

DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency

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

**STANDARD FLOOD HAZARD DETERMINATION FORM (SFHDF)**

**SECTION I - LOAN INFORMATION**

|                                                                                                                |                    |                                                                                                                                                                                            |  |
|----------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 1. LENDER/SERVICER NAME AND ADDRESS<br>Thrive CU<br>4501 South Delaware Drive, Muncie, IN,<br>Delaware - 47302 |                    | 2. COLLATERAL DESCRIPTION (Building/Mobile Home/Property) (See instructions for more information.)<br><br>DONALD S LEWIS & ALANNA LEWIS<br>2309 W SACRAMENTO DR, MUNCIE, Delaware IN 47303 |  |
| 3. LENDER/SERVICER ID #                                                                                        | 4. LOAN IDENTIFIER | 5. AMOUNT OF FLOOD INSURANCE REQUIRED                                                                                                                                                      |  |

**SECTION II**

**A. NATIONAL FLOOD INSURANCE PROGRAM (NFIP) COMMUNITY JURISDICTION**

|                                                  |                                   |                       |                                           |
|--------------------------------------------------|-----------------------------------|-----------------------|-------------------------------------------|
| 1. NFIP Community Name<br><b>DELAWARE COUNTY</b> | 2. County(ies)<br><b>DELAWARE</b> | 3. State<br><b>IN</b> | 4. NFIP Community Number<br><b>180051</b> |
|--------------------------------------------------|-----------------------------------|-----------------------|-------------------------------------------|

**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><b>18035 C 0145 D</b> | 2. NFIP Map Panel Effective /<br>Revised Date<br><b>07/04/2011</b> | 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). |          |
| 4. Flood Zone<br><b>X</b>                                                                                         | 5. No NFIP Map                                                     | 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).

3. ☐ 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/MOBILE HOME IN SPECIAL FLOOD HAZARD AREA (ZONES CONTAINING THE LETTERS "A" OR "V")?** ☐ YES ☒ 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)**

Life of Loan Tracking will be performed on this property and is transferable.

**F. PREPARER'S INFORMATION**

|                                                                                                                                                                            |                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| NAME, ADDRESS, TELEPHONE NUMBER (If other than Lender)<br>Zenith Real Estate Tax Service Inc<br>2605 Maitland Center Pkwy-STE B, Maitland, FL 32751<br>Number: LL-SO-00677 | DATE OF DETERMINATION<br><br><b>07/17/2024</b> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|