

This form must be filled out by the Seller and therefore cannot be completed by an agent/broker in Form Simplicity. However, this form CAN be filled out electronically by the Seller in an electronic signature session. A full electronic signature template has been created for this form.



## Seller's Property Disclosure – Residential

**Notice to Licensee and seller:** Only the Seller should fill out this form.

**Notice to Seller:** Florida law<sup>1</sup> requires a Seller of a home to disclose to the Buyer all known facts that materially affect the value of the property being sold and that are not readily observable or known by the Buyer. This disclosure form is designed to help you comply with the law. However, this disclosure form may not address every significant issue that is unique to the Property. You should think about what you would want to know if you were buying the Property today; and if you need more space for additional information, comments, or explanations, check the Paragraph 12 checkbox and attach an addendum.

**Notice to Buyer:** The following representations are made by Seller and not by any real estate licensee. This disclosure is not a guaranty or warranty of any kind. It is not a substitute for any inspections, warranties, or professional advice you may wish to obtain. It is not a substitute for your own personal judgment and common sense. The following information is based only upon Seller's actual knowledge of the Property's condition. Sellers can disclose only what they actually know. Seller may not know about all material or significant items. You should have an independent, professional home inspection to verify the condition of the Property and determine the cost of repairs, if any. This disclosure is not a contract and is not intended to be a part of any contract for sale and purchase.

Seller makes the following disclosure regarding the property described as: 8111 ARLEWOOD Circle,  
PORT CHARLOTTE, FL 33981 (the "Property")

The Property is ☐ owner occupied ☐ tenant occupied ☒ unoccupied (If unoccupied, how long has it been since Seller occupied the Property? 18 MONTHS)

	Yes	No	Don't Know
<b>1. Structures; Systems; Appliances</b>			
(a) Are the structures including roofs: ceilings; walls; doors; windows; foundation; and pool, hot tub, and spa, if any, structurally sound and free of leaks?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Is seawall, if any, and dockage, if any, structurally sound?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(c) Are existing major appliances and heating, cooling, mechanical, electrical, security, and sprinkler systems, in working condition, i.e., operating in the manner in which the item was designed to operate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Does the Property have aluminum wiring other than the primary service line?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(e) Are any of the appliances leased? If yes, which ones: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(f) If any answer to questions 1(a) - 1(c) is no, please explain: _____			
<b>2. Termites; Other Wood-Destroying Organisms; Pests</b>			
(a) Are termites; other wood-destroying organisms, including fungi; or pests present on the Property or has the Property had any structural damage by them?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Has the Property been treated for termites; other wood-destroying organisms, including fungi; or pests?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) If any answer to questions 2(a) - 2(b) is yes, please explain: <u>Required by Municipality</u>			
<b>3. Water Intrusion; Drainage; Flooding</b>			
(a) Has past or present water intrusion affected the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Have past or present drainage or flooding problems affected the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Is any of the Property located in a special flood hazard area?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(d) Is any of the Property located seaward of the coastal construction control line?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(e) Does your lender require flood insurance?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) Do you have an elevation certificate? If yes, please attach a copy.			
(g) If any answer to questions 3(a) - 3(d) is yes, please explain: _____			



<sup>1</sup> Johnson v. Davis, 480 So.2d 625 (Fla. 1985).

Seller [Signature] ( ) and Buyer ( ) ( ) acknowledge receipt of a copy of this page, which is Page 1 of 4.

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Serial#: 046733-500175-5356994

Form  
Simplicity

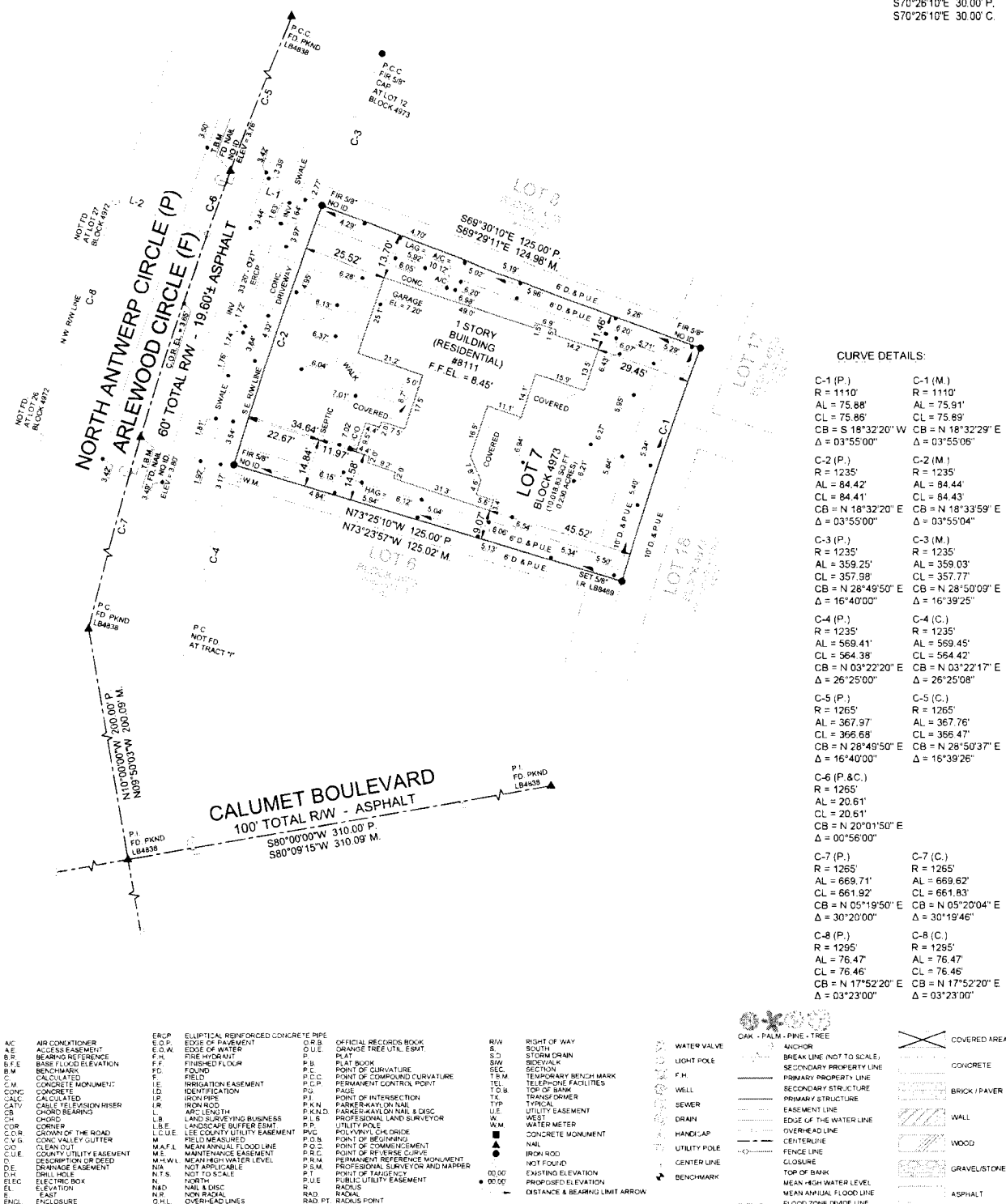
*Tamie L. Knight POA 8/28/2025*



## LINE DETAILS:

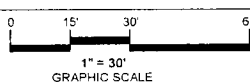
L-1  
S69°30'10"E 30.00' P.  
S69°37'41"E 30.02' C.

L-2  
S70°26'10"E 30.00' P.  
S70°26'10"E 30.00' C.



## SURVEYOR'S NOTES

1. LEGAL DESCRIPTION PROVIDED BY OTHERS. NO EXAMINATION OF TITLE MADE BY SURVEYOR. THE LANDS SHOWN HEREON ARE NOT ABSTRACTED FOR EASEMENTS OR OTHER RECORDED ENCUMBRANCES NOT SHOWN ON THE PLAT.
2. THIS CERTIFICATION IS ONLY FOR THE LANDS DESCRIBED. IT IS NOT A CERTIFICATION OF TITLE.
3. ZONING, EASEMENTS, OR FREEDOM FROM ENCUMBRANCES, EASEMENTS, OR RIGHTS OF WAY.
4. UNDERGROUND, PORTIONS, OR FOOTINGS FOUNDATIONS OR OTHER IMPROVEMENTS WERE NOT LOCATED. VALUERS ARE TO THE FACE OF THE WALL AND ARE NOT TO BE USED TO RECONSTRUCT BOUNDARY LINES.
5. NOT VALID WITHOUT THE SIGNATURE OF A LICENSED SURVEYOR AND MAPPER. ONLY VISIBLE ENCUMBRANCES LOCATED.
6. THIS SURVEY IS INTENDED FOR CONSTRUCTION PURPOSES ONLY. EXCLUSIVELY FOR THE USE BY THE PARTY TO WHOM IT IS CERTIFIED. THE SURVEY IS TO BE USED FOR CONSTRUCTION PERMITTING OR DESIGN. ANY OTHER USE IS NOT VALID WITHOUT WRITTEN CONSENT.
7. NO EFFORT WAS MADE TO PROBE PLAT BOUNDARIES.
8. ONLY IMPROVEMENTS SHOWN WHERE LOCATED. NO DETERMINE WHO OWNS THE EASEMENTS, TREES, OR ANY OTHER IMPROVEMENTS.
9. DIMENSIONS ARE IN FEET AND DECIMALS THEREOF.
10. PARCELS SUBJECT TO EASEMENTS, RESTRICTIONS, RESERVATIONS, AND NOTATIONS OF RECORD.
11. EASEMENTS SHOWN ON THIS DRAWING ARE FROM THE RECORDED PLAT. ANY OTHER EASEMENT (S) PERTAINING TO THE HEREON DESCRIBED LAND (S) MUST BE FURNISHED TO THE SURVEYOR BY THE CLIENT OR THE CLIENTS AGENT PER FLORIDA STATUTE CHAPTER 547 OF THE FLORIDA ADMINISTRATIVE CODE.
12. ADDITIONS OR DELETIONS TO SURVEY MAPS OR REPORTS BY OTHER THAN THE SURVEYING PARTY OR PARTIES IS PROHIBITED WITHOUT WRITTEN CONSENT OF THE SURVEYING PARTY OR PARTIES.
13. PARCELS WERE SURVEYED FROM INFORMATION SUPPLIED BY THE CLIENT.
14. THE ACCURACY OF CONTROL SURVEY DATA SHALL BE VERIFIED BY REDUNDANT MEASUREMENTS OR TRANSVERSE CLOSURES. ALL CONTROL MEASUREMENTS SHALL ADHERE TO THE FOLLOWING: CLOSURES: COMMERCIAL/INDUS. HIGH LINEAR: 1" FOOT IN 10,000 FEET. SUBURBAN LINEAR: 1" FOOT IN 7,500 FEET. RURAL LINEAR: 1" FOOT IN 5,000 FEET.
15. BEARINGS AND DISTANCES SHOWN HEREON AS "AS SHOWN" ARE MEASURED. BY GPS OBSERVATIONS. STATE PLANE COORDINATE SYSTEM NAD83. HIGHEST ELEVATION OF BEARING IS BASED UPON NAD 83. ELEVATION OF 3.60' (NAD83) - 1.15' (VERTICAL FACTOR) = 2.45' (NAD83).
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FIELD DATE 06/27/2024  
DRAWN BY AV  
CHECKED BY JLL

## PROPERTY AND OWNER INFORMATION

PROPERTY ADDRESS:  
8111 ARLEWOOD CIRCLE  
PORT CHARLOTTE, FL 33681

PARCEL ID 412115181006  
COUNTY / STATE CHARLOTTE COUNTY

CERTIFIED TO:  
ROCHA BROTHERS CONTRACTING LLC

ROCHA BROTHERS CONTRACTING, LLC, ITS SUCCESSORS AND/OR ASSIGNS, AND THE DEPARTMENT OF HOUSING AND GREEN DEVELOPMENT AS THEIR INTERESTS MAY APPEAR.

## FLOOD ZONE INFORMATION

COMMUNITY NO 120061  
PANEL 0212  
SUFFIX G  
EFFECTIVE DATE 12/15/2022  
FLOOD ZONE AE  
B.F.E. 8.5 FEET

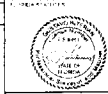
## LEGAL DESCRIPTION

LOT 7 BLOCK "4973", PORT CHARLOTTE SUBDIVISION, SECTION 93, according to the plat thereof, recorded in Plat Book 9, Pages 1A through 24, of the Public Records of CHARLOTTE COUNTY, Florida.

**lynx** Surveyors & Engineering

## LYNX SURVEYORS CORP

LAND SURVEYORS  
AND MAPPER LB 8469  
1021 LAUREL ROAD EAST UNIT 201  
LAUREL, FLORIDA 34522  
P: 850-721-2907  
F: 850-721-2907  
E: info@lynxsurveyors.com  
W: www.lynxsurveyors.com



Digitally signed by  
Gustavo Interian  
Date: 2024.07.12  
12:01:02 -04'00'

GUSTAVO INTERIAN  
PROFESSIONAL SURVEYOR AND MAPPER PSM 6461

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.

<b>SECTION A – PROPERTY INFORMATION</b>		<b>FOR INSURANCE COMPANY USE</b>
A1. Building Owner's Name: <u>CERES CONSULTING LLC</u>		Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>8111 ARLEWOOD CIR</u>		Company NAIC Number: _____
City: <u>PORT CHARLOTTE</u> State: <u>FL</u> ZIP Code: <u>33981</u>		
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>LOT 7, BLOCK 4973, PID: 412115181006, PORT CHARLOTTE SECTION 93</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>26° 54' 41.17" N</u> Long. <u>82° 12' 00.71" W</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>1B</u>		
A8. For a building with a crawlspace or enclosure(s):		
a) Square footage of crawlspace or enclosure(s): <u>N/A</u> sq. ft.		
b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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>N/A</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>N/A</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>579.00</u> sq. ft.		
b) Is there at least one permanent flood opening on two different sides of the attached garage? <input checked="" type="checkbox"/> Yes <input 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>0</u> Engineered flood openings: <u>3</u>		
d) Total net open area of non-engineered flood openings in A9.c: <u>0.00</u> sq. in.		
e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): <u>600.00</u> sq. ft.		
f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): <u>0.00</u> sq. ft.		
<b>SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION</b>		
B1.a. NFIP Community Name: <u>Charlotte County Unincorporated</u>		B1.b. NFIP Community Identification Number: <u>120061</u>
B2. County Name: <u>Charlotte</u>	B3. State: <u>FL</u>	B4. Map/Panel No.: <u>12015C/0212</u>
B5. Suffix: <u>G</u>		
B6. FIRM Index Date: <u>12/15/2022</u>		B7. FIRM Panel Effective/Revised Date: <u>12/15/2022</u>
B8. Flood Zone(s): <u>AE</u> B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): <u>8.0'</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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

# ELEVATION CERTIFICATE

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 Box No.:  
8111 ARLEWOOD CIR

City: PORT CHARLOTTE State: FL ZIP Code: 33981

## FOR INSURANCE COMPANY USE

Policy Number: \_\_\_\_\_

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, 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: SGC010 Vertical Datum: NGVD1929

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): 8.5 ☒ feet ☐ meters

b) Top of the next higher floor (see Instructions): N/A ☐ feet ☐ meters

c) Bottom of the lowest horizontal structural member (see Instructions): N/A ☐ feet ☐ meters

d) Attached garage (top of slab): 7.2 ☒ 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): 10.1 ☒ feet ☐ meters

f) Lowest Adjacent Grade (LAG) next to building: ☐ Natural ☒ Finished 5.9 ☒ feet ☐ meters

g) Highest Adjacent Grade (HAG) next to building: ☐ Natural ☒ Finished 6.1 ☒ 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: GUSTAVO INTERIAN License Number: PSM 6461

Title: PROFESSIONAL SURVEYOR AND MAPPER

Company Name: LYNX SURVEYORS CORP

Address: 302 LAUREL ROAD EAST UNIT 291

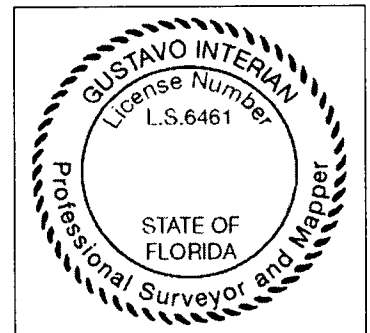
City: LAUREL State: FL ZIP Code: 34272

Telephone: (833) 721-2907 Ext.: \_\_\_\_\_ Email: contact@lynxsurveyors.com

Signature: \_\_\_\_\_ Date: 07/03/2024



Digitally signed by Gustavo  
Interian  
Date: 2024.07.12 12:00:01  
04:00'



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):  
Attached ICC-ES Report No. ESR-2074 for Engineered openings manufactured by Smart Vent Products Inc., Model Smart Vent 1540-520, coverage 200 sq. ft. per unit; Benchmark used (SGC010) Elev.=3.966' (NGVD29), Elev= 2.816' (NAVD88); NGVD to NAVD conversion=1.15' per Vertcon, Prior FEMA flood map: 12015C/0212F, eff: 05/05/2003, BFE 8.0' AE NGVD; A5) Determine by GPS RTK NCCS received; C2 e) for Central A/C System, measured on top metallic wall support; C2 f) g) source Final Survey with Drainage Elevations; Crown of Road Elev.=3.80'; -ORDER No: LS231171

# ELEVATION CERTIFICATE

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 Box No.: 8111 ARLEWOOD CIR	<b>FOR INSURANCE COMPANY USE</b>
City: PORT CHARLOTTE State: FL ZIP Code: 33981	Policy Number: _____
	Company NAIC Number: _____

## 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

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 Box No.: 8111 ARLEWOOD CIR	<b>FOR INSURANCE COMPANY USE</b>
City: PORT CHARLOTTE State: FL ZIP Code: 33981	Policy Number: _____
	Company NAIC Number: _____

## 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: \_\_\_\_\_ G6. Date Permit Issued: \_\_\_\_\_
- G7. Date Certificate of Compliance/Occupancy Issued: \_\_\_\_\_
- G8. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters Datum: \_\_\_\_\_
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: \_\_\_\_\_ ☐ feet ☐ meters Datum: \_\_\_\_\_
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters Datum: \_\_\_\_\_
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: \_\_\_\_\_ ☐ feet ☐ meters Datum: \_\_\_\_\_
- 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: \_\_\_\_\_ Title: \_\_\_\_\_

NFIP Community Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

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):

# ELEVATION CERTIFICATE

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 Box No.: 8111 ARLEWOOD CIR	<b>FOR INSURANCE COMPANY USE</b>
City: PORT CHARLOTTE State: FL ZIP Code: 33981	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 \_\_\_\_\_ ☐ feet ☐ meters ☐ above the LAG higher floor (i.e., the floor above basement, crawlspace, or enclosure floor) is:

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.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:  
8111 ARLEWOOD CIR

City: PORT CHARLOTTE State: FL ZIP Code: 33981

**FOR INSURANCE COMPANY USE**

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 (06-27-2024)

Clear Photo One



Photo Two

Photo Two Caption: REAR VIEW (06-27-2024)

Clear Photo Two

# ELEVATION CERTIFICATE

**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.:  
8111 ARLEWOOD CIR

City: PORT CHARLOTTE State: FL ZIP Code: 33981

### FOR INSURANCE COMPANY USE

Policy Number: \_\_\_\_\_

Company NAIC Number: \_\_\_\_\_

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.

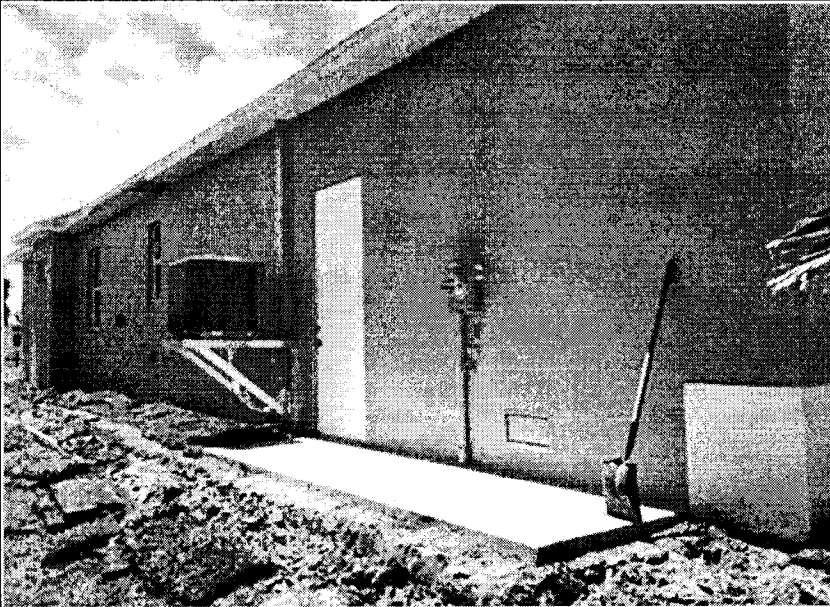


Photo Three

Photo Three Caption: SIDES VIEWS (06-27-2024)

Clear Photo Three

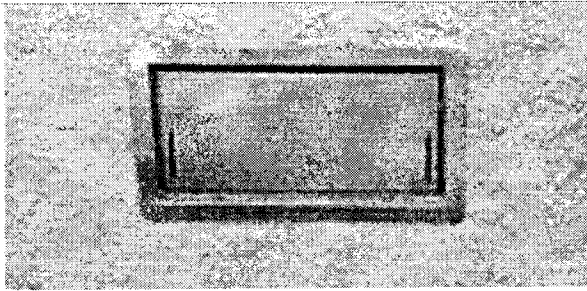


Photo Four

Photo Four Caption: FLOOD VENTS VIEWS (06-27-2024)

Clear Photo Four



ICC  
EVALUATION  
SERVICE

*Most Widely Accepted and Trusted*

# ICC-ES Evaluation Report

ICC-ES | (800) 423-6587 | (562) 699-0543 | [www.icc-es.org](http://www.icc-es.org)

**ESR-2074**

Reissued 02/2023

This report is subject to renewal 02/2025.

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 2023

This report is subject to renewal February 2025.

**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:**

- 2021, 2018, 2015, 2012, 2009 and 2006 *International Building Code*® (IBC)
- 2021, 2018, 2015, 2012, 2009 and 2006 *International Residential Code*® (IRC)
- 2021 and 2018 *International Energy Conservation Code*® (IECC)
- 2013 *Abu Dhabi International Building Code* (ADIBC)<sup>†</sup>

<sup>†</sup>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 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 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 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 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® 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 2021).
- 6.2 Test report on air infiltration in accordance with ASTM E283.

#### 7.0 IDENTIFICATION

- 7.1 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).
- 7.2 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](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®	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>

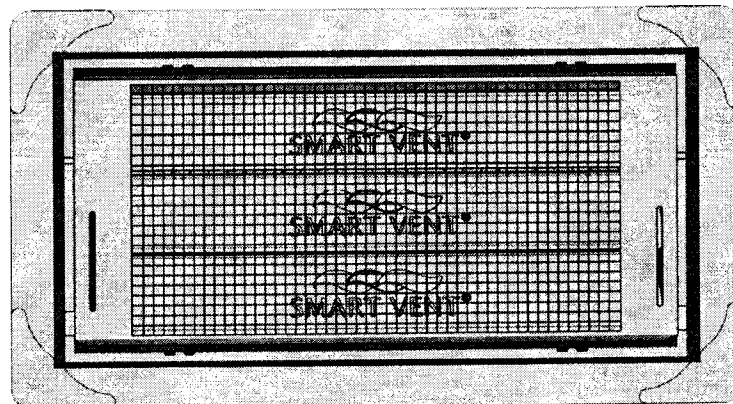


FIGURE 1—SMART VENT: MODEL 1540-510

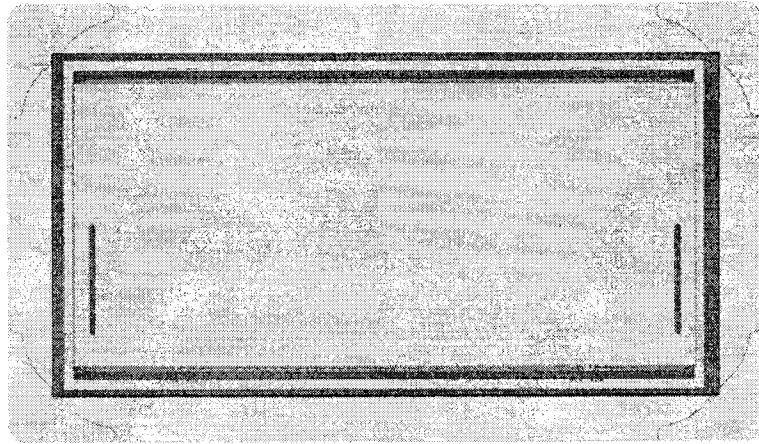


FIGURE 2—SMART VENT MODEL 1540-520

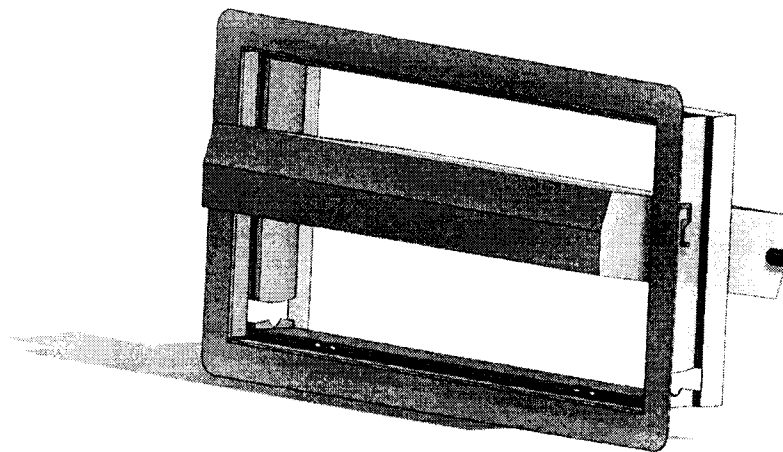


FIGURE 3—SMART VENT: SHOWN WITH FLOOD DOOR PIVOTED OPEN

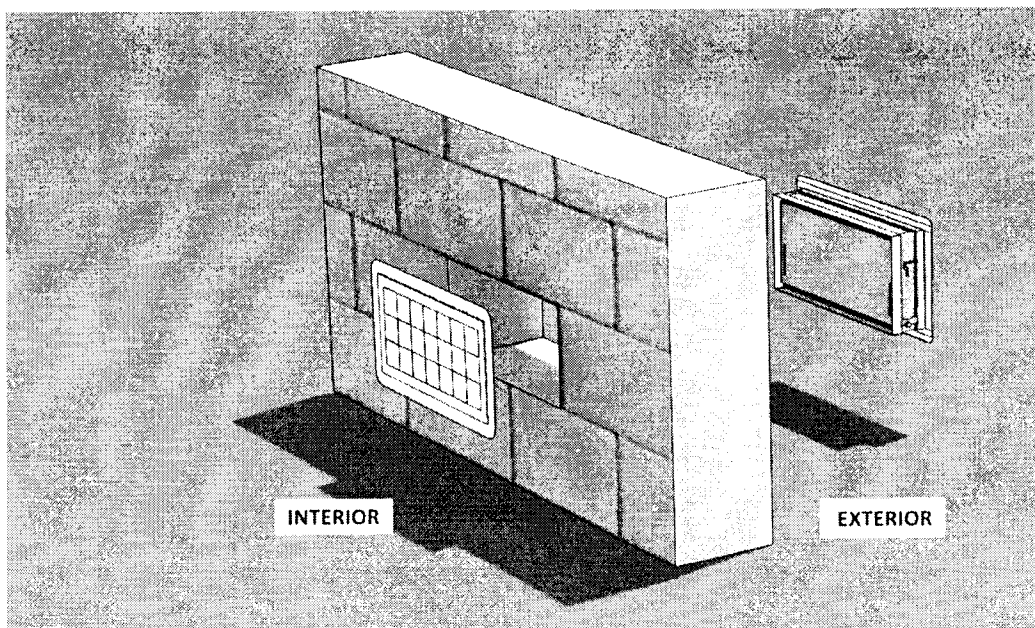


FIGURE 4—FLOOD VENT SEALING KIT



## ICC-ES Evaluation Report

## ESR-2074 CBC and CRC Supplement

Reissued February 2023

This report is subject to renewal February 2025.

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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 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:

## ■ 2019 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.

## ■ 2019 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 2019 CBC Chapter 12, provided the design and installation are in accordance with the 2018 *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 2019 CRC, provided the design and installation are in accordance with the 2018 *International Residential Code*® (IRC) provisions noted in the evaluation report.

This supplement expires concurrently with the evaluation report, reissued February 2023.

## ICC-ES Evaluation Report

## ESR-2074 FBC Supplement

Reissued February 2023

This report is subject to renewal February 2025.

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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 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:

- 2020 Florida Building Code—Building
- 2020 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 are 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 2018 *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 2023.





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**Product Approval**  
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FL #	FL5822-R8
Application Type	Affirmation
Code Version	2020
Application Status	Approved
	*Approved by DBPR. Approvals by DBPR shall be reviewed and ratified by the POC and/or the Commission if necessary.
Comments	
Archived	
Product Manufacturer	Smart Vent Products, Inc.
Address/Phone/Email	430 Andbro Dr Unit 1 Pitman, NJ 08071 (877) 441-8368 info@smartvent.com
Authorized Signature	Michael Graham info@smartvent.com
Technical Representative	Michael Graham
Address/Phone/Email	430 Andbro Dr Unit 1 Pitman, NJ 08071 (877) 441-8368 info@smartvent.com
Quality Assurance Representative	
Address/Phone/Email	
Category	Structural Components
Subcategory	Products Introduced as a Result of New Technology
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Hermes F. Norero P.E.
Florida License	PE-73778
Quality Assurance Entity	Architectural Testing, Inc., an Intertek Company
Quality Assurance Contract Expiration Date	12/31/2023
Validated By	Locke Bowden P.E. Validation Checklist - Hardcopy Received
Certificate of Independence	<a href="#">FL5822_R8_COI_Smart Vent COI SS 2017-08-18 .pdf</a>
Referenced Standard and Year (of Standard)	
Equivalence of Product Standards Certified By	
Sections from the Code	1612.5(1)(1.2) 1708.2

I affirm that there are no changes in the new Florida Building Code which affect my product(s) and my product(s) are in compliance with the

Documentation from approved Evaluation or Validation Entity      Yes      No      N/A

[FL5822 R8 COC SA5822 SS 2020-12-07.pdf](#)

Product Approval Method      Method 2 Option B

Date Submitted      12/16/2020

Date Validated      12/16/2020

Date Pending FBC Approval

Date Approved      12/28/2020

**Summary of Products**

FL #	Model, Number or Name	Description
5822.1	SmartVent Model #1540-510	Dual Function Flood and Ventilation Vent
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> Yes <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> N/A <b>Design Pressure:</b> +100/-100 <b>Other:</b> One vent may be used for up to 200 sq. ft. of interior space (minimum 2).		<b>Installation Instructions</b> <a href="#">FL5822 R8 II 1540-510 SS 2017-08-23.pdf</a> Verified By: Hermes F. Norero, P.E. Florida P.E. 73778 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL5822 R8 AE PER5022 SS 2018-06-20.pdf</a> <a href="#">FL5822 R8 AE SmartVent - Impact Requirements SS 2017-08-23.pdf</a> Created by Independent Third Party: Yes
5822.2	SmartVent Model #1540-511	Dual Function Flood and Ventilation Vent
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> Yes <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> N/A <b>Design Pressure:</b> +100/-100 <b>Other:</b> One vent may be used for up to 400 sq. ft. of interior space (minimum 2).		<b>Installation Instructions</b> <a href="#">FL5822 R8 II 1540-511 SS 2017-02-28.pdf</a> Verified By: Hermes F. Norero, P.E. Florida P.E. 73778 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL5822 R8 AE PER5022 SS 2018-06-20.pdf</a> <a href="#">FL5822 R8 AE SmartVent - Impact Requirements SS 2017-08-23.pdf</a> Created by Independent Third Party: Yes
5822.3	SmartVent Model #1540-520	Insulated Flood Vent
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> Yes <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> N/A <b>Design Pressure:</b> +100/-100 <b>Other:</b> One vent may be used for up to 200 sq. ft. of interior space (minimum 2).		<b>Installation Instructions</b> <a href="#">FL5822 R8 II 1540-520 SS 2017-08-23.pdf</a> Verified By: Hermes F. Norero, P.E. Florida P.E. 73778 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL5822 R8 AE PER5022 SS 2018-06-20.pdf</a> <a href="#">FL5822 R8 AE SmartVent - Impact Requirements SS 2017-08-23.pdf</a> Created by Independent Third Party: Yes
5822.4	SmartVent Model #1540-521	Insulated Flood Vent
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> Yes <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> N/A <b>Design Pressure:</b> +100/-100 <b>Other:</b> One vent may be used for up to 400 sq. ft. of interior space (minimum 2).		<b>Installation Instructions</b> <a href="#">FL5822 R8 II 1540-521 SS 2017-02-28.pdf</a> Verified By: Hermes F. Norero, P.E. Florida P.E. 73778 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL5822 R8 AE PER5022 SS 2018-06-20.pdf</a> <a href="#">FL5822 R8 AE SmartVent - Impact Requirements SS 2017-08-23.pdf</a> Created by Independent Third Party: Yes
5822.5	SmartVent Model #1540-524	16" Garage Door Flood Vent
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> Yes <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> N/A <b>Design Pressure:</b> N/A <b>Other:</b> One vent may be used for up to 200 sq. ft. of interior space (minimum 2). See Installation Instructions for allowable pressures per door construction.		<b>Installation Instructions</b> <a href="#">FL5822 R8 II 1540-524 SS 2018-08-17.pdf</a> Verified By: Hermes F. Norero, P.E. Florida P.E. 73778 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL5822 R8 AE PER5892 SS 2018-08-17.pdf</a> <a href="#">FL5822 R8 AE SmartVent - Impact Requirements SS 2017-08-23.pdf</a> Created by Independent Third Party: Yes
5822.6	SmartVent Model #1540-570	Wood Wall Insulated Flood Vent
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> Yes <b>Approved for use outside HVHZ:</b> Yes		<b>Installation Instructions</b> <a href="#">FL5822 R8 II 1540-570 SS 2017-02-28.pdf</a> Verified By: Hermes F. Norero, P.E. Florida P.E. 73778

<b>Impact Resistant:</b> N/A <b>Design Pressure:</b> +100/-100 <b>Other:</b> One vent may be used for up to 200 sq. ft. of interior space (minimum 2).	Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL5822 R8 AE PER5022 SS 2018-06-20.pdf</a> <a href="#">FL5822 R8 AE SmartVent - Impact Requirements SS 2017-08-23.pdf</a> Created by Independent Third Party: Yes
5822.7 SmartVent Model #1540-574 <b>Limits of Use</b> <b>Approved for use in HVHZ:</b> Yes <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> N/A <b>Design Pressure:</b> N/A <b>Other:</b> One vent may be used for up to 200 sq. ft. of interior space (minimum 2). See Installation Instructions for allowable pressures per door construction.	14.5" Garage Door Flood Vent <b>Installation Instructions</b> <a href="#">FL5822 R8 II 1540-574 SS 2018-08-17.pdf</a> Verified By: Hermes F. Norero, P.E. Florida P.E. 73778 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL5822 R8 AE PER5892 SS 2018-08-17.pdf</a> <a href="#">FL5822 R8 AE SmartVent - Impact Requirements SS 2017-08-23.pdf</a> Created by Independent Third Party: Yes



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## Flood Disclosure



Florida Statute 689.302 requires a seller to complete and provide a flood disclosure to a purchaser of residential real property at or before the time the sales contract is executed.

Seller, GRINDSTONE PARTNER, LLC, provides Buyer the following flood disclosure at or before the time the sales contract is executed.

Property address: 8111 ARLEWOOD CIRCLE, PORT CHARLOTTE, FL 33981

Seller, please check the applicable box in paragraphs (1) and (2) below.

### FLOOD DISCLOSURE

Flood Insurance: Homeowners' insurance policies do not include coverage for damage resulting from floods. Buyer is encouraged to discuss the need to purchase separate flood insurance coverage with Buyer's insurance agent.

- (1) Seller ☐ has ☒ has not filed a claim with an insurance provider relating to flood damage on the property, including, but not limited to, a claim with the National Flood Insurance Program.
- (2) Seller ☐ has ☒ has not received federal assistance for flood damage to the property, including, but not limited to, assistance from the Federal Emergency Management Agency.
- (3) For the purposes of this disclosure, the term "flooding" means a general or temporary condition of partial or complete inundation of the property caused by any of the following:
  - a. The overflow of inland or tidal waters.
  - b. The unusual and rapid accumulation of runoff or surface waters from any established water source, such as a river, stream, or drainage ditch.
  - c. Sustained periods of standing water resulting from rainfall.

Seller: Jamie G. Knight POA

Date: 8/28/2025

Seller: \_\_\_\_\_

Date: \_\_\_\_\_

Copy provided to Buyer on \_\_\_\_\_ by ☐ email ☐ facsimile ☐ mail ☐ personal delivery.