURE INSTALLATION.



TOLERANCES UNLESS OTHERWISE SPECIFIED XX +/-0.06 XXX +/-0.125 XXXX +/-0.25	 Smart VENT 877-441 8368 WWW.SMARTVENT.COM	SMART VENT Foundation Flood Vents 450 AndBro Dr. Pitman NJ 08071	
	DUAL FUNCTION FLOOD AND VENTILATION VENT & FLOOD VENT INSULATED MODELS 1540-510 & 1540-520		
THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF SMART VENT INC. ANY REPRODUCTION OR USE OF THIS INFORMATION WITHOUT THE WRITTEN PERMISSION OF SMARTVENT INC. IS PROHIBITED.	SIZE A	DWG NO. 1540-5XX	REV C
DATE: 2-1-07	SHEET 1 OF 2		



Smart VENT

877- 441- 8368

www.smartvent.com

INSTALLATION INSTRUCTIONS & DETAILS

MODELS 1540-510 & 1540-520 DUAL FUNCTION FLOOD AND VENTILATION VENT & FLOOD VENT INSULATED

REV. C 05-01-09

INSTALLATION INSTRUCTIONS

1. Remove vent door from vent frame. (Turn upside down, rotate bottom of door outward and slide out)
2. Prepare a CLEAN 16.25" wide by 8.25" high rough opening (approx. 1 block wide X 1 block high) for each vent. Ensure the bottom of the rough opening is no more than 12" above the finished inside or outside grade whichever is higher
3. Apply a bead of polyurethane caulk around the back of the flange on the vent frame. (FIG. 2)
4. Bend the 4 steel straps to the thickness of the wall measuring from the end with the teeth see STRAP DETAIL
5. Insert the top straps into the top two strap slots about two clicks.
6. Insert the vent frame in the cut opening. The bent strap ends go in then up behind the inside of the wall.
Push the frame tight against the face of the wall. Ensure the frame is flush and square in the opening. (FIG. 3)
7. Reach through the vent opening and click the two straps in while holding the front of the vent against the wall face. The sharp point of the straps should not extend past the front of the vent face. Install the two remaining bottom straps.
8. Re-check that frame is square and slots are clear of debris, and caulk.
9. Install the door into frame by grasping the bottom of door (with float pins down) and front (small screen in front). Slide door into frame and rotate until it is latched.
10. To open the door insert two credit cards into the float slots as shown in the diagram. This will unlatch the door for removal and cleaning.

MODEL 1540-510

DETAILED SPECIFICATIONS:

MATERIAL: STAINLESS STEEL

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

OPERATION AIR: AUTOMATIC LOUVERS FULLY OPEN AT 75 DEG. FULLY CLOSED AT 35 DEG. NO POWER REQUIRED

INSTALLATION:

SECURED W/ 4 STAINLESS STEEL STRAPS SUPPLIED

HYDROSTATIC RELIEF: 200 Sq. Ft. per Vent

VENTILATION: 51 Sq. In. per Vent NOTE: VAPOR BARRIER ALLOWS FOR REDUCED VENTILATION

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)

MODEL 1540-520

DETAILED SPECIFICATIONS:

MATERIAL: STAINLESS STEEL

OPERATION: AUTOMATIC NON-POWERED ACTIVATION AND OPERATION

INSTALLATION:

SECURED W/ 4 STAINLESS STEEL STRAPS SUPPLIED

HYDROSTATIC RELIEF: 200 Sq. Ft. per Vent

REQUIREMENTS: 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 24-05

ICC EVALUATION # ESR-2074 EVALUATED UNDER AC-364

SHEET 2 OF 2