

**VA Native American Direct Loan Checklist  
Development Bank of American Samoa**

Please submit all documents at one time. The Veteran and Development Bank of American Samoa will initial next to each document certifying it is included in the loan packet. Veteran will keep a copy of the checklist for their records. **The VA office will not accept any packets that do not have all documents.**

Veteran Name (printed): \_\_\_\_\_ Date Packet Complete: \_\_\_\_\_

| <u>Document</u>   | <u>Veteran</u> | <u>DBAS</u> |
|---|----------------|-------------|
| 1. Certification for Pacific Islander   | <u>N/A</u>     | <u>DBAS</u> |
| 2. <b>VA Certificate of Eligibility or VA Form 26-1880</b>  | _____          | _____       |
| 3. VA Form 26-8937, Verification of Benefits  | _____          | _____       |
| 4. <b>Evidence of Residence (Birth Certificate or I.D.)</b>   | _____          | _____       |
| 5. <b>Copy of Utility Bill</b>  | _____          | _____       |
| 6. <b>Current Bank Statements (2 months)</b>  | _____          | _____       |
| 7. <b>Current Income Tax Returns (2 years)</b>  | _____          | _____       |
| 8. <b>Current Pay Stubs (2 months)</b>  | _____          | _____       |
| 9. VA Form 26-8513, Creditor Disclosure   | <u>N/A</u>     | <u>DBAS</u> |
| 10. VA Form 26-8497a, Verification of Deposit   | _____          | _____       |
| 11. VA Form 26-8497, Verification of Employment   | _____          | _____       |
| 12. Borrower's Certification and Authorization  |                |             |
| 13. Request for a Certification of Eligibility [26-1880]  | _____          | _____       |
| 14. <b>COMPLETED Loan Application (URLA)</b>  | _____          | _____       |
| 15. ANZ Credit Rating   | <u>N/A</u>     | <u>DBAS</u> |
| 16. Credit Report Authorization   | _____          | _____       |
| 17. <b>Property Documents (Lease or Sales Agreement)</b>  | _____          | _____       |
| 18. <b>Application Fee:(\$125.00)</b> Application \$100,<br>TRO Title Search \$15, Certified Mail & Shipping \$10 | _____          | _____       |

Explanation:

## Uniform Residential Loan Application

Verify and complete the information on this application. If you are applying for this loan with others, each additional Borrower must provide information as directed by your Lender.

**Section 1: Borrower Information.** This section asks about your personal information and your income from employment and other sources, such as retirement, that you want considered to qualify for this loan.

### 1a. Personal Information

|   |  |
|---|--|
| <b>Name</b> (First, Middle, Last, Suffix) _____<br><br><b>Alternate Names</b> – List any names by which you are known or any names under which credit was previously received (First, Middle, Last, Suffix) _____ | <b>Social Security Number</b> _____<br>(or Individual Taxpayer Identification Number)<br><br><b>Date of Birth</b> (mm/dd/yyyy) _____ / ____ / ____<br><br><b>Citizenship</b><br><input type="radio"/> U.S. Citizen<br><input type="radio"/> Permanent Resident Alien<br><input type="radio"/> Non-Permanent Resident Alien |
|---|--|

|  |   |
|--|---|
| <b>Type of Credit</b><br><input type="radio"/> I am applying for individual credit.<br><input type="radio"/> I am applying for joint credit. Total Number of Borrowers: _____<br>Each Borrower intends to apply for joint credit. Your initials: _____ | <b>List Name(s) of Other Borrower(s) Applying for this Loan</b><br>(First, Middle, Last, Suffix) – Use a separator between names<br>_____ |
|--|---|

|  |  |   |
|--|--|---|
| <b>Marital Status</b><br><input type="radio"/> Married<br><input type="radio"/> Separated<br><input type="radio"/> Unmarried<br>(Single, Divorced, Widowed, Civil Union, Domestic Partnership, Registered Reciprocal Beneficiary Relationship) | <b>Dependents</b> (not listed by another Borrower)<br>Number _____<br>Ages _____ | <b>Contact Information</b><br>Home Phone (____) _____ - _____<br>Cell Phone (____) _____ - _____<br>Work Phone (____) _____ - _____ Ext. _____<br>Email _____ |
|--|--|---|

**Current Address**

Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_  
 How Long at Current Address? \_\_\_ Years \_\_\_ Months **Housing**  No primary housing expense  Own  Rent (\$ \_\_\_\_\_ /month)

**If at Current Address for LESS than 2 years, list Former Address**  Does not apply

Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_  
 How Long at Former Address? \_\_\_ Years \_\_\_ Months **Housing**  No primary housing expense  Own  Rent (\$ \_\_\_\_\_ /month)

**Mailing Address** – if different from Current Address  Does not apply

Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

### 1b. Current Employment/Self-Employment and Income

Does not apply

|  |   |
|--|---|
| <b>Employer or Business Name</b> _____ Phone (____) _____ - _____<br>Street _____ Unit # _____<br>City _____ State _____ ZIP _____ Country _____<br><br><b>Position or Title</b> _____<br><b>Start Date</b> ____ / ____ / ____ (mm/dd/yyyy)<br>How long in this line of work? ___ Years ___ Months   | <b>Gross Monthly Income</b><br>Base \$ _____ /month<br>Overtime \$ _____ /month<br>Bonus \$ _____ /month<br>Commission \$ _____ /month<br>Military Entitlements \$ _____ /month<br>Other \$ _____ /month<br><b>TOTAL \$</b> _____ <b>0.00/month</b> |
| <b>Check if this statement applies:</b><br><input type="checkbox"/> I am employed by a family member, property seller, real estate agent, or other party to the transaction.<br><br><input type="checkbox"/> Check if you are the Business Owner or Self-Employed <input type="radio"/> I have an ownership share of less than 25%. <b>Monthly Income (or Loss)</b> \$ _____<br><input type="radio"/> I have an ownership share of 25% or more. \$ _____ |   |

**1c. IF APPLICABLE, Complete Information for Additional Employment/Self-Employment and Income**

Does not apply

|  |  |   |
|--|--|---|
| <b>Employer or Business Name</b> _____ Phone (____) ____ - ____<br>Street _____ Unit # _____<br>City _____ State _____ ZIP _____ Country _____ |  | <b>Gross Monthly Income</b><br>Base \$ _____ /month<br>Overtime \$ _____ /month<br>Bonus \$ _____ /month<br>Commission \$ _____ /month<br>Military Entitlements \$ _____ /month<br>Other \$ _____ /month<br><b>TOTAL \$</b> _____ <b>0.00/month</b> |
| <b>Position or Title</b> _____<br><b>Start Date</b> ____ / ____ / ____ (mm/dd/yyyy)<br>How long in this line of work? ____ Years ____ Months   | <b>Check if this statement applies:</b><br><input type="checkbox"/> I am employed by a family member, property seller, real estate agent, or other party to the transaction. |   |
| <input type="checkbox"/> <b>Check if you are the Business Owner or Self-Employed</b>   |  | <input type="radio"/> I have an ownership share of less than 25%. <b>Monthly Income (or Loss)</b> \$ _____<br><input type="radio"/> I have an ownership share of 25% or more. \$ _____  |

**1d. IF APPLICABLE, Complete Information for Previous Employment/Self-Employment and Income**

Does not apply

**Provide at least 2 years of current and previous employment and income.**

|  |   |  |
|--|---|--|
| <b>Employer or Business Name</b> _____<br>Street _____ Unit # _____<br>City _____ State _____ ZIP _____ Country _____                  |   | <b>Previous Gross Monthly Income \$</b> _____ /month |
| <b>Position or Title</b> _____<br><b>Start Date</b> ____ / ____ / ____ (mm/dd/yyyy)<br><b>End Date</b> ____ / ____ / ____ (mm/dd/yyyy) | <input type="checkbox"/> <b>Check if you were the Business Owner or Self-Employed</b> |  |

**1e. Income from Other Sources**

Does not apply

**Include income from other sources below. Under Income Source, choose from the sources listed here:**

- Alimony
- Automobile Allowance
- Boarder Income
- Capital Gains
- Child Support
- Disability
- Foster Care
- Housing or Parsonage
- Interest and Dividends
- Mortgage Credit Certificate
- Mortgage Differential Payments
- Notes Receivable
- Public Assistance
- Retirement (e.g., Pension, IRA)
- Royalty Payments
- Separate Maintenance
- Social Security
- Trust
- Unemployment Benefits
- VA Compensation
- Other

**NOTE: Reveal alimony, child support, separate maintenance, or other income ONLY IF you want it considered in determining your qualification for this loan.**

| Income Source – use list above   | Monthly Income |
|----------------------------------|----------------|
|                                  | \$             |
|                                  | \$             |
|                                  | \$             |
| <b>Provide TOTAL Amount Here</b> | <b>\$ 0.00</b> |

**Section 2: Financial Information — Assets and Liabilities.** This section asks about things you own that are worth money and that you want considered to qualify for this loan. It then asks about your liabilities (or debts) that you pay each month, such as credit cards, alimony, or other expenses.

**2a. Assets – Bank Accounts, Retirement, and Other Accounts You Have**

Include all accounts below. Under Account Type, choose from the types listed here:

- Checking
- Savings
- Money Market
- Certificate of Deposit
- Mutual Fund
- Stocks
- Stock Options
- Bonds
- Retirement (e.g., 401k, IRA)
- Bridge Loan Proceeds
- Individual Development Account
- Trust Account
- Cash Value of Life Insurance (used for the transaction)

| Account Type – use list above    | Financial Institution | Account Number | Cash or Market Value |
|----------------------------------|-----------------------|----------------|----------------------|
|                                  |                       |                | \$                   |
|                                  |                       |                | \$                   |
|                                  |                       |                | \$                   |
|                                  |                       |                | \$                   |
|                                  |                       |                | \$                   |
| <b>Provide TOTAL Amount Here</b> |                       |                | <b>\$ 0.00</b>       |

**2b. Other Assets and Credits You Have**  Does not apply

Include all other assets and credits below. Under Asset or Credit Type, choose from the types listed here:

- |  |   |   |
|--|---|---|
| <p><i>Assets</i></p> <ul style="list-style-type: none"> <li>• Proceeds from Real Estate Property to be sold on or before closing</li> <li>• Proceeds from Sale of Non-Real Estate Asset</li> <li>• Secured Borrowed Funds</li> </ul> | <ul style="list-style-type: none"> <li>• Unsecured Borrowed Funds</li> <li>• Other</li> </ul> | <p><i>Credits</i></p> <ul style="list-style-type: none"> <li>• Earnest Money</li> <li>• Employer Assistance</li> <li>• Lot Equity</li> <li>• Relocation Funds</li> <li>• Rent Credit</li> <li>• Sweat Equity</li> <li>• Trade Equity</li> </ul> |
|--|---|---|

| Asset or Credit Type – use list above | Cash or Market Value |
|---------------------------------------|----------------------|
|                                       | \$                   |
|                                       | \$                   |
|                                       | \$                   |
|                                       | \$                   |
| <b>Provide TOTAL Amount Here</b>      |                      |
|                                       | <b>\$ 0.00</b>       |

**2c. Liabilities – Credit Cards, Other Debts, and Leases that You Owe**  Does not apply

List all liabilities below (except real estate) and include deferred payments. Under Account Type, choose from the types listed here:

- Revolving (e.g., credit cards)
- Installment (e.g., car, student, personal loans)
- Open 30-Day (balance paid monthly)
- Lease (not real estate)
- Other

| Account Type – use list above | Company Name | Account Number | Unpaid Balance | To be paid off at or before closing | Monthly Payment |
|-------------------------------|--------------|----------------|----------------|-------------------------------------|-----------------|
|                               |              |                | \$             | <input type="checkbox"/>            | \$              |
|                               |              |                | \$             | <input type="checkbox"/>            | \$              |
|                               |              |                | \$             | <input type="checkbox"/>            | \$              |
|                               |              |                | \$             | <input type="checkbox"/>            | \$              |
|                               |              |                | \$             | <input type="checkbox"/>            | \$              |

**2d. Other Liabilities and Expenses**  Does not apply

Include all other liabilities and expenses below. Choose from the types listed here:

- Alimony
- Child Support
- Separate Maintenance
- Job Related Expenses
- Other

|  | Monthly Payment |
|--|-----------------|
|  | \$              |
|  | \$              |
|  | \$              |

**Borrower Name:** \_\_\_\_\_  
 Uniform Residential Loan Application  
 Freddie Mac Form 65 • Fannie Mae Form 1003  
 Effective 1/2021

**Section 3: Financial Information — Real Estate.** This section asks you to list all properties you currently own and what you owe on them.  *I do not own any real estate*

**3a. Property You Own** If you are refinancing, list the property you are refinancing **FIRST**.

Address Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

| Property Value | Status: Sold, Pending Sale, or Retained | Intended Occupancy: Investment, Primary Residence, Second Home, Other | Monthly Insurance, Taxes, Association Dues, etc. if not included in Monthly Mortgage Payment | For 2-4 Unit Primary or Investment Property |  |
|----------------|---|---|--|---|--|
|                |   |   |  | Monthly Rental Income                       | For LENDER to calculate: Net Monthly Rental Income |
| \$             |   |   | \$   | \$  | \$   |

**Mortgage Loans on this Property**  *Does not apply*

| Creditor Name | Account Number | Monthly Mortgage Payment | Unpaid Balance | To be paid off at or before closing | Type: FHA, VA, Conventional, USDA-RD, Other | Credit Limit (if applicable) |
|---------------|----------------|--------------------------|----------------|-------------------------------------|---|------------------------------|
|               |                | \$                       | \$             | <input type="checkbox"/>            |   | \$                           |
|               |                | \$                       | \$             | <input type="checkbox"/>            |   | \$                           |

**3b. IF APPLICABLE, Complete Information for Additional Property**  *Does not apply*

Address Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

| Property Value | Status: Sold, Pending Sale, or Retained | Intended Occupancy: Investment, Primary Residence, Second Home, Other | Monthly Insurance, Taxes, Association Dues, etc. if not included in Monthly Mortgage Payment | For 2-4 Unit Primary or Investment Property |  |
|----------------|---|---|--|---|--|
|                |   |   |  | Monthly Rental Income                       | For LENDER to calculate: Net Monthly Rental Income |
| \$             |   |   | \$   | \$  | \$   |

**Mortgage Loans on this Property**  *Does not apply*

| Creditor Name | Account Number | Monthly Mortgage Payment | Unpaid Balance | To be paid off at or before closing | Type: FHA, VA, Conventional, USDA-RD, Other | Credit Limit (if applicable) |
|---------------|----------------|--------------------------|----------------|-------------------------------------|---|------------------------------|
|               |                | \$                       | \$             | <input type="checkbox"/>            |   | \$                           |
|               |                | \$                       | \$             | <input type="checkbox"/>            |   | \$                           |

**3c. IF APPLICABLE, Complete Information for Additional Property**  *Does not apply*

Address Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

| Property Value | Status: Sold, Pending Sale, or Retained | Intended Occupancy: Investment, Primary Residence, Second Home, Other | Monthly Insurance, Taxes, Association Dues, etc. if not included in Monthly Mortgage Payment | For 2-4 Unit Primary or Investment Property |  |
|----------------|---|---|--|---|--|
|                |   |   |  | Monthly Rental Income                       | For LENDER to calculate: Net Monthly Rental Income |
| \$             |   |   | \$   | \$  | \$   |

**Mortgage Loans on this Property**  *Does not apply*

| Creditor Name | Account Number | Monthly Mortgage Payment | Unpaid Balance | To be paid off at or before closing | Type: FHA, VA, Conventional, USDA-RD, Other | Credit Limit (if applicable) |
|---------------|----------------|--------------------------|----------------|-------------------------------------|---|------------------------------|
|               |                | \$                       | \$             | <input type="checkbox"/>            |   | \$                           |
|               |                | \$                       | \$             | <input type="checkbox"/>            |   | \$                           |

**Section 4: Loan and Property Information.** This section asks about the loan's purpose and the property you want to purchase or refinance.

**4a. Loan and Property Information**

**Loan Amount** \$ \_\_\_\_\_ **Loan Purpose**    Purchase    Refinance    Other (specify) \_\_\_\_\_

**Property Address**   Street \_\_\_\_\_ Unit # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ County \_\_\_\_\_

Number of Units \_\_\_\_\_ **Property Value** \$ \_\_\_\_\_

**Occupancy**    Primary Residence    Second Home    Investment Property   **FHA Secondary Residence**

**1. Mixed-Use Property.** If you will occupy the property, will you set aside space within the property to operate your own business? (e.g., daycare facility, medical office, beauty/barber shop)    NO    YES

**2. Manufactured Home.** Is the property a manufactured home? (e.g., a factory built dwelling built on a permanent chassis)    NO    YES

**4b. Other New Mortgage Loans on the Property You are Buying or Refinancing**    Does not apply

| Creditor Name | Lien Type   | Monthly Payment | Loan Amount/<br>Amount to be Drawn | Credit Limit<br>(if applicable) |
|---------------|---|-----------------|------------------------------------|---------------------------------|
|               | <input type="radio"/> First Lien <input type="radio"/> Subordinate Lien | \$ _____        | \$ _____                           | \$ _____                        |
|               | <input type="radio"/> First Lien <input type="radio"/> Subordinate Lien | \$ _____        | \$ _____                           | \$ _____                        |

**4c. Rental Income on the Property You Want to Purchase**   **For Purchase Only**    Does not apply

| Complete if the property is a 2-4 Unit Primary Residence or an Investment Property | Amount   |
|--|----------|
| Expected Monthly Rental Income   | \$ _____ |
| <b>For LENDER to calculate:</b> Expected Net Monthly Rental Income                 | \$ _____ |

**4d. Gifts or Grants You Have Been Given or Will Receive for this Loan**    Does not apply

**Include all gifts and grants below. Under Source, choose from the sources listed here:**

- Community Nonprofit   • Federal Agency   • Relative   • State Agency   • Lender
- Employer   • Local Agency   • Religious Nonprofit   • Unmarried Partner   • Other

| Asset Type: Cash Gift, Gift of Equity, Grant | Deposited/Not Deposited   | Source – use list above | Cash or Market Value |
|--|---|-------------------------|----------------------|
|  | <input type="radio"/> Deposited <input type="radio"/> Not Deposited |                         | \$ _____             |
|  | <input type="radio"/> Deposited <input type="radio"/> Not Deposited |                         | \$ _____             |

**Section 5: Declarations.** This section asks you specific questions about the property, your funding, and your past financial history.

**5a. About this Property and Your Money for this Loan**

|  |   |
|--|---|
| <p><b>A. Will you occupy the property as your primary residence?</b><br/>         If YES, have you had an ownership interest in another property in the last three years?<br/>         If YES, complete (1) and (2) below:<br/>         (1) What type of property did you own: primary residence (PR), FHA secondary residence (SR), second home (SH), or investment property (IP)?<br/>         (2) How did you hold title to the property: by yourself (S), jointly with your spouse (SP), or jointly with another person (O)?</p> | <p><input type="radio"/> NO <input type="radio"/> YES<br/> <input type="radio"/> NO <input type="radio"/> YES<br/>         _____<br/>         _____</p> |
| <p><b>B. If this is a Purchase Transaction: Do you have a family relationship or business affiliation with the seller of the property?</b></p>   | <p><input type="radio"/> NO <input type="radio"/> YES</p>   |
| <p><b>C. Are you borrowing any money for this real estate transaction (e.g., money for your closing costs or down payment) or obtaining any money from another party, such as the seller or realtor, that you have not disclosed on this loan application?</b><br/>         If YES, what is the amount of this money?</p>  | <p><input type="radio"/> NO <input type="radio"/> YES<br/>         \$ _____</p>   |
| <p><b>D. 1. Have you or will you be applying for a mortgage loan on another property (not the property securing this loan) on or before closing this transaction that is not disclosed on this loan application?</b><br/> <b>2. Have you or will you be applying for any new credit (e.g., installment loan, credit card, etc.) on or before closing this loan that is not disclosed on this application?</b></p>  | <p><input type="radio"/> NO <input type="radio"/> YES<br/> <input type="radio"/> NO <input type="radio"/> YES</p>                                       |
| <p><b>E. Will this property be subject to a lien that could take priority over the first mortgage lien, such as a clean energy lien paid through your property taxes (e.g., the Property Assessed Clean Energy Program)?</b></p>   | <p><input type="radio"/> NO <input type="radio"/> YES</p>   |

**5b. About Your Finances**

|  |   |
|--|---|
| <p><b>F. Are you a co-signer or guarantor on any debt or loan that is not disclosed on this application?</b></p>   | <p><input type="radio"/> NO <input type="radio"/> YES</p> |
| <p><b>G. Are there any outstanding judgments against you?</b></p>  | <p><input type="radio"/> NO <input type="radio"/> YES</p> |
| <p><b>H. Are you currently delinquent or in default on a Federal debt?</b></p>   | <p><input type="radio"/> NO <input type="radio"/> YES</p> |
| <p><b>I. Are you a party to a lawsuit in which you potentially have any personal financial liability?</b></p>  | <p><input type="radio"/> NO <input type="radio"/> YES</p> |
| <p><b>J. Have you conveyed title to any property in lieu of foreclosure in the past 7 years?</b></p>   | <p><input type="radio"/> NO <input type="radio"/> YES</p> |
| <p><b>K. Within the past 7 years, have you completed a pre-foreclosure sale or short sale, whereby the property was sold to a third party and the Lender agreed to accept less than the outstanding mortgage balance due?</b></p>  | <p><input type="radio"/> NO <input type="radio"/> YES</p> |
| <p><b>L. Have you had property foreclosed upon in the last 7 years?</b></p>  | <p><input type="radio"/> NO <input type="radio"/> YES</p> |
| <p><b>M. Have you declared bankruptcy within the past 7 years?</b><br/>         If YES, identify the type(s) of bankruptcy: <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13</p> | <p><input type="radio"/> NO <input type="radio"/> YES</p> |

**Section 6: Acknowledgments and Agreements.** This section tells you about your legal obligations when you sign this application.

**Acknowledgments and Agreements**

**Definitions:**

- "Lender" includes the Lender's agents, service providers, and any of their successors and assigns.
- "Other Loan Participants" includes (i) any actual or potential owners of a loan resulting from this application (the "Loan"), (ii) acquirers of any beneficial or other interest in the Loan, (iii) any mortgage insurer, (iv) any guarantor, (v) any servicer of the Loan, and (vi) any of these parties' service providers, successors or assigns.

**I agree to, acknowledge, and represent the following:**

**(1) The Complete Information for this Application**

- The information I have provided in this application is true, accurate, and complete as of the date I signed this application.
- If the information I submitted changes or I have new information before closing of the Loan, I must change and supplement this application, including providing any updated/supplemented real estate sales contract.
- For purchase transactions: The terms and conditions of any real estate sales contract signed by me in connection with this application are true, accurate, and complete to the best of my knowledge and belief. I have not entered into any other agreement, written or oral, in connection with this real estate transaction.
- The Lender and Other Loan Participants may rely on the information contained in the application before and after closing of the Loan.
- Any intentional or negligent misrepresentation of information may result in the imposition of:
  - (a) civil liability on me, including monetary damages, if a person suffers any loss because the person relied on any misrepresentation that I have made on this application, and/or
  - (b) criminal penalties on me including, but not limited to, fine or imprisonment or both under the provisions of Federal law (18 U.S.C. §§ 1001 *et seq.*).

**(2) The Property's Security**

The Loan I have applied for in this application will be secured by a mortgage or deed of trust which provides the Lender a security interest in the property described in this application.

**(3) The Property's Appraisal, Value, and Condition**

- Any appraisal or value of the property obtained by the Lender is for use by the Lender and Other Loan Participants.
- The Lender and Other Loan Participants have not made any representation or warranty, express or implied, to me about the property, its condition, or its value.

**(4) Electronic Records and Signatures**

- The Lender and Other Loan Participants may keep any paper record and/or electronic record of this application, whether or not the Loan is approved.

- If this application is created as (or converted into) an "electronic application", I consent to the use of "electronic records" and "electronic signatures" as the terms are defined in and governed by applicable Federal and/or state electronic transactions laws.
- I intend to sign and have signed this application either using my:
  - (a) electronic signature; or
  - (b) a written signature and agree that if a paper version of this application is converted into an electronic application, the application will be an electronic record, and the representation of my written signature on this application will be my binding electronic signature.
- I agree that the application, if delivered or transmitted to the Lender or Other Loan Participants as an electronic record with my electronic signature, will be as effective and enforceable as a paper application signed by me in writing.

**(5) Delinquency**

- The Lender and Other Loan Participants may report information about my account to credit bureaus. Late payments, missed payments, or other defaults on my account may be reflected in my credit report and will likely affect my credit score.
- If I have trouble making my payments I understand that I may contact a HUD-approved housing counseling organization for advice about actions I can take to meet my mortgage obligations.

**(6) Authorization for Use and Sharing of Information**

- By signing below, in addition to the representations and agreements made above, I expressly authorize the Lender and Other Loan Participants to obtain, use, and share with each other (i) the loan application and related loan information and documentation, (ii) a consumer credit report on me, and (iii) my tax return information, as necessary to perform the actions listed below, for so long as they have an interest in my loan or its servicing:
- (a) process and underwrite my loan;
  - (b) verify any data contained in my consumer credit report, my loan application and other information supporting my loan application;
  - (c) inform credit and investment decisions by the Lender and Other Loan Participants;
  - (d) perform audit, quality control, and legal compliance analysis and reviews;
  - (e) perform analysis and modeling for risk assessments;
  - (f) monitor the account for this loan for potential delinquencies and determine any assistance that may be available to me; and
  - (g) other actions permissible under applicable law.

**Borrower Signature** \_\_\_\_\_ **Date (mm/dd/yyyy)** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Additional Borrower Signature** \_\_\_\_\_ **Date (mm/dd/yyyy)** \_\_\_\_ / \_\_\_\_ / \_\_\_\_



**Section 7: Military Service.** This section asks questions about your (or your deceased spouse's) military service.

**Military Service of Borrower**

**Military Service** – Did you (or your deceased spouse) ever serve, or are you currently serving, in the United States Armed Forces?  NO  YES  
If YES, check all that apply:  Currently serving on active duty with projected expiration date of service/tour \_\_\_ / \_\_\_ / \_\_\_\_ (mm/dd/yyyy)  
 Currently retired, discharged, or separated from service  
 Only period of service was as a non-activated member of the Reserve or National Guard  
 Surviving spouse

**Section 8: Demographic Information.** This section asks about your ethnicity, sex, and race.

**Demographic Information of Borrower**

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, sex, and race) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race." The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, sex, and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below.

**Ethnicity: Check one or more**

- Hispanic or Latino
  - Mexican  Puerto Rican  Cuban
  - Other Hispanic or Latino – Print origin: \_\_\_\_\_

*For example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.*

- Not Hispanic or Latino
- I do not wish to provide this information

**Sex**

- Female
- Male
- I do not wish to provide this information

**Race: Check one or more**

- American Indian or Alaska Native – Print name of enrolled or principal tribe: \_\_\_\_\_
- Asian
  - Asian Indian  Chinese  Filipino
  - Japanese  Korean  Vietnamese
  - Other Asian – Print race: \_\_\_\_\_

*For example: Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.*

- Black or African American
- Native Hawaiian or Other Pacific Islander
  - Native Hawaiian  Guamanian or Chamorro  Samoan
  - Other Pacific Islander – Print race: \_\_\_\_\_

*For example: Fijian, Tongan, and so on.*

- White
- I do not wish to provide this information

**To Be Completed by Financial Institution (for application taken in person):**

Was the ethnicity of the Borrower collected on the basis of visual observation or surname?  NO  YES  
Was the sex of the Borrower collected on the basis of visual observation or surname?  NO  YES  
Was the race of the Borrower collected on the basis of visual observation or surname?  NO  YES

**The Demographic Information was provided through:**

- Face-to-Face Interview (includes Electronic Media w/ Video Component)
- Telephone Interview
- Fax or Mail
- Email or Internet

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**Section 9: Loan Originator Information.** To be completed by your Loan Originator.

**Loan Originator Information**

Loan Originator Organization Name \_\_\_\_\_

Address \_\_\_\_\_

Loan Originator Organization NMLSR ID# \_\_\_\_\_ State License ID# \_\_\_\_\_

Loan Originator Name \_\_\_\_\_

Loan Originator NMLSR ID# \_\_\_\_\_ State License ID# \_\_\_\_\_

Email \_\_\_\_\_ Phone ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

Signature \_\_\_\_\_ Date (mm/dd/yyyy) \_\_\_\_ / \_\_\_\_ / \_\_\_\_

---

|  |                        |   |
|--|------------------------|---|
| <b>Department of Veterans Affairs</b><br><br><b>REQUEST FOR A CERTIFICATE OF ELIGIBILITY</b> | <b>FOR VA USE ONLY</b> | <b>MAIL COMPLETED APPLICATION TO THE REGIONAL LOAN CENTER OF JURISDICTION. SEE PAGE 3 FOR REGIONAL LOAN CENTER ADDRESSES.</b> |
|  | <b>COE REF. NO.</b>    |   |

**IMPORTANT:** For faster processing, VA encourages you to visit [www.va.gov](http://www.va.gov) for your Certificate of Eligibility, or contact the lender of your choice to submit an application electronically. In most cases, an eligibility determination can be made instantly.

**NOTE:** Please read information on page 2 before completing this form. If additional space is required, attach a separate sheet.

|  |   |                           |
|--|---|---------------------------|
| 1. NAME OF VETERAN (First, Middle, Last)   | 2. DATE OF BIRTH  | 3. SOCIAL SECURITY NUMBER |
| 4A. DID YOU SERVE UNDER ANOTHER NAME?<br><input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete Item 4B)                 | 4B. NAME(S) USED DURING MILITARY SERVICE (If different from name in Item 1) |                           |
| 5. DAYTIME TELEPHONE NUMBER (Include Area Code)  | 6. EMAIL ADDRESS (If applicable)  |                           |
| 7. ADDRESS (Number and street or rural route, city or P.O., State and ZIP Code)  |   |                           |
| 8A. WERE YOU DISCHARGED, RETIRED, OR SEPARATED FROM SERVICE BECAUSE OF DISABILITY?<br><input type="checkbox"/> YES <input type="checkbox"/> NO | 8B. VA CLAIM NUMBER (If known)  |                           |

**MILITARY SERVICE (SEE INSTRUCTIONS FOR PROOF OF SERVICE ON THE NEXT PAGE)**

|  |   |
|--|---|
| 9A. ARE YOU CURRENTLY ON ACTIVE DUTY?<br><input type="checkbox"/> YES <input type="checkbox"/> NO (If you are currently serving on active duty, leave the "Date Separated" field blank.) | 9B. ARE YOU A PURPLE HEART RECIPIENT?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |
|--|---|

| <b>IMPORTANT:</b> Please provide your dates of service. In many cases eligibility can be established based on data in VA systems. However, it is recommended that proof of service be provided, if readily available.  | BRANCH OF SERVICE | DATE ENTERED | DATE SEPARATED | OFFICER OR ENLISTED | SERVICE NUMBER<br><i>(If different from Social Security Number)</i> |
|--|-------------------|--------------|----------------|---------------------|---|
| 9C. ACTIVE SERVICE - <i>Do not include any periods of Active Duty for Training or Active Guard Reserve service. Do include any Reserve or Guard Unit activation under Title 10 U.S.C. or full time National Guard Duty under Title 32 U.S.C. Sections 316, 502, 503, 504 or 505.</i>                         |                   |              |                |                     |   |
| 9D. RESERVE OR NATIONAL GUARD SERVICE<br><i>Include any periods of Active Duty for Training (ADT) or Active Guard Reserve service. Do not include any Reserve or Guard unit activation under Title 10 U.S.C. or Full Time National Guard Duty under Title 32 U.S.C. Sections 316, 502, 503, 504, or 505.</i> |                   |              |                |                     |   |

**PREVIOUS VA LOANS (SEE INSTRUCTIONS ON THE NEXT PAGE - Attach a separate sheet if information for all homes will not fit in Item 10)**

|  |  |                     |                     |
|--|--|---------------------|---------------------|
| 10A. DO YOU NOW OWN ANY HOME(S) PURCHASED OR REFINANCED WITH A VA-GUARANTEED LOAN?<br><input type="checkbox"/> YES (If "Yes," complete Items 10B through 10D)<br><input type="checkbox"/> NO (If "No," skip to Item 14)<br><input type="checkbox"/> NOT APPLICABLE (NA) - I HAVE NEVER OBTAINED A VA-GUARANTEED HOME LOAN (If "NA," skip to Item 14) | 10B. DATE OF LOAN<br><i>(Month and Year)</i> | 10C. STREET ADDRESS | 10D. CITY AND STATE |
| 11A. ARE YOU APPLYING FOR THE <b>ONE-TIME ONLY RESTORATION</b> OF ENTITLEMENT TO PURCHASE ANOTHER HOME?<br><input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete Items 11B through 11D)   | 11B. DATE OF LOAN<br><i>(Month and Year)</i> | 11C. STREET ADDRESS | 11D. CITY AND STATE |
| 12A. ARE YOU APPLYING FOR A RESTORATION OF ENTITLEMENT TO OBTAIN A <b>REGULAR (CASH-OUT) REFINANCE</b> ON YOUR CURRENT HOME?<br><input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete Items 12B through 12D)  | 12B. DATE OF LOAN<br><i>(Month and Year)</i> | 12C. STREET ADDRESS | 12D. CITY AND STATE |
| 13A. ARE YOU REFINANCING AN EXISTING VA LOAN TO OBTAIN A LOWER INTEREST RATE <b>WITHOUT RECEIVING ANY CASH PROCEEDS (IRRRL)</b> ?<br><input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete Items 13B through 13D)   | 13B. DATE OF LOAN<br><i>(Month and Year)</i> | 13C. STREET ADDRESS | 13D. CITY AND STATE |

**I CERTIFY THAT** the statements in this document are true and complete to the best of my knowledge.

|  |                  |
|--|------------------|
| 14A. SIGNATURE OF VETERAN (Do NOT print) | 14B. DATE SIGNED |
|--|------------------|

FEDERAL STATUTES PROVIDE SEVERE PENALTIES FOR FRAUD, INTENTIONAL MISREPRESENTATION, CRIMINAL CONNIVANCE OR CONSPIRACY PURPOSED TO INFLUENCE THE ISSUANCE OF ANY GUARANTY OR INSURANCE BY THE SECRETARY OF VETERANS AFFAIRS (e.g. 18 U.S.C. § 1001, 372 and 287)

|  |               |
|--|---------------|
| <b>FOR VA USE ONLY</b> (Please do not write below this line) | DATE RETURNED |
| REASON(S) FOR RETURN   |               |



Department of Veterans Affairs

**VERIFICATION OF VA BENEFITS**

**PRIVACY ACT NOTICE:** The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 5, Code of Federal Regulations 1.576 for routine uses (i.e., information concerning a veteran's indebtedness to the United States by virtue of a person's participation in a benefits program administered by VA may be disclosed to any third party, except consumer reporting agencies) as identified in the VA system of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant Records, Specially Adapted Housing Applicant Records and Vendee Loan Applicant Records - VA, and published in the Federal Register. You are required to respond to obtain or retain benefits. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by a Federal Statute of law in effect prior to January 1, 1975, and still in effect.

|  |  |
|--|--|
| <b>TO: NAME AND ADDRESS OF LENDER</b> <i>(Complete mailing address including ZIP Code)</i><br><br> | <b>INSTRUCTIONS TO LENDER</b><br>The veteran/applicant should complete this form ONLY if he or she: <ul style="list-style-type: none"> <li>• is receiving VA disability payments; or</li> <li>• has received VA disability payments; or</li> <li>• would receive VA disability payments but for receipt of retired pay; or</li> <li>• has filed a claim for VA disability benefits prior to discharge from active duty service; or</li> <li>• is surviving spouse of a veteran and in receipt of DIC payments.</li> </ul> Complete Items 1 through 10. Send the completed form to the appropriate VA Regional Loan Center where it will be processed and returned to the Lender. The completed form must be retained as part of the lender's loan origination package. |
|--|--|

|  |  |
|--|--|
| <b>1. NAME OF VETERAN</b> <i>(First, middle, last)</i><br><br> | <b>2. CURRENT ADDRESS OF VETERAN</b><br><br> |
| <b>3. DATE OF BIRTH</b><br><br>                                |  |

|  |  |  |
|--|--|--|
| <b>4. VA CLAIM FOLDER NUMBER</b> <i>(C-File No., if known)</i><br><br> | <b>5. SOCIAL SECURITY NUMBER</b><br><br> | <b>6. SERVICE NUMBER</b> <i>(If different from Social Security Number)</i><br><br> |
|--|--|--|

**7. I HEREBY CERTIFY THAT I**  **DO**  **DO NOT** have a VA benefit-related indebtedness to my knowledge. I authorize VA to furnish the information listed below.

**8. I HEREBY CERTIFY THAT I**  **HAVE**  **HAVE NOT** filed a claim for VA disability benefits prior to discharge from active duty service.

|   |                                |
|---|--------------------------------|
| <b>9. SIGNATURE OF VETERAN</b> <i>(Sign in ink)</i><br><br> | <b>10. DATE SIGNED</b><br><br> |
|---|--------------------------------|

**FOR VA USE ONLY** *(Complete in ink)*

- The above named veteran does not have a VA benefit-related indebtedness  
 The veteran has the following VA benefit-related indebtedness

**VA BENEFIT-RELATED INDEBTEDNESS** *(If any)*

| TYPE OF DEBT(S) | AMOUNT OF DEBT(S) |
|-----------------|-------------------|
|                 |                   |
|                 |                   |

**TERM OF REPAYMENT PLAN** *(If any)*

Veteran is exempt from funding fee due to receipt of service-connected disability compensation of \$ \_\_\_\_\_ monthly. (Unless checked, the funding fee receipt must be remitted to VA with VA Form 26-1820, *Report and Certification of Loan Disbursement*)

Veteran is exempt from funding fee due to entitlement to VA compensation benefits upon discharge from service.

Veteran is not exempt from funding fee due to receipt of non service-connected pension of \$ \_\_\_\_\_ monthly. **LOAN APPLICATION WILL REQUIRE PRIOR APPROVAL PROCESSING BY VA.**

Veteran has been rated incompetent by VA. **LOAN APPLICATION WILL REQUIRE PRIOR APPROVAL PROCESSING BY VA.**

Insufficient information. VA cannot identify the veteran with the information given. Please furnish more complete information, or a copy of a DD Form 214 or discharge papers. If on active duty, furnish a statement of service written on official government letterhead, signed by the adjutant, personnel officer, or commanding officer. The statement should include name, birth date, service number, entry date and time lost.

|   |                            |
|---|----------------------------|
| <b>SIGNATURE OF AUTHORIZED AGENT</b> <i>(Sign in ink)</i><br><br> | <b>DATE SIGNED</b><br><br> |
|---|----------------------------|

**RESPONDENT BURDEN:** We need this information to determine, establish, or verify your eligibility for VA Loan Guaranty Benefits and to determine if you are exempt from paying the VA Funding Fee. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 5 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.reginfo.gov/public/do/PRAMain](http://www.reginfo.gov/public/do/PRAMain).



1. PROPERTY IDENTIFIER

2. PROPERTY ADDRESS

4. CREDITOR NAME AND MAILING ADDRESS  
**Department of Veterans Affairs**

5. DATE APPLICATION PROCESSED

6. DATE DISCLOSURE MAILED

NOTE: VA is processing an application for credit related to this property. The following information is being furnished in compliance with federal law. This form does not constitute approval or acceptance of the proposed transaction. If a particular settlement agent has been designated by VA, the agent is identified on an attachment to this form.

3. APPLICANT NAME AND MAILING ADDRESS

**7. REAL ESTATE SETTLEMENT PROCEDURES ACT - GOOD FAITH ESTIMATE OF SETTLEMENT COSTS**  
*(Numbering corresponds with line numbers on HUD Form 1 - Settlement Statement)*

|     | FUNDING FEE PERCENTAGE                          | %  |      | TAX AND INSURANCE RESERVE DEPOSIT | %  |
|-----|---|----|------|-----------------------------------|----|
|     | REQUESTED LOAN <i>(Excluding Rehab. Amount)</i> | \$ |      | OTHER <i>(Specify)</i>            | \$ |
| 801 | LOAN ORIGATION FEE <i>(Funding Fee)</i>         | \$ | 1102 | ABSTRACT OR TITLE SEARCH          | \$ |
| 804 | CREDIT REPORT                                   | \$ | 1103 | TITLE EXAMINATION                 | \$ |
| 901 | INTEREST - 30 DAYS @ \$ /DAY                    | \$ | 1201 | RECORDING FEES                    | \$ |
|     | OTHER <i>(Specify)</i>                          | \$ |      | OTHER <i>(Specify)</i>            | \$ |

NOTE: The Settlement Costs pamphlet is enclosed with this estimate, if the proposed transaction is a new loan which will be secured by a first lien on legal title to the property. This estimate does not cover all items you will be required to pay in cash at settlement. You may be required to pay other additional amounts, and you may wish to inquire as to the amounts of such other items. This estimate shows the maximum prepaid interest which could be charged at settlement. Should your loan be approved, actual costs will be determined, based on the settlement date. Upon request, you may inspect HUD Form 1, Settlement Statement, one (1) business day prior to settlement at the following address:

**8. FEDERAL TRUTH-IN-LENDING ACT - ESTIMATE OF CREDIT COSTS**

| ANNUAL PERCENTAGE RATE<br>COST OF YOUR CREDIT<br>AS A YEARLY RATE | FINANCE CHARGE<br>DOLLAR AMOUNT THE<br>CREDIT WILL COST YOU | AMOUNT FINANCED<br>AMOUNT OF CREDIT<br>PROVIDED TO YOU OR<br>ON YOUR BEHALF | TOTAL OF PAYMENTS<br>AMOUNT YOU WILL PAY IF<br>YOU MAKE ALL<br>SCHEDULED PAYMENTS | TOTAL SALE PRICE<br>TOTAL COST OF YOUR<br>PURCHASE ON CREDIT<br>INCLUDING YOUR<br>DOWNPAYMENT OF |
|---|---|---|---|--|
| %   | \$  | \$  | \$  | \$   |
|   |   |   |   | \$   |

**9. PAYMENT SCHEDULE**

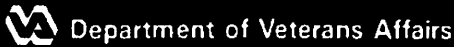
IMPORTANT: Payments are due on the first day of the month, beginning with the second month after settlement. Monthly loan installments also will include 1/12 of the estimated annual property taxes and insurance.

A. NUMBER OF PAYMENTS

B. AMOUNT OF PAYMENT (PRINCIPAL AND INTEREST)

DEFINITIONS: The annual percentage rate is an expression of the cost of credit and shows the effect of the prepaid finance charge on the simple interest rate which is stated in the contract documents. The total of payments is equal to the number of payments multiplied by the amount of the payment for principal and interest. The loan amount is equal to the purchase price (contract sale price) including the rehabilitation amount to be escrowed for repairs after sale, minus the downpayment. The amount financed is equal to the loan amount, minus the prepaid finance charge (funding fee and the estimated maximum prepaid interest). The finance charge begins on the settlement date and is equal to the total of payments, minus the amount financed. The total sale price is equal to the downpayment, plus the loan amount and the finance charge.

IMPORTANT INFORMATION: Property insurance may be obtained from any insurer chosen by the borrower, but the creditor reserves the right to reject an insurer for reasonable cause. A security interest in the property will be given by the borrower to the creditor, including security interest to cover any future advances to protect the security. Prepayment of the loan in whole or in part may be made without penalty, but will not result in refund of a paid portion of the finance charge. Partial prepayment may not be less than one installment, or \$100, whichever is less. A late charge of 4 percent of the loan installment will be charged for each loan installment which is received by the creditor more than 15 days after the due date. Assumption of the loan may not be completed without prior written approval by the creditor, its authorized agents, successors or assigns. Please see the contract documents for information concerning nonpayment, default, repayment, and debt acceleration.



## REQUEST FOR VERIFICATION OF DEPOSIT

**Privacy Act Notice:** The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 5, Code of Federal Regulations 1,526 for routine uses identified in the VA system of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant Records, Specially Adapted Housing Applicant Records and Vendee Loan Applicant Records - VA, published in the Federal Register. An example of routine use would be where information may be disclosed to depository institutions to enable them to provide information on assets for purposes of credit underwriting. Your obligation to respond is voluntary but failure to provide requested information could impede processing.

**Important Notice About Information Collection:** This information is needed to help determine a veteran's qualifications for a VA guaranteed loan. Title 38, U.S.C., section 3710, allows us to ask for this information. We estimate that you will need an average of 5 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.whitehouse.gov/library/omb/OMBINVC.html#VA](http://www.whitehouse.gov/library/omb/OMBINVC.html#VA). If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

### INSTRUCTIONS

**LENDER OR LOCAL PROCESSING AGENCY:** Complete Items 1 through 8. Have applicant(s) complete Item 9. Forward directly to the Depository named in Item 1. **DEPOSITORY:** Please complete Items 10 through 15 and return **DIRECTLY** to Lender or Local Processing Agency named in Item 2.

### PART I - REQUEST

|  |   |
|--|---|
| 1. TO (Name and Address of Depository) | 2. FROM (Name and Address of Lender or Local Processing Agency) |
|--|---|

**I CERTIFY THAT** this verification has been sent directly to the bank or depository and has not passed through the hands of the applicant or any other party.

|   |          |         |                               |
|---|----------|---------|-------------------------------|
| 3. SIGNATURE OF LENDER OR OFFICIAL OF LOCAL PROCESSING AGENCY | 4. TITLE | 5. DATE | 6. LENDER'S NUMBER (Optional) |
|---|----------|---------|-------------------------------|

### 7. INFORMATION TO BE VERIFIED:

| TYPE OF ACCOUNT AND/OR LOAN | ACCOUNT / LOAN IN NAME OF | ACCOUNT/LOAN NUMBER | BALANCE |
|-----------------------------|---------------------------|---------------------|---------|
|                             |                           |                     | \$      |
|                             |                           |                     | \$      |
|                             |                           |                     | \$      |
|                             |                           |                     | \$      |

**TO DEPOSITORY:** I have applied for mortgage insurance or guaranty or for a rehabilitation loan and stated that the balance on deposit and/or outstanding loans with you are as shown above. You are authorized to verify this information and to supply the lender or the local processing agency identified above with the information requested in Items 10 through 12. Your response is solely a matter of courtesy for which no responsibility is attached to your institution or any of your offices.

|                                     |                              |
|-------------------------------------|------------------------------|
| 8. NAME AND ADDRESS OF APPLICANT(S) | 9. SIGNATURE OF APPLICANT(S) |
|-------------------------------------|------------------------------|

### TO BE COMPLETED BY DEPOSITORY

#### PART II - VERIFICATION OF DEPOSITORY

#### 10. DEPOSIT ACCOUNTS OF APPLICANT(S)

| TYPE OF ACCOUNT | ACCOUNT NUMBER | CURRENT BALANCE | AVERAGE BALANCE FOR PREVIOUS TWO MONTHS | DATE OPENED |
|-----------------|----------------|-----------------|---|-------------|
|                 |                | \$              | \$                                      |             |
|                 |                | \$              | \$                                      |             |
|                 |                | \$              | \$                                      |             |
|                 |                | \$              | \$                                      |             |

#### 11. LOANS OUTSTANDING TO APPLICANT(S)

| LOAN NUMBER | DATE OF LOAN | ORIGINAL AMOUNT | CURRENT BALANCE | INSTALLMENTS (Monthly/Quarterly) | SECURED BY | NUMBER OF LATE PAYMENTS WITHIN LAST 12 MONTHS |
|-------------|--------------|-----------------|-----------------|----------------------------------|------------|---|
|             |              | \$              | \$              | \$ per                           |            |   |
|             |              | \$              | \$              | \$ per                           |            |   |
|             |              | \$              | \$              | \$ per                           |            |   |

12. ADDITIONAL INFORMATION WHICH MAY BE OF ASSISTANCE IN DETERMINATION OF CREDITWORTHINESS: *(Please include information on loans paid-in-full as in item 11 above)*

|                                      |           |          |
|--------------------------------------|-----------|----------|
| 13. SIGNATURE OF DEPOSITORY OFFICIAL | 14. TITLE | 15. DATE |
|--------------------------------------|-----------|----------|

The confidentiality of the information you have furnished will be preserved except where disclosure of this information is required by applicable law. The completed form is to be transmitted directly to the lender or local processing agency and is not to be transmitted through the applicant or any other party.



Department of Veterans Affairs

# REQUEST FOR VERIFICATION OF EMPLOYMENT

**Privacy Act Notice:** VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., information verifying an applicant's employment may be disclosed to a prospective mortgagee proposing to make a guaranteed loan on the veteran applicant's behalf) as identified in the VA system of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant Records, Specially Adapted Housing Applicant Records and Vendee Loan Applicant Records - VA, and published in the Federal Register. Your obligation to respond is voluntary, but failure to provide requested information could impede processing.

**Respondent Burden:** We need this information to help determine a veteran's qualifications for a VA-guaranteed loan. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 10 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at [www.whitehouse.gov/omb/library/OMBINV.VA.EPA.html#VA](http://www.whitehouse.gov/omb/library/OMBINV.VA.EPA.html#VA). If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

**Lender or Local Processing Agency (LPA) completes Items 1 through 6 and has the applicant sign in Item 7. Forward the completed form directly to the employer named in Item 1.**

**Employer completes either parts II and IV or parts III and IV. Return the form directly to the lender or local processing agency named in Item 3 of part I.**

## PART I - REQUEST CERTIFICATION

|   |   |
|---|---|
| 1. NAME AND ADDRESS OF EMPLOYER   | 2. NAME AND ADDRESS OF APPLICANT                              |
| 3. NAME AND ADDRESS OF LENDER OR LOCAL PROCESSING AGENT (LPA)   |   |
| 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 interested party.                        |   |
| 4A. SIGNATURE OF LENDER, OFFICIAL OF LPA, OR USDA LOAN PACKAGER<br><br>X  | 4B. TITLE OF LENDER, OFFICIAL OF LPA, OR USDA LOAN PACKAGER   |
| 5. DATE   | 6. VA OR USDA NO.   |
| I have applied for a mortgage loan or rehabilitation loan and stated that I am/was employed by you. My signature in the block authorizes verification of my employment information. | 7. APPLICANT'S SIGNATURE AND EMPLOYEE IDENTIFICATION<br><br>X |

## PART II - VERIFICATION OF PRESENT EMPLOYMENT

|   |                       |   |   |   |
|---|-----------------------|---|---|---|
| 8. PRESENT POSITION   | 9. DATE OF EMPLOYMENT | 10. PROBABILITY OF CONTINUED EMPLOYMENT | 11A. PAID BY:<br>SALARY <input type="checkbox"/> YES <input type="checkbox"/> NO<br>COMMISSION <input type="checkbox"/> YES <input type="checkbox"/> NO | 11B. IS OVERTIME/BONUS LIKELY TO CONTINUE?<br>OVERTIME <input type="checkbox"/> YES <input type="checkbox"/> NO<br>BONUS <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 12. CURRENT BASE PAY <input type="checkbox"/> ANNUAL <input type="checkbox"/> MONTHLY <input type="checkbox"/> WEEKLY <input type="checkbox"/> HOURLY<br><input type="checkbox"/> OTHER (Specify) |                       |   | 14A. MONTHLY TAXABLE PAY (For Military Personnel Only)  |   |
| 13A. BASE EARNINGS YEAR-TO-DATE PAST YEAR<br>\$ \$  |                       |   | BASE PAY \$   | CAREER C PAY \$   |
| 13B. OVERTIME YEAR-TO-DATE PAST YEAR<br>\$ \$   |                       |   | FLIGHT PAY \$   | OTHER (Specify) \$  |
| 13C. COMMISSION YEAR-TO-DATE PAST YEAR<br>\$ \$   |                       |   | 14B. MONTHLY NONTAXABLE PAY (For Military Personnel Only)   |   |
| 13D. BONUSES YEAR-TO-DATE PAST YEAR<br>\$ \$  |                       |   | QUARTERS \$   | VHA \$  |
|   |                       |   | RATIONS \$  | CLOTHING \$   |
| 15. REMARKS: IF PAID HOURLY, PLEASE INDICATE AVERAGE HOURS WORKED EACH WEEK DURING CURRENT AND PAST YEAR  |                       |   |   |   |

## PART III - VERIFICATION OF PREVIOUS EMPLOYMENT

|   |  |                         |             |                |          |
|---|--|-------------------------|-------------|----------------|----------|
| 16. SALARY/WAGE AT TERMINATION:<br><input type="checkbox"/> YEARLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> WEEKLY |  | BASE PAY \$             | OVERTIME \$ | COMMISSIONS \$ | BONUS \$ |
| 17. DATES OF EMPLOYMENT<br>FROM TO  |  | 18. REASONS FOR LEAVING |             |                |          |
| 19. POSITION HELD   |  |                         |             |                |          |

**PART IV - CERTIFICATION** Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy purposed to influence the issuance of any guaranty or insurance by VA or USDA Administrators.

|                        |                       |  |          |
|------------------------|-----------------------|--|----------|
| 20. SIGNATURE<br><br>X | 21. TITLE OF EMPLOYER | 22. EMPLOYER'S TELEPHONE NO. (Include Area Code) | 23. DATE |
|------------------------|-----------------------|--|----------|

## BORROWER'S CERTIFICATION AND AUTHORIZATION

### CERTIFICATION

The undersigned certify the following:

1. I/We have applied for a direct mortgage loan from the Department of Veterans Affairs. In applying for the loan, I/We completed a loan application various information on the purpose of the loan, the amount and source of the down payments, 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 or other documents, nor did I/we omit any pertinent information.
2. I/We understand and agree that the Department of Veterans Affairs direct mortgage loan review process is a full documentation program. This includes verifying the information provided on the application with the employer and/or the financial institution.
3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statement when applying for this mortgage, as application under the provisions of Title 18, United States Code, Section 1001, et. Seq.

### AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

1. I/We have applied for a direct mortgage loan from the Department of Veterans Affairs. As part of the application process, the Department of Veterans Affairs may verify information contained in my/our loan application and in other documents required in the connection the loan, either before the loan is closed or as part of its quality control/audit. I/we agree to cooperate fully with the Department of Veterans Affairs.
2. I/We authorize you to provide the Department of Veterans Affairs any and all information and documentation that they request. Such information includes, but is not limited to employment history and income, bank, money market, and similar account balances; credit history; and copies of income tax returns.
3. The Department of Veterans Affairs may address this authorization to any party named in the loan application.
4. A copy of this authorization may be accepted as an original.
5. Your prompt reply to the Department of Veterans Affairs is appreciated.

\_\_\_\_\_  
(Borrower's Signature)

\_\_\_\_\_  
(Social Security Number)

\_\_\_\_\_  
(Borrower's Signature)

\_\_\_\_\_  
(Social Security Number)





Department of Veterans Affairs

**VERIFICATION OF VA BENEFIT-RELATED INDEBTEDNESS**

**PRIVACY ACT INFORMATION:** This information is to be used by the agency collecting it in determining whether you qualify for the VA loan benefit. This information request is authorized by Title 38, U.S.C., Chapter 37. Responses may be disclosed outside VA only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant Records, Specially Adapted Housing Applicant Records and Vendee Loan Applicant Records - VA, published in the Federal Register.

|   |  |
|---|--|
| <b>TO: NAME AND ADDRESS OF LENDER</b><br><br> | <b>INSTRUCTIONS TO LENDER</b><br>Complete Items 1 through 6. Have veteran complete Items 7 and 8. Forward to the Finance Officer (24) at the local VA office to determine whether the veteran has any VA benefit-related indebtedness. If a debt is found to exist, the home loan must not be closed until the veteran presents evidence showing that the debt has been cleared or an acceptable repayment plan has been established with VA. After completion by the Finance Officer, this form will be returned to the lender at the address shown. VA Form 26-8937 is a required exhibit to accompany home or manufactured home loans closed on the automatic basis and prior approval submissions. |
|---|--|

|  |                               |
|--|-------------------------------|
| 1. NAME OF VETERAN (First, middle, last) | 2. CURRENT ADDRESS OF VETERAN |
| 3. DATE OF BIRTH                         |                               |

|  |                   |                           |
|--|-------------------|---------------------------|
| 4. VA CLAIM FOLDER NUMBER (C-File No.) | 5. SERVICE NUMBER | 6. SOCIAL SECURITY NUMBER |
|--|-------------------|---------------------------|

I HEREBY CERTIFY THAT I  DO  DO NOT have a VA benefit-related indebtedness to my knowledge. I authorize VA to furnish the information listed below.

|                         |                |
|-------------------------|----------------|
| 7. SIGNATURE OF VETERAN | 8. DATE SIGNED |
|-------------------------|----------------|

**FOR VA USE ONLY**

- The above named veteran does not have a VA benefit-related indebtedness
- The veteran has the following VA benefit-related indebtedness

**VA BENEFIT-RELATED INDEBTEDNESS (If any)**

| TYPE OF DEBT(S) | AMOUNT OF DEBT(S) |
|-----------------|-------------------|
|                 | \$                |
|                 | \$                |
|                 | \$                |

TERM OF REPAYMENT PLAN (If any)

- Veteran is exempt from funding fee due to receipt of service-connected disability compensation of \$ \_\_\_\_\_ monthly. (Unless checked, the funding fee receipt must be remitted to VA with VA Form 26-1820, Report and Certification of Loan Disbursement)
- Veteran is not exempt from funding fee due to receipt of nonservice-connected pension of \$ \_\_\_\_\_ monthly. **LOAN APPLICATION WILL REQUIRE PRIOR APPROVAL PROCESSING BY VA**
- Veteran has been rated incompetent by VA. **LOAN APPLICATION WILL REQUIRE PRIOR APPROVAL PROCESSING BY VA**
- Insufficient information. VA cannot identify the veteran with the information given. Please furnish more complete information, or a copy of a DD Form 214 or discharge papers. If on active duty, furnish a statement of service written on official government letterhead, signed by the adjutant, personnel officer, or commanding officer. The statement should include name, birth date, service number, entry date and time lost

|                               |             |
|-------------------------------|-------------|
| SIGNATURE OF AUTHORIZED AGENT | DATE SIGNED |
|-------------------------------|-------------|

**RESPONDENT BURDEN:** VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.

**DEPARTMENT OF VETERANS AFFAIRS  
HONOLULU REGIONAL OFFICE -459  
DEPARTMENT OF VETERANS AFFAIRS  
VARO (26) P.O. BOX 29020  
HONOLULU, HI 96820 - 1420**

**AUTHORIZATION TO OBTAIN CREDIT REPORT**

I authorize the Department of Veterans Affairs (VA) to obtain a consumer credit report on my behalf. The VA will use the credit report to assist in determining my credit worthiness in order to qualify for a Native American Direct Loan. VA will make every effort to process the loan quickly but I understand that subsequent reports may be necessary. Upon request, the VA will provide me with the name and address of the consumer reporting agency contacted to supply the report(s). I understand that the credit inquiries have the potential to impact my credit score but are necessary for me to secure approval of my VA Native American Direct Loan.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Veteran Name (Please print)

\_\_\_\_\_  
Social Security Number