

DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
**STANDARD FLOOD HAZARD DETERMINATION FORM (SFHDF)**

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

| SECTION I - LOAN INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| 1. LENDER/SERVICER NAME AND ADDRESS<br><b>Customer Number</b><br>1000224730<br><b>Address</b><br>THRIVE CREDIT UNION<br>3360 N MORRISON ROAD<br>MUNCIE, IN 47304-<br><b>Delivery Method:</b> FDR-COM - WEB                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                  | 2. COLLATERAL DESCRIPTION (Building/Mobile Home/Property) (See instructions for more information.)<br><b>Borrower:</b><br>NICOLE PROSE, RAYMOND C PROSE<br><b>Determination Address:</b><br>2609 N STATION ST<br>MUNCIE, IN 47304-9784<br>DELAWARE COUNTY<br><b>APN/Tax ID:</b><br><b>S/D:</b><br><b>Section:</b> |                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                  | <b>Lot:</b>                                                                                                                                                                                                                                                                                                       | <b>Block:</b>                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                  | <b>Phase:</b>                                                                                                                                                                                                                                                                                                     | <b>Range:</b>                      |
| 3. LENDER/SERVICER ID #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 4. LOAN IDENTIFIER<br>LL-SO-01115                                | 5. AMOUNT OF FLOOD INSURANCE REQUIRED                                                                                                                                                                                                                                                                             |                                    |
| SECTION II                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
| A. NATIONAL FLOOD INSURANCE PROGRAM (NFIP) COMMUNITY JURISDICTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
| 1. NFIP Community Name<br>DELAWARE COUNTY*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 2. County(ies)<br>Unincorporated Areas                           | 3. State<br>IN                                                                                                                                                                                                                                                                                                    | 4. NFIP Community Number<br>180051 |
| B. NATIONAL FLOOD INSURANCE PROGRAM (NFIP) DATA AFFECTING BUILDING/MOBILE HOME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
| 1. NFIP Map Number or Community-Panel Number<br>(Community name, if not the same as "A")<br>18035C0210E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 2. NFIP Map Panel Effective /<br>Revised Date<br>August 02, 2017 | 3. Is there a Letter of Map Change (LOMC)?<br><input checked="" type="radio"/> NO<br><input type="radio"/> YES (If yes, and LOMC date/no. is available,<br>enter date and case no. below.)<br>Date: Case No:                                                                                                      |                                    |
| 4. Flood Zone<br>X                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 5. No NFIP Map<br><input type="checkbox"/>                       |                                                                                                                                                                                                                                                                                                                   |                                    |
| C. FEDERAL FLOOD INSURANCE AVAILABILITY (Check all that apply.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
| 1. <input checked="" type="checkbox"/> Federal Flood Insurance is available (community participates in the NFIP). <input checked="" type="checkbox"/> Regular Program <input type="checkbox"/> Emergency Program of NFIP                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
| 2. <input type="checkbox"/> Federal Flood Insurance is not available (community does not participate in the NFIP).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
| 3. <input type="checkbox"/> Building/Mobile Home is in a Coastal Barrier Resources Area (CBRA) or Otherwise Protected Area (OPA). Federal Flood Insurance may not be available.<br>CBRA/OPA Designation Date:                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
| D. DETERMINATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
| <b>IS BUILDING/MOBILE HOME IN SPECIAL FLOOD HAZARD AREA (ZONES CONTAINING THE LETTERS "A" OR "V")?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO<br>If yes, flood insurance is required by the Flood Disaster Protection Act of 1973.<br>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.<br>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)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                  | HMDA Information                                                                                                                                                                                                                                                                                                  |                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                  | State: 18<br>County: 035<br>MSA/MD: 34620<br>CT: 0024.03<br>18035002403                                                                                                                                                                                                                                           |                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
| LIFE OF LOAN DETERMINATION<br>This flood determination is provided solely for the use and benefit of the entity named in Section 1, Box 1 in order to comply with the 1994 Reform Act and may not be used or relied upon by any other entity or individual for any purpose, including, but not limited to, deciding whether to purchase a property or determining the value of a property.                                                                                                                                                                                                                                                    |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
| F. PREPARER'S INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |
| NAME, ADDRESS, TELEPHONE NUMBER (If other than Lender)<br> ServiceLink National Flood<br>500 E. Border St<br>Third Floor<br>Arlington, TX 76010                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                  | DATE OF DETERMINATION<br>September 16, 2024<br><br>ORDER NUMBER<br>1440784281                                                                                                                                                                                                                                     |                                    |
| Phone: 1.800.833.6347<br>Fax: 1.800.662.6347                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                  |                                                                                                                                                                                                                                                                                                                   |                                    |