

VERIFICATION OF REAL ESTATE VALUE

THIS SECTION TO BE COMPLETED BY MANAGEMENT AND EXECUTED BY TENANT

TO: (Name & address of appraiser or lender)

Date: _____

RE: _____
Applicant/Tenant Name

Social Security Number

Unit # (if assigned)

I hereby authorize release of my information.

Signature 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 to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

Development Owner/Management Agent

EMAIL, MAIL OR FAX THIS FORM TO:

THIS SECTION TO BE COMPLETED BY APPRAISER, REAL ESTATE AGENT OR MORTGAGE DEPARTMENT. VERIFICATION MAY NEED TO BE OBTAINED FROM MORE THAN ONE SOURCE.

Property Owner(s) (please list all) _____

Property Street Address _____

If information is being provided by a Real Estate Agent or Appraiser

Fair Market Value	\$ _____
Estimated Selling Costs (broker fees, legal fees, settlement costs, etc.)	\$ _____
Mortgage Balance (if applicable and known)	\$ _____
Estimated Proceeds (if sold)	\$ _____

If information is being provided by Mortgage Department:

Year Assessed	_____
Assessed Value (if known)	\$ _____
Market Value (if known)	\$ _____
Mortgage Balance	\$ _____

_____ Signature	_____ Printed Name	_____ Date
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_____ Phone #	_____ Fax #	_____ E-mail
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NOTE: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.



This institution is an equal
opportunity provider.

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