

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.

LENDER'S PHONE NUMBERS
 Phone:
 Fax:

Part I - Request

1. To (Name and Address of Employer)	2. From (Name and Address of Lender)
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I certify that this verification has been sent directly to the employer and has not passed through the hands of the applicant or any other party.

3. Signature of Lender	4. Title	5. Date	6. Lender's No. (Optional)
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I have applied for a mortgage loan and state that I am now or was formerly employed by you. My signature below authorizes verification of this information.

7. Name and Address of Applicant (include employee or badge number)	8. Signature of Applicant
See attached authorization	

Part II - Verification of Present Employment

9. Applicant's Date of Employment	10. Present Position	11. Probability of Continued Employment
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12A. Current Gross Base Pay (Enter Amount and Check Period) <input type="checkbox"/> Annual <input type="checkbox"/> Weekly <input type="checkbox"/> Other (specify) <input type="checkbox"/> Monthly <input type="checkbox"/> Hourly \$ _____	13. For Military Personnel Only Pay Grade _____ Type _____ Monthly Amount _____	14. If Overtime or Bonus is Applicable, Is its Continuance Likely? Overtime Bonus <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
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12 B Gross Earnings					
Type	Year To Date	Past Year 19__	Past Year 19__	Base Pay	\$
Base Pay	Thru ___ 19__ \$	\$	\$	Rations	\$
Overtime	\$	\$	\$	Flight or Hazard	\$
Commissions	\$	\$	\$	Clothing	\$
Bonus	\$	\$	\$	Quarters	\$
Total	\$	\$	\$	Pro Pay	\$
				Overseas or Combat	\$
				Variable Housing Allowances	\$

15. If paid hourly - average hours per week _____

16. Date of applicant's next pay increase _____

17. Projected amount of next pay increase _____

18. Date of applicant's last pay increase _____

19. Amount of last pay increase _____

20. Remarks (If employee was off work for any length of time, please indicate time period and reason)

Part III - Verification of Previous Employment

21. Date Hired	23. Salary/Wage at Termination Per (Year) (Month) (Week)
22. Date Terminated	Base Overtime Commissions Bonus
24. Reason for Leaving	25. Position Held

Part IV - Authorized Signature - Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy purposed to influence the issuance of any guarantee or insurance by the VA Secretary, the USDA, FmHA/FHA Commissioner, or the HUD/CPD Assistant Secretary.

26. Signature of Employer	27. Title (Please print or type)	28. Date
29. Please print or type name signed in item 26	30. Phone Number	