

# SAMPLE ASSET VERIFICATION

Name of Bank: \_\_\_\_\_

Address of Bank: \_\_\_\_\_

Re: \_\_\_\_\_ SS#: \_\_\_\_\_  
Applicant/Resident Name

Applicant/Resident Address	City, State	Zip Code
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The above person(s) has applied for tenancy (or is a resident) at \_\_\_\_\_  
 \_\_\_\_\_. As part of our processing, we require verification of household's income, expenses, and other information related to eligibility. The applicant/resident herein authorizes the release of information regarding his/her income and assets. The information you provide will be used only for the purpose of determining household's eligibility for tenancy. We are required to complete our verification process in a short time period and would appreciate your prompt response. If you have any questions, please contact our office.

Permission by: \_\_\_\_\_  
Applicant/Resident Signature Date

Please complete the section below and return it in the enclosed self-addressed envelope. (Please mail rather than have the above individual hand deliver.) Thank you in advance for your prompt attention.

\_\_\_\_\_  
 Printed Name of Manager

Signature of Manager	Date	Manager's Phone Number
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**TO BE COMPLETED BY INSTITUTION**

**Checking Account**

<u>Date Opened</u>	<u>Account Number(s)</u>	<u>Average 6-Month Balance(s)</u>	<u>Interest Rate, If Any</u>	
_____	_____	_____	_____	%
_____	_____	_____	_____	%
_____	_____	_____	_____	%

**Savings Account**

<u>Date Opened</u>	<u>Account Number(s)</u>	<u>Present Account Balance(s)</u>	<u>Annual Interest Rate</u>	<u>Early Withdrawal Penalty</u>
_____	_____	_____	_____	%
_____	_____	_____	_____	%
_____	_____	_____	_____	%

**Certificate of Deposit**

<u>Date Opened</u>	<u>Account Number(s)</u>	<u>Present Account Balance(s)</u>	<u>Annual Interest Rate</u>	<u>Early Withdrawal Penalty</u>
_____	_____	_____	_____	% _____
_____	_____	_____	_____	% _____
_____	_____	_____	_____	% _____

I certify that the above information is true and correct.

_____	_____
Printed Name of Official	Title of Official
_____	_____
Name of Institution	Signature
_____	_____
Address	Date
_____	_____
City, State, Zip Code	Phone Number

<p>WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense for any person to make false or fraudulent statements to any department or agency of the United States Government or public housing authority as to any matter within its jurisdiction or to make unauthorized disclosures or improper use of the information collected hereunder.</p>
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May 2009