# **Request for Verification of Employment**

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not, your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et. seq., or 7 USC, 1921 et. seq. (if USDA/FmHA).

Instructions: Lender – Complete items 1 through 7. Have applicant(s) complete item 8. Forward directly to employer named in item 1. Employer – Please complete either Part II or Part III as applicable. Complete Part IV and return DIRECTLY to lender named in item 2. The form is to be transmitted directly to the lender and is not to be transmitted through the applicant(s) or any other party.

Part I - Re	quest							
1. To (Name	e and address of e	employer)		2. From (N	ame and addre	ess of lender)		
I certify that this	s verification has bee	en sent directly to the	employer and has no	ot passed through the h	ands of the applic	cant or any other inte	erested party.	
3. Signature of Lender		4. Title 5. [		Jate		6. Lender's No. (Optional)		
I have applied t	for a mortgage loan	and stated that I am n	low or was formerly e	employed by you. My sig	anature below aut	thorizes verification	of this information.	
7. Name and Address of Applicant				8.	8. Signature of Applicant See attached borrower's authorization			
Part II – V	erification of	Present Emplo	oyment					
9. Applicant's	Date of Employmer	nt	10. Present Posit	ion	1	11. Probability of C	ontinued Employment	
12A. Current C	Gross Pay Base (Ent	er Amount and Check	(Period)	13. For Military Pers	onnel Only		ertime or Bonus is Applicable, is its	
	Anr	nual 🗌 Weekly	Other (specify	Pay Grade	ay Grade		nce likely? ime Yes No	
\$ Monthly Hourly				Туре	Monthly Amou	unt Bonu	Bonus Yes No	
				Base Pay \$		15. If pa	aid hourly - avg. hours per week	
	12B. Gross Earnings Rations \$							
Туре	Year To Date	Past Year	Past Year	Flight or Hazard	\$	16. Date	e of applicant's next pay increase	
Base Pay				Clothing	\$	47	and a second of the second	
Overtime				Quarters	\$	17. Proj	ected amount of next pay increase	
Commissions Bonus				Pro Pay Overseas or Combat	\$ \$	18. Date	e of applicant's last pay increase	
Total				Variable Housing Allowance	\$	19. Amo	ount of last pay increase	
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20. Remarks (If employee was off work for any length of time, please indicate time period and reason)

t Termination Per (Year) (Mo		Bonus		
		Bonus		
25. Posi	itions Held			
al misrepresentation, or criminal FHA Commissioner, or the HUD/	connivance or conspiracy purposed to /CPD Assistant Secretary.	o influence the issuance of any		
27. Title (P	Please print or type)	28. Date		
30. Phone	30. Phone No.			
•	30. Phon			

## **Borrower's Certification & Authorization**

### Certification

The undersigned certify the following:

1. I/We have applied for a mortgage loan from

In applying for the loan.

I/We completed a loan application containing various information on the purposes of the loan, the amount and source of the down payment, employment and income information, and assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application with the employer and/or other documents, nor did I/We omit any pertinent information.

2.

3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage, as applicable under the provisions of Title 18, United States Code, Section 1014.

### Authorization to Release Information

To Whom It May Concern:

1. I/We have applied for a mortgage loan from

#### 2.

- 3.
- 4. A copy of this authorization may be accepted as an original.

5.

Date

Social Security Number:

Social Security Number:

Date