

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 - PROPERTY INFORMATION		FOR INSURANCE COMPANY USE	
A1. Building Owner's Name <b>Neil Windisch</b>		Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>89 San Miguel Way</b>		Company NAIC Number:	
City <b>Novato</b>	State <b>CA</b>	Zip Code <b>94945</b>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <b>Assessor's Parcel No. 0124-92-04</b>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <b>Residential</b>			
A5. Latitude/Longitude: Lat. <b>38.11748</b> Long. <b>-122.59865</b> Horizontal Datum: <input type="radio"/> NAD 1927 <input checked="" type="radio"/> 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 <b>8</b>			
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) <b>1632</b> sq ft		a) Square footage of attached garage <b>494</b> sq ft	
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <b>24</b>		b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <b>2</b>	
c) Total net area of flood openings in A8.b <b>1782</b> sq in		c) Total net area of flood openings in A9.b <b>500</b> sq in	
d) Engineered flood openings? <input type="radio"/> Yes <input checked="" type="radio"/> No		d) Engineered flood openings? <input checked="" type="radio"/> Yes <input type="radio"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number <b>Novato 060178</b>			B2. County Name <b>Marin</b>		B3. State <b>CA</b>	
B4. Map/Panel Number <b>06041C0276</b>	B5. Suffix <b>D</b>	B6. FIRM Index Date <b>May 4, 2009</b>	B7. FIRM Panel Effective/Revised Date <b>May 4, 2009</b>	B8. Flood Zone(s) <b>AE</b>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <b>67.4</b>	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="radio"/> FIS Profile <input checked="" type="radio"/> FIRM <input type="radio"/> Community Determined <input type="radio"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> Other/Source: _____						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="radio"/> Yes <input checked="" type="radio"/> No Designation Date: <input type="radio"/> CBRS <input type="radio"/> OPA						

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)		
C1. Building elevations are based on: <input type="radio"/> Construction Drawings* <input type="radio"/> Building Under Construction* <input checked="" type="radio"/> Finished Construction		
* A new Elevation Certificate will be required when construction of the building is complete.		
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.		
Benchmark Utilized: <b>Novato BM # 300</b> Vertical Datum: <b>66.13</b>		
Indicate elevation datum used for the elevations in items a) through h) below. <input type="radio"/> NGVD 1929 <input checked="" type="radio"/> NAVD 1988 <input type="radio"/> 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)	<b>65.9</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
b) Top of the next higher floor	<b>68.1</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	.	<input type="radio"/> feet <input type="radio"/> meters
d) Attached garage (top of slab)	<b>66.7</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<b>67.2</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<b>66.6</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<b>67.0</b>	<input checked="" type="radio"/> feet <input type="radio"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	.	<input checked="" type="radio"/> feet <input type="radio"/> meters

**ELEVATION CERTIFICATE, page 2**

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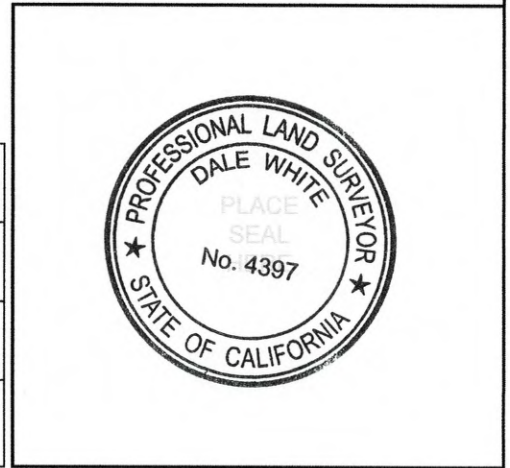
<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>89 San Miguel Way</b>			Policy Number:	
City <b>Novato</b>	State <b>CA</b>	Zip Code <b>94945</b>	Company NAIC Number:	

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

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.*

Check here if attachments.

Were latitude and longitude in Section A provided by a licensed land surveyor?  
 Yes     No



Certifier's Name <b>Dale White</b>		License Number <b>PLS 4397</b>	
Title <b>Partner</b>	Company Name <b>White &amp; Prescott</b>		
Address <b>1400 Grant Avenue, Ste 204</b>	City <b>Novato</b>	State <b>CA</b>	Zip Code <b>94945</b>
Signature <i>Dale White</i>	Date <b>March 22, 2021</b>	Telephone <b>415-506-4268</b>	

Copy all pages 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)  
**A5. Latitude and longitude were obtained using Google Earth.**  
**A9.d Two Model FFV-1608 flood vents manufactured by Freedom Flood Vent were installed in the garage doors. These two vents protect 500 square feet. Flood information attached.**  
**C.2.b The house has a lower bottom floor and an upper bottom floor. The elevation given as 68.1 is for the lower bottom floor which measures 1158 square feet. The upper bottom floor contains 465 square feet and the finished floor elevation is 70.2.**  
**C2.e The lowest machinery or equipment servicing the house is the air conditioning unit on the easterly side of the house.**

Signature *Dale White* Date **March 22, 2021**

**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.

E1. 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 \_\_\_\_\_ . \_\_\_\_\_     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 page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) 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 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.

Property Owner or Owner's Authorized Representative's Name			
Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

Check here if attachments.



**BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE, page 4**

See instructions for Item A6.

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City <b>Novato</b>	State <b>CA</b>	Zip Code <b>94945</b>	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 of Photo - March 22, 2021



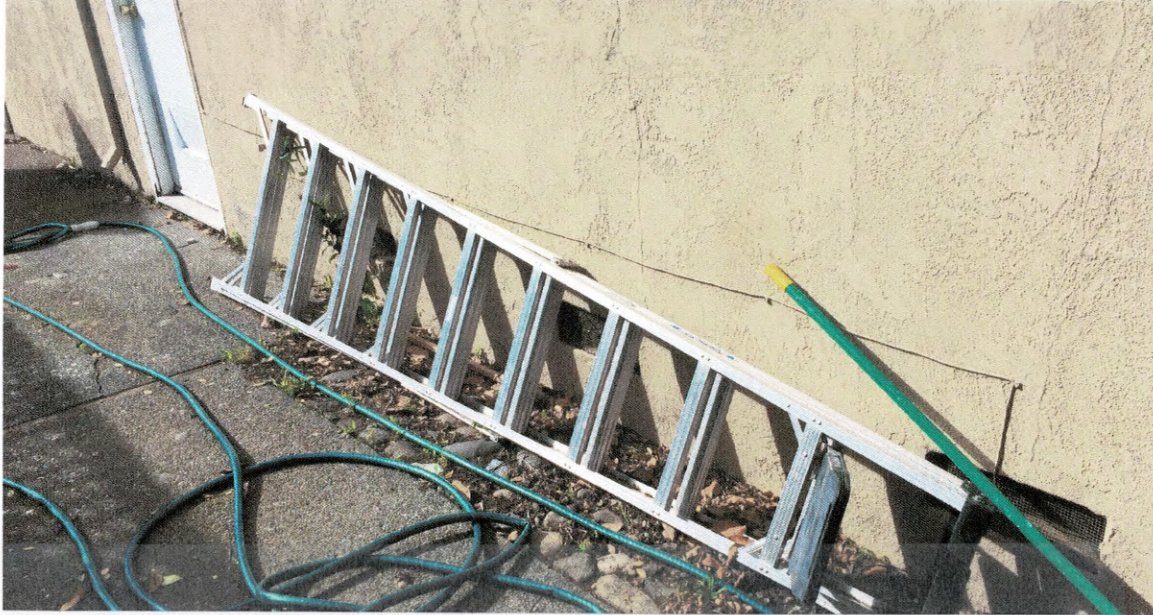
Rear View Date of Photo - March 22, 2021



Left Side View - March 22, 2021

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			<b>FOR INSURANCE COMPANY USE</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>89 San Miguel Way</b>			Policy Number:
City <b>Novato</b>	State <b>CA</b>	Zip Code <b>94945</b>	Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. 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.



Right Side View - March 22, 2021

Left Side View



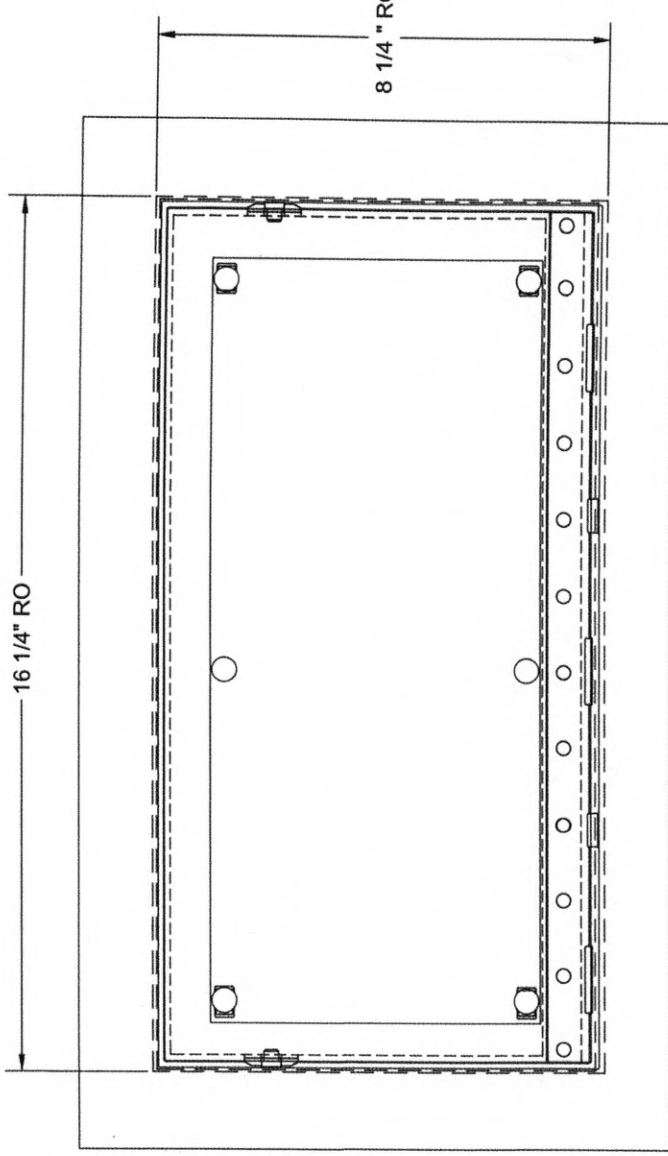
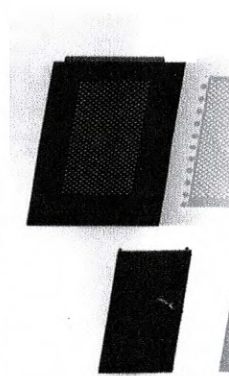
# INSTALLATION INSTRUCTIONS & DETAILS

## MODEL FFV-1608

[www.freedomfloodvent.com](http://www.freedomfloodvent.com) | 800-507-1527 | [info@freedomfloodvent.com](mailto:info@freedomfloodvent.com)

### INSTALLATION INSTRUCTIONS

1. PREPARE A CLEAN 16.25" W x 8.25" H ROUGH OPENING. (1 CMU BLOCK)
2. APPLY A BEAD OF HURRIBOND™ GRIP & SEAL OR EQUIVALENT ADHESIVE AROUND THE BACK OF THE FLANGE ON THE VENT FRAME. (FIG. 2)
3. POSITION THE FRAME INTO THE OPENING AND PUSH THE VENT COMPLETELY IN UNTIL THE FLANGE IS FLUSH AGAINST THE WALL.
4. RE-CHECK THAT FRAME IS SQUARE.
5. VENT DOOR COMES WITH COVER INSTALLED - IF NATURAL AIR VENTILATION IS DESIRED, REMOVE THE COVER BY PUSHING THE (6) RIVETS FROM BEHIND AND PLACE IN STORAGE. FOR USE IN COLDER TEMPERATURES, LEAVE COVER ATTACHED.



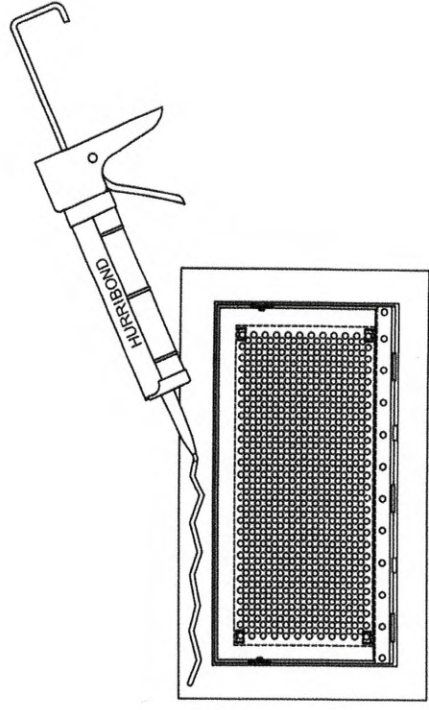
FRONT VIEW WITH COVER INSTALLED  
BOTTOM OF VENT WITH RUBBER SWEEP FACES DOWN

### DETAILED SPECIFICATIONS:

- MATERIAL:**
- POLYCARBONATE PLASTIC
- OPERATION FLOOD:**
- ICC-ES EVALUATED FLOOD COVERAGE - 250 SQ. FT. PER VENT
  - AUTOMATIC NON-POWERED OPERATION
  - VENT REMAINS CLOSED UNTIL ACTIVATED BY FLOOD WATER
- FLOOD PLACEMENT REQUIREMENTS:**
- MINIMUM OF 2 VENTS PER ENCLOSED AREA
  - MOUNTED ON AT LEAST 2 DIFFERENT WALLS
  - BOTTOM OF ALL VENTS MUST BE WITHIN 12" OF HIGHEST ADJACENT GRADE BELOW OPENING
- VENTILATION:**
- 31 SQ. IN. PER VENT WITH COVER REMOVED

SCAN THE QR-CODE  
TO VIEW THE INSTALL VIDEO  
OR WATCH IT HERE:

[www.freedomfloodvent.com/install](http://www.freedomfloodvent.com/install)



REAR VIEW SHOWING HOLES IN DOOR (FIG. 2)

**TURN OVER**