

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

POSTCONSTRUCTION CERTIFICATION FORM

FILE:  
FLOOD  
INSURANCE

COMMUNITY NAME City of Novato, Marin County Novato, California	COMMUNITY NUMBER 060178
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INSTRUCTIONS

The community permit official completes Section I below. Section II may be completed by any of the professionals listed at the beginning of Section II, or by a similarly qualified local permit official. Print or type the information on this form. This form is to be used for new construction and for substantial improvements to existing structures in Zones A1-A30, AH and V1-V30. The community submits the form to the address listed below once the structure is sufficiently completed to fill in Section II.

SECTION - I

(To be completed by the community permit official)

PROPERTY ADDRESS (for lot and block numbers if address is unavailable)  
1717 Novato Blvd., Novato, California 94947

APN: 140-381-01

FIA MAP PANEL ON WHICH PROPERTY IS LOCATED 060178-002 A	FIA MAP ZONE IN WHICH PROPERTY IS LOCATED A-0
FIA MAP EFFECTIVE DATE January 19, 1978	BASE FLOOD ELEVATION AT THE PROPOSED SITE (Obtain from FIA's map even if more restrictive elevations are required locally) 25 MSL

DATE OF BUILDING PERMIT ISSUANCE	OFFICIAL'S NAME	PHONE (with Area Code)
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START OF CONSTRUCTION DATE	TITLE
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(Signature)

(Date)

SECTION - II

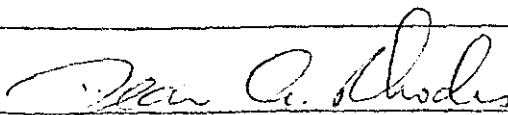
INSTRUCTIONS

Complete only the Elevation Certification unless the structure has been floodproofed at least to the base flood elevation. If floodproofing is used, complete only the Floodproofing Certification. The Elevation Certification may be completed by a registered professional engineer, architect, or surveyor. The Floodproofing Certification may only be completed by a registered professional engineer or architect.

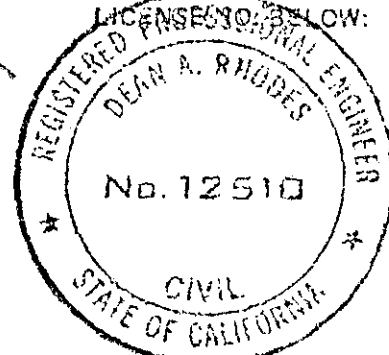
ELEVATION CERTIFICATION

I certify that the structure at the property location described above has the first floor at an elevation of 27.34 feet NGVD (mean sea level).

Note: Also indicate the elevation of the basement floor, or put N/A for nonapplicable. N/A

CERTIFIER'S NAME X RHODES AND GARDNER, INC.	
TITLE X Pres	
ADDRESS 319 MILLER AVE. MILL VALLEY, CALIF. 94941	
 (Signature)	11/13/79 (Date)

AFFIX SEAL OR WRITE PROFESSIONAL LICENSE NO. BELOW:



For PAYMENT: The community submits a copy of this form to: The National Flood Insurance Program  
Post Office Box 34294  
Bethesda, Maryland 20034  
Attention: Community Reporting Project

76-401