## DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

OMB Control No. 1660-0040 Expires: 09-30-2023

## STANDARD FLOOD HAZARD DETERMINATION FORM (SFHDF)

| OFOTIONAL LOANS NECTONS  |                       |  |  |    |                                       |  |                                 |  |
|--|-----------------------|--|--|----|---------------------------------------|--|---------------------------------|--|
| SECTION I - LOAN INFORMATION   |                       |  |  |    |                                       |  |                                 |  |
| 1. LENDER/SERVICER NAME AND ADDRESS  |                       |  | 2. COLLATERAL DESCRIPTION (Building/Mobile Home/Property) (See instructions for more information.) |    |                                       |  |                                 |  |
| State Bank Northwest   |                       | , and the second |  |    |                                       |  |                                 |  |
| 12902 E Sprague Ave, Spoka   | ine Valley, WA,       |  | Marie Mitchell & Danny Mitchell  |    |                                       |  |                                 |  |
| Spokane - 99216  |                       |  | 1906 S Sonora St, Spokane Valley, Spokane WA 99037   |    |                                       |  |                                 |  |
|  | Parcel No: 45252.4007 |  |  |    |                                       |  |                                 |  |
|  |                       |  |  |    |                                       |  |                                 |  |
|  |                       |  |  |    |                                       |  |                                 |  |
| 3. LENDER/SERVICER ID #   4. LOAN IDENTIFIE  |                       |  |  | 5. | 5. AMOUNT OF FLOOD INSURANCE REQUIRED |  |                                 |  |
| 2045   |                       |  |  |    |                                       |  |                                 |  |
| 2945   |                       |  |  |    |                                       |  |                                 |  |
| CECTION II   |                       |  |  |    |                                       |  |                                 |  |
| SECTION II   |                       |  |  |    |                                       |  |                                 |  |
| A. NATIONAL FLOOD INSURANCE PROGRAM (NFIP) COMMUNITY JURISDICTION  |                       |  |  |    |                                       |  |                                 |  |
| 1. NFIP Community Name 2.  |                       | 2 Cc   | County(ies)  |    | State 4. NFIP Community Number        |  |                                 |  |
| 1.141 II Oommunity Name  |                       | 2. 00  | z. Oddity(ics)   |    | . Otato                               | 7.14111 00                               | Timumity Ivamber                |  |
| CITY OF SPOKANE VALLEY   |                       | SPO  | SPOKANE  |    | WA                                    | 530342                                   |                                 |  |
|  |                       |  |  |    |                                       |  |                                 |  |
| B. NATIONAL FLOOD INSURANCE PROGRAM (NFIP) DATA AFFECTING BUILDING/MOBILE HOME   |                       |  |  |    |                                       |  |                                 |  |
|  |                       |  |  |    |                                       |  |                                 |  |
| NFIP Map Number or Community-Panel Number (Community name, if not the same as "A")   |                       | ibei   | 2. NFIP Map Panel Effective /<br>Revised Date  |    |                                       | a Letter or                              | a Letter of Map Gharige (LOMO): |  |
|  |                       |  |  |    | <ul><li>NO</li></ul>                  |  |                                 |  |
| 53063 C 0590 D   |                       |  | 07/06/2010   |    |                                       | (If yes, and LOMC date/no. is available, |                                 |  |
|  |                       |  |  |    | YES                                   |  | and case no. below).            |  |
| 4. Flood Zone  |                       |  | 5. No NFIP Map   |    |                                       |  | and sade no. below).            |  |
| x  |                       |  | ·  |    | D-4-                                  |  | O N.                            |  |
| ^  |                       |  |  |    | Date                                  |  | Case No.                        |  |
| C. FEDERAL FLOOD INSURANCE AVAILABILITY (Check all that apply.)  |                       |  |  |    |                                       |  |                                 |  |
|  |                       |  |  |    |                                       |  |                                 |  |
| 1. 🔀 Federal Flood Insurance is available (community participates in the NFIP). 🔀 Regular Program 🗌 Emergency Program of NFIP                        |                       |  |  |    |                                       |  |                                 |  |
| 2. Federal Flood Insurance is not available (community does not participate in the NFIP).  |                       |  |  |    |                                       |  |                                 |  |
|  |                       |  |  |    |                                       |  |                                 |  |
| Building/Mobile Home is in a Coastal Barrier Resources Area (CBRA) or Otherwise Protected Area (OPA). Federal Flood Insurance                        |                       |  |  |    |                                       |  |                                 |  |
| may not be available.  |                       |  |  |    |                                       |  |                                 |  |
| CBRA/OPA Designation Date:   |                       |  |  |    |                                       |  |                                 |  |
|  |                       |  |  |    |                                       |  |                                 |  |
| D. DETERMINATION   |                       |  |  |    |                                       |  |                                 |  |
| IS BUILDING/MORILE HOME IN SPECIAL ELOOD HAZARD ADEA (ZONES CONTAINING THE LETTERS "A" OR "V"\S VES VINO   |                       |  |  |    |                                       |  |                                 |  |
| IS BUILDING/MOBILE HOME IN SPECIAL FLOOD HAZARD AREA (ZONES CONTAINING THE LETTERS "A" OR "V")? YES X NO   |                       |  |  |    |                                       |  |                                 |  |
| If yes, flood insurance is required by the Flood Disaster Protection Act of 1973.  |                       |  |  |    |                                       |  |                                 |  |
| If no, flood insurance is not required by the Flood Disaster Protection Act of 1973. Please note, the risk of flooding in this area is only reduced, |                       |  |  |    |                                       |  |                                 |  |
| not removed.   |                       |  |  |    |                                       |  |                                 |  |
| This determination is based on examining the NFIP map, any Federal Emergency Management Agency revisions to it, and any other                        |                       |  |  |    |                                       |  |                                 |  |
| information needed to locate the building /mobile home on the NFIP map.  |                       |  |  |    |                                       |  |                                 |  |
|  |                       |  |  |    |                                       |  |                                 |  |
| E. COMMENTS (Optional)   |                       |  |  |    |                                       |  |                                 |  |
|  |                       |  |  |    |                                       |  |                                 |  |
|  |                       |  |  |    |                                       |  |                                 |  |
| ļ  |                       |  |  |    |                                       |  |                                 |  |
| Life of Loan Tracking will be performed on this property and is transferable.  |                       |  |  |    |                                       |  |                                 |  |
|  | •                     |  | -  |    |                                       |  |                                 |  |
| F. PREPARER'S INFORMATION  |                       |  |  |    |                                       |  |                                 |  |
| NAME, ADDRESS, TELEPHO   | than Lender)          |  |  |    | DATE OF DETERMINATION                 |  |                                 |  |
| Zenith Real Estate Tax Service Inc   |                       |  |  |    |                                       |  |                                 |  |
| 2605 Maitland Center Pkwy-STE B, Maitland, FL 32751  |                       |  |  |    |                                       |  |                                 |  |
| Number: LL-SO-01159  |                       |  |  |    |                                       |  | 09/20/2024                      |  |
|  |                       |  |  |    |                                       |  |                                 |  |