

DEPARTMENT OF VETERANS AFFAIRS AND U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
HUD COMMUNITY PLANING AND DEVELOPMENT
HUD HOUSING-FEDERAL HOUSING COMMISSIONER
REQUEST FOR VERIFICATION OF DEPOSIT

PRIVACY ACT NOTICE STATEMENT - This information is to be used by the agency collecting it in determining whether you qualify as a prospective mortgagor for mortgage insurance or guaranty or as a borrower for a rehabilitation loan under the agency's program. It will not be disclosed outside the agency without your consent except to financial institutions for verification of your deposits and as required and permitted by law. You do not have to give us this information, but, if you do not, your application for approval as a prospective mortgagor for mortgage insurance or guaranty or as a borrower for a rehabilitation loan may be delayed or rejected. This information request is authorized by Title 38, U.S.C., Chapter 37 (if VA); 12 U.S.C., Section 1701 et seq., (if HUD/FHA); and by 42 U.S.C., Section 1452b (if HUD/CPD).

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 1 REQUEST

1. To (Name and Address of Depository) First Community Credit Union 9100 Westview Dr., Houston, TX 77066 713.466.3476	2. FROM (Name and Address of Lender or Local Processing Agency)' Prudential Huntoon Paige Associates, Ltd. 379 Thornall St., 10th Floor, Edison, N.J. 08837-2231 Attn: Marie Steiger 732.767.8794
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I certify that this verification has been sent (directoy 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 X Marie Steiger	4. Title Assistant Vice President	5. Date	6. Lender's Number (Optional)
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7. INFORMATION TO BE VERIFIED

Type of Account and/or loan	Account/Loan in Name of	Account/Loan Number	Balance
Auto Loan	Phillip Allen	1109870	\$20,000

TO DEPOSITORY: I have applied for mortgage insurance or guaranty or have a rehabilitation loan and stated that the balance on deposit and/or outstanding loans with you are as shown above. Your 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 reponse is solely a matter of curtesy for which no responsibility is attached to your institution or any of your officers.

8. NAME AND ADDRESS OF APPLICANT(S)

9. SIGNATURE OF APPLICANTS(S)

Phillip Allen 8855 Merlin Ct, Houston, TX 77055

X

X

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)	Number of Late Payments within Last 12 Months

12. ADDITIONAL INFORMATION WHICH MAY BE OF ASSISTANCE IN DETERMINATION OF CREDIT WORTHINESS: *Please include information on loan paid-in-full as in Item 11 above)*

13. Signature of Depository Official X	14. Title	15. Date
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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 orlocal processing agency and is not to be transmitted through the applicant or any other party.