

## ASSET VERIFICATION

**THIS SECTION TO BE COMPLETED BY MANAGEMENT AND SIGNED BY TENANT**

To: (Name & Address of Financial Institution) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DATE: \_\_\_\_\_

RE: \_\_\_\_\_  
 (print applicant/tenant name)

ACCOUNT #: \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_

I hereby authorize the release of my asset information.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

The person listed above is an applicant/tenant of a housing program that requires verification of income. Information provided will remain confidential and will be used solely for the purpose of determining eligibility for occupancy. Your timely response is essential and greatly appreciated.

Sincerely, \_\_\_\_\_

Please return form (by mail/fax only) to:

Project Management Agent

**THE FOLLOWING TO BE COMPLETED BY FINANIAL INSTITUTION:**

Checking Account Average Balance for Previous Six Months \$ \_\_\_\_\_ Rate of Interest \_\_\_\_\_

Current Savings Account Balance \$ \_\_\_\_\_ Rate of Interest \_\_\_\_\_

Certificates of Deposit # \_\_\_\_\_ Value \_\_\_\_\_ Interest Rate \_\_\_\_\_

Stocks # \_\_\_\_\_ Value \_\_\_\_\_ Interest Rate \_\_\_\_\_

401K # \_\_\_\_\_ Value \_\_\_\_\_ Interest Rate \_\_\_\_\_

IRA # \_\_\_\_\_ Value \_\_\_\_\_ Interest Rate \_\_\_\_\_

Money Market Certificate# \_\_\_\_\_ Value \_\_\_\_\_ Interest Rate \_\_\_\_\_

Other Accounts: \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Signature of Authorized Representative

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Print Name & Title

\_\_\_\_\_  
 Telephone



**NOTE:** Section 1001 of Title 18 of the US Code makes it a criminal offense to make willful false statements for misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.