# U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

National Flood Insurance Program

### **ELEVATION CERTIFICATE**

**IMPORTANT: FOLLOW THE INSTRUCTIONS ON PAGES 8-15** 

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	A - PROPERTY INFORM	ITAN	ON			FOR INS	URANCE COM	PANY USE	
A1. Building Owner's Name Richard Gaule						Policy Number:				
A2. Building Street Add Box No. 2809 Topaz Drive	ress (includir	g Apt., Unit, Suite, and/	or Blo	dg. No.) or P.O.	Route a		Company NAIO Number:	0		
City Novato State CA						A		Zip Code <b>94945</b>		
A3. Property Description Assessor's Parcel No. 14 A4. Building Use (e.g., I A5. Latitude/Longitude:	<b>3-242-52</b> Residential, N	Ion-Residential, Addition	n, Acc	cessory, etc.) R	esidenti	ial	144 D 400 T	6,445,400		
A6. Attach at least 2 ph	-				obtain f		NAD 1927	● NAD 1983		
A7. Building Diagram N		are ballaring if the Certific	cate i	s being used to	Obtain	noou in	surance.			
A8. For a building with a		or enclosure(s):	-	A9	. For a b	building	with an attach	ed darage.		
a) Square footage of crawlspace or enclosure(s) NA sq ft  b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade  NA				b)	b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade					
c) Total net area of t	lood opening	s in A8.b NA		sq in c)	Total net	t area o	of flood opening	gs in A9.b NA	sq	
d) Engineered flood	openings?	○Yes		_			od openings?		No	
		CTION B - FLOOD INS	URA		-					
B1. NFIP Community N				B2. County N					3. State	
Novato 060178  B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7.	FIRM Panel E Revised Date	ffective/	B8. F	Flood Zone(s)	B9. Base Floo	d Elevation(s) use base floor	
06041C0282	E	March 16, 2016		March 16, 20	16		AE		10	
B11. Indicate elevation of B12. Is the building loca Designation Date:		tal Barrier Resources S		n (CBRS) area				OPA)? (Ye	s ( No	
	SEC	TION C - BUILDING EL	EVA <sup>-</sup>	TION INFORM	ATION (S	SURVE	Y REQUIRED	)		
C1. Building elevations * * A new Elevation Certifi C2. Elevations: Zones A Items C2.a-h below acc	are based on cate will be re	Construction Draw	ings* on of I-V30	Building the building is	g Under complete	Construe.	uction*	Finished Cons		
Benchmark Utilized: Cit	ty BM 357			Vertica	al Datum	16.21				
Indicate elevation datur	n used for the	e elevations in items a) t	hroug	gh h) below. (	NGVD	1929	● NAVD 1988	8		
	Othe)	r/Source:								
Datum used for building	elevations n	nust be the same as tha	t use	d for the BFE.				Check the me	easurement use	
a) Top of bottom floor	including bas	sement, crawlspace, or e	enclo	sure floor)		13.9		• feet	C meters	
b) Top of the next higher floor						22 . 9	9	• feet	meters	
c) Bottom of the lowest horizontal structural member (V Zones only)							○ feet	C meters		
d) Attached garage (to						<u> </u>		• feet	( meters	
e) Lowest elevation of machinery or equipment servicing the building     (Describe type of equipment and location in Comments)				ding		13.	9	• feet	C meters	
f) Lowest adjacent (finished) grade next to building (LAG)						5.	0	• feet		
						11.	1	( feet		
h) Lowest adjacent grade at lowest elevation of deck or stairs, including							0	( feet	∩ meters	

## **ELEVATION CERTIFICATE**, page 2

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IMPORTANT: In these spaces, copy to	ne corresponding infor	mation	n from Section	on A.	FC	R INSURANCE	Expiration: 11/30/201	
Building Street Address (including Apt.,	Unit, Suite, and/or Bldg.	No.) o	r P.O. Route	and Box No.				
2809 Topaz Drive						Policy Number:		
City Novato	State Zip Code CA 94945					Company NAIC Number:		
SECTION	ON D - SURVEYOR, EN	GINEE	R, OR ARCH	ITECT CER	TIFICATION	NC		
This certification is to be signed and seal that the information on this Certificate rep punishable by fine or imprisonment unde	resents my best efforts	to inter 1001.	pret the data	available. I i				
Check here if attachments.	provided by a li					MAL LAND	S	
Certifier's Name  Dale White		License Number				SALE WHI	於經	
Title	Company Name	1	PLS 439	/	(	PLAC SEA	E \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Partner		Company Name White & Prescott				* No. 439	7  *	
Address	City	State Zip Code		'	1,01			
10 Commercial Blvd. # 209	Novato		CA 949	49		ATE OF CA	Life	
Signature DAK White	Date <b>August 8, 2017</b>		Telephone 415-506-4268					
Copy all pages of this Elevation Certificat	e for (1) community office	ial. (2)	insurance an	ent/compan	y, and (3)	building owner		
Signature DCU LIAY						Date	August 8 2017	
sum white							August 8, 2017	
SECTION E - BUILDING ELEVATION		-				-		
For Zones AO and A (without BFE), com Sections A, B, and C. For Items E1-E4, ι								
E1. Provide elevation information for the highest adjacent grade (HAG) and th				show whet	ther the ele	evation is above	e or below the	
a) Top of bottom floor (including basement, crawlspace, or enclosure) is feet C meters above or below the					below the HAG.			
b) Top of bottom floor (including basement, crawlspace, or enclosure) is feet C meters above or below the LA						below the LAG.		
E2. For Building Diagrams 6-9 with perm higher floor (elevation C2.b in the diagra		ovided	in Section A	feet C		page 8 of Instru above or	ctions), the next  below the HAG.	
E3. Attached garage (top of slab) is feet C meters above or below the HA							below the HAG.	
E4. Top of platform of machinery and /or equipment servicing the building is feet C meters _ above or _ below th						below the HAG.		
E5. Zone AO only: If no flood depth num management ordinance? Yes C	ber is available, is the to No Unknown. The	p of the local of	e bottom flooi fficial must ce	elevated in	accordan ormation in	ce with the com Section G.	munity's floodplain	
SECTION F -	PROPERTY OWNER (O	R OW	NER'S REPR	ESENTATI	VE) CERT	IFICATION		
The property owner or owner's authoriz community-issued BFE) or Zone AO mu	ed representative who coust sign here. The staten	omplet nents in	es Sections An Sections A,	, B, and E fo B, and E are	or Zone A e correct to	(without a FEM the best of my	A-issued or knowledge.	
Property Owner or Owner's Authorized	Representative's Name							
Address	City			State		ZIP C	ode	
Signature	Date			Telephon	е			
Comments								
						☐ Chec	k here if attachmen	

#### **BUILDING PHOTOGRAPHS**

#### **ELEVATION CERTIFICATE**, page 4

See instructions for Item A6.

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Expiration: 11/30/2018

IMPORTANT: In these spaces,	on A. FOR INSURANCE COMPANY USE	
Building Street Address (includin 2809 Topaz Drive	g Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route	and Box No. Policy Number:
City Novato	State CA Zip Code 949	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



Rear View