## VERBAL VOE

Loan #:	Borrower Name:
Employer Name/Company Name:	
Validated Employer Contact Phone Number:	
Employer Contact Name and Title:	
Salaried Applicant  VVOE must be completed not more than 10 days prior to the Note Date.	
Business Phone Number must be independently verified. (Do not use the phone number from 1003 application unless verified).	
☐ Y ☐ N Was Employer	Business Phone Number located independent of the borrower?
Identify Source ☐ Internet (L☐ Directory A	ist site or print page) or
Other:	(note: Other cannot come from 1003 or borrower)
☐ Y ☐ N Borrower is cu	rrently employed at company listed on 1003?
Is Borrower active or on leave?   Active  On Leave	
Borrower Current Position:	
Borrower's Start Date:	
Borrower's Probability of Continued Employment:	
Self-Employed Applicant	
Must verify the existence of the business through a third party source not more than 30 days prior to the Note Date	
Business existence must	be independently verified through a disinterested third party and supporting documentation is required.
Please confirm with an X the type of verification obtained:	
☐ CPA (Name): _☐ Regulatory Age	ency (Name):
	Professional Association (Name):
Copy of:    Yellow Page Additional Control of the C	
	ite (Acceptable Internet Web sites include borrower's business Web site, government,
union, or profe Provide link: Other (Identify	essional association Web site)
Other (Identity	
(Lender/Originator) Verifier Information  Name (print):	
Name (signature):	
Title:	
Date:	
Phone Number:	