

## BANK VERIFICATION

Name of Applicant/Tenant \_\_\_\_\_

Date \_\_\_\_\_

The individual named directly above is an applicant/tenant of a housing program that requires verification of income. The information provided will remain confidential for satisfaction of the stated purpose only. Your prompt response is crucial and greatly appreciated.

**TO BE COMPLETED BY THE BANK OR OTHER FINANCIAL INSTITUTION:** PLEASE COMPLETE APPLICABLE SECTIONS. IF NOT APPLICABLE PLEASE WRITE N/A. PLEASE DO NOT LEAVE BLANK SPACES AND DO NOT USE WHITE-OUT.

Please provide complete information on all accounts held by the above named person(s). Include information on any and all **CHECKING, SAVINGS, IRA, KEOGH, CERTIFICATES OF DEPOSIT, MUTUAL FUNDS, MONEY MARKET, ETC.** (Use an additional verification form if necessary.) PLEASE ANSWER ALL QUESTIONS AND DO NOT USE WHITE-OUT.

Type of Account	Account Number	Date Opened	Current Balance	* 6 month Average Balance on Checking	Current Interest Rate
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

*\* 6 month average balance needed for checking accounts only.*

Are any of the above accounts held jointly and/or to the benefit of anyone other than the person listed above? Yes: ☐ No: ☐  
If 'yes', describe (with whom, which accounts & % ownership): \_\_\_\_\_

Does the above named person rent a SAFE DEPOSIT BOX at your institution? Yes: ☐ No: ☐

Signature of Person  
Verifying Information: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date: \_\_\_\_\_



We encourage and support the nation's affirmative housing program in which there are no barriers to obtaining housing because of race, color, religion, sex, national origin, handicap or familial status.

