OMB Approved No. 2900-0029 Respondent Burden: 20 Minutes Expiration Date: 12/31/2020

## **Department of Veterans Affairs**

## CREDIT STATEMENT OF PROSPECTIVE PURCHASER

Privacy Act Notice: VA and the Service Provider 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., This form will serve as an application for credit from VA in connection with an offer to purchase a VA-acquired property, as authorized by law (38 U.S.C. 1820(a)(5)).) 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 required to obtain or retain benefits. VA may conduct computer matches to verify the information you will furnish. Under the financial privacy act of 1978, VA may obtain financial records held by financial institutions in connection with the consideration or administration of assistance to you. Such financial records will be available to VA without further notice or authorization.

Respondent Burden: We need this information to consider your offer to purchase a VA acquired property. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 20 minutes to review the instructions, find the information, and complete this form. VA and the Service Provider 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 <a href="https://www.reginfo.gov/public/do/PRAMain">www.reginfo.gov/public/do/PRAMain</a>. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

GENERAL INFORMATION								
1A. APPLICANT(S) NAME(S) AND MAIL	ING ADDRESS		2. VA	PROPERTY IDENTIFIER				
3				PROPERTY ADDRESS				
1B. HOME TELEPHONE NO.			1					
4. DOWN PAYMENT		5. REQUESTED	D LOAN		6. RI	EHABILITATION	AMOUI	NT
\$ \$				\$				
	PLICANT HOME		IARITAL S		10. AGES	OF DEPENDEN	TS OTH	IER THAN SPOUSE
		YEARS	MARRIE					
	OWN		UNMAR			WITH ADDITION	NT	
	1. ATTACHMENTS 12. NEAREST RELATIVE NOT LIVING WITH APPLICANT ALL INCOME DOCUMENTS SEPARATE CREDIT STATEMENT FROM NAME:							
OTHER (Specify)		J // ( L   W   L   W		NAME: STREET:				
	o-annlicant who is	not the spouse of th	10	OITV:				
	icant named in Iter			CITY: STATE:		710 0005		
				SIAIE.		ZIP CODE:		
				TELEPHONE NO.:				
13. IF ANY OF THE FOLLOWING THRE NECESSARY TO EVALUATE THE C							IING TH	IE SPOUSE WILL BE
THE APPLICANT IS MARRIED AND								
THE APPLICANT WILL RELY ON IN	*			*			OR ASS	SETS OF A SPOUSE
TO REPAY THE LOAN	ORLIGATED MA	ITH THE SDOLLS	TO DED	DAY THE LOAN				
THE APPLICANT WILL BE JOINTLY OBLIGATED WITH THE SPOUSE TO F  APPLICANT				SPOUSE/CO-APPLICANT				
14A. DATE OF BIRTH 14B. SOCIAL SECURITY NUMBER			ER	15A. DATE OF BIRTH 15B. SOCIAL SECURITY NUMBER				
14C. EMPLOYER NAME AND MAILING ADDRESS		14D. DATES (From-To)		15C. EMPLOYER NAME AND MAILING ADDRESS			15D. DATES (From-To)	
14E. MON			1				15E. MONTHLY	
SELF-EMPLOYED	INCOME \$		SELF-EMPLOYED				INCOME \$	
14F. JOB TITLE/TYPE OF BUSINESS 14G. I		BUSINESS TELEPHONE		15F. JOB TITLE/TYPE OF BUSINESS			15G. I	L ♥ BUSINESS TELEPHONE
NOTE - If working for more than one e	1 2 / 1	oloyed at present	job less th	nan two years, continue to fu	rnish job or	training informa	ation to	cover the latest two-
year period. Use a separate sheet, if nec		<b>I</b>						
16A. PREVIOUS EMPLOYER'S NAME AND MAILING ADDRESS		16B. DATES (From-To)		17A. PREVIOUS EMPLOYER'S NAME AND MAILING ADDRESS				17B. DATES (From-To)
		16C. MONTHLY INCOME					17C. MONTHLY INCOME	
SELF-EMPLOYED		\$		SELF-EMPLOYED				\$
16D. JOB TITLE/TYPE OF BUSINESS	16E. I	BUSINESS TELEI	PHONE	17D. JOB TITLE/TYPE OF	BUSINESS		17E. E	BUSINESS TELEPHONE
			SETS A	ND CASH/MARKET V				la .
		\$		F. FURNITURE, HOUSEHOLD GOODS				\$
B. CASH ON HAND, CHECKING ACCOUNTS  C. SAVINGS ACCOUNTS, CERTIFICATES, BONDS		\$ \$		G. VEHICLE (YEAR AND MODEL)  H. OTHER				\$
D. STOCKS, OTHER SECURITIES		\$		I. OTHER				\$
E. REAL ESTATE OWNED OTHER THA	\$		J. OTHER \$					
								1

VA FORM **DEC 2017** 

VA FORM

**DEC 2017** 

26-6705b

SUPERSEDES VA FORM 26-6705b, OCT 2014, WHICH WILL NOT BE USED.

PURCHASE OFFER NO:

## **AUTHORIZATION TO RELEASE INFORMATION**

I hereby authorize VA (United States Department of Veterans Affairs) to verify records of my past and present employment and income, as well as financial accounts and other asset balances, to obtain a consumer and/or business credit report and verify information regarding my past and present credit accounts, including rental accounts, in order to process my credit statement to VA and the Service Provider. I acknowledge that VA and the Service Provider is in compliance with the Right to Financial Privacy Act of 1978 (Title XI, Public Law 95-630), in connection with this request for access to financial records. I request all referenced employers, financial institutions, landlords and other creditors to accept a photocopy of this signed authorization as evidence of my consent to release the requested information to VA and the Service Provider. I understand that I may revoke this authorization at any time before the financial records described above are disclosed.

•			
SIGNATURE OF APPLICANT (Sign in ink)	DATE SIGNED	SIGNATURE OF SPOUSE/CO-APPLICANT (Sign in ink)	DATE SIGNED

CHE( 19A. BANK, CREDIT UNION OR OTHER				ACCOUNT INFORMA 19B. ACCOUNT NUMBER		19C. BALANCE	
						\$	
						\$	
						\$	
						¥	
						\$	
						\$	
MONTHLY 20A. SOURCE OF INCOME AND	INCOME 20B. APPLICANT	20C. SPOUSE		NED MONTHLY HO  OMBINED EXPENSES AND	USING & OTHE 21B. PRESENT		
GROSS MONTHLY AMOUNTS	BORROWER	CO-APPLICANT		SS MONTHLY AMOUNTS	HOME	LOAN	
(1) BASE SALARY, WAGES	\$	\$	(1) RENT C	(1) RENT OR HOME LOAN PAYMENT		\$	
(2) OVERTIME, PART-TIME	\$	\$	(2) HAZAR	(2) HAZARD INSURANCE		\$	
(3) BONUSES, COMMISSIONS	\$	\$	(3) REAL E	(3) REAL ESTATE TAXES		\$	
(4) INTEREST, DIVIDENDS	\$	\$	(4) HOMEO	WNER ASSOCIATION DUE	S <sub>\$</sub>	\$	
(5) PENSION, COMPENSATION	\$	\$	(5) DEPEN	DENT CARE	\$	\$	
(6) REAL ESTATE RENTAL	 \$	\$	(6) OTHER		\$	\$	
Disclose the following income only if neede		end VA copies of	SELF EM	PLOYMENT: Send VA copie	es of latest tax returns a	and financial (profit/	
court documents and evidence of payments (7) ALIMONY, SEPARATE MAINTENANCE	s. \$	•	loss) stat	ements for the last two years.			
(8) CHILD SUPPORT	<b>D</b>	<b>a</b>		<b>PROPERTY:</b> Send VA copie loan and rental amounts rela			
(a) at the base of the attraction of the base of the b	LOANS AND	∣ <sup>\$</sup> OTHER CREI	I DIT ACCOL	JNT INFORMATION			
(List your charge card accounts, installm to list and explain additional credit accou bankruptcies filed within the past seven y	ent loans, and other d ents, including any pa	lebts you owe. Incl st due amounts, jud	ude present lan Igments, collect	dlord(s) with other creditors ions and foreclosures again:	s and attach a separate st you, deeds in lieu of	e sheet, if necessary, foreclosure,	
22A. CREDITOR NAMES AND MAILING				UMBERS AND PURPOSE	22C. BALANCE	22D. PAYMENT PER MONTH	
						FERMONIII	
ACKNOWN EDOMENTO				h		tions in the surent	
ACKNOWLEDGMENTS - I acknowledge the that payments become delinquent on the lo		<del>-</del>	-	-	<del>-</del>		
additional interest for the period of time that Offset other amounts owed to me under other	· · · · · · · · · · · · · · · · · · ·	· · · <del>-</del>			<del>_</del>		
matches, collect the amount due, foreclose	the loan, sell the prop	erty and seek judge	ment against m	e for a deficiency, (6) Refer m	y account to the Depar	rtment of Justice for	
litigation in the courts, (7) If I am a current of Service as my taxable income. These action	· · · · · · · · · · · · · · · · · · ·	-			-		
assigns, to do so. I understand that Federa	al debts include grants	, benefit overpayme	nts, delinquent	axes and direct, guaranteed	or insured loans for edu	ucation, business or	
housing, and that delinquencies are defined payment is more than 31 days past due; a	<del>-</del>	•		•		·	
was breached by the borrower and is in def	ault.	·		,		Ü	
23. ARE YOU DELINQUENT ON ANY FED (If "Yes," explain in this box or attach a sep	,	/E YOU FILED BAN	IKRUPTCY OR	HAD A LOAN FORECLOSE	O WITHIN THE PAST S	SEVEN YEARS?	
YES NO							
AGREEMENTS - Neither I, nor anyone aut	horized to act for me w	vill restrict the sale o	r rental of the p	roperty covered by this applic	ation for credit to any p	erson because of	
race, color, religion, sex, handicap, familial status or national origin. I understand that such restriction is illegal. I understand that, if I obtain a loan from VA to purchase a property acquired through VA Loan Guaranty operations, VA may either retain or sell the rights to collect the payments and otherwise service the loan. I understand that VA may retain this application and any supporting documents, even if the loan is not approved. I agree to notify VA if my income or expenses should change prior to closing.							
CERTIFICATIONS - I certify that all information contained in this application for credit is true and complete to the best of my knowledge and that verification may be obtained from any source named barries. I understand that if I give false information. I may be charged population or may be subject to criminal processition.							
from any source named herein. I understand that if I give false information, I may be charged penalties or may be subject to criminal prosecution.  24A. SIGNATURE OF APPLICANT (Sign in ink)  24B. DATE SIGNED  25A. SIGNATURE OF SPOUSE/CO-APPLICANT (Sign in ink)  25B. DATE SIGNED							
FEDERAL LAW PROHIBITS A CREDITOR FROM DISCRIMINATING ON THE BASIS OF THE FOLLOWING FEDERAL GOVERNMENT MONITORING INFORMATION, OR THE FACT THAT IT IS NOT FURNISHED. YOU ARE NOT REQUIRED, BUT ENCOURAGED, TO FURNISH THIS INFORMATION.							
26. APPLICANT (If you do not wish to con		INITIALS	27. SPOL	JSE/CO-APPLICANT (If you	do not wish to	INITIALS	
items below, please initial here)  RACE/ETHNIC ORIGIN		SEX	•	the items below, please initi	al here)	SEX	
ASIAN OR RI ACK	WHITE	MALE	ASIA	N OR RIAC	K WHITE	MALE	
PACIFIC ISLANDER BESON  AMERICAN INDIAN OR ALASKAN NATIVE HISPANIC		FEMALE	AME	FIC ISLANDER BEAC RICAN INDIAN HISPA LASKAN NATIVE HISPA		FEMALE	