

# ASSET VERIFICATION

This individual has applied for housing assistance under a program of the U.S. Department of Housing and Urban Development (HUD). HUD requires the housing owner to verify all information that is used in determining this individual's eligibility or level of benefits. We ask your cooperation in providing the following information and returning it to the company or individual listed at the end of this verification. Your prompt return of this information will help to ensure timely processing of the application for assistance.

Property Requesting Verification     Vermillion Housing Authority    

Bank/Financial Institution \_\_\_\_\_

Bank/Financial Institution Address: 105 E. Cherry St., Vermillion, SD 57069

*RELEASE: I hereby authorize the release of the requested information. Information obtained under this consent is limited to information that is no older than 12 months. There are circumstances that would require the owner to verify information that is up to 5 years old, which would be authorized by me on a separate consent attached to a copy of this consent.*

Printed Name of Applicant/Tenant \_\_\_\_\_

Social Security Number \_\_\_\_\_

Signature of Applicant/Tenant \_\_\_\_\_

Date \_\_\_\_\_

*(You do not have to sign this form if either the requesting organization or the organization supplying the information is left blank.)*

**THIS SECTION TO BE COMPLETED BY BANK/FINANCIAL INSTITUTION**

The applicant/tenant has authorized the above stated bank/financial institution to furnish information regarding assets owned by this individual. Information provided will remain confidential and will be used solely for the purpose of determining eligibility for housing assistance.

**I certify that \_\_\_\_\_ currently holds the following assets:**

CHECKING ACCOUNT(s)			Date	Date
Account #	Avg 6-Month Bal.	Current Bal.	Acct Opened	Acct Closed
_____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	_____	_____
_____	\$ _____	\$ _____	_____	_____

SAVINGS ACCOUNT(s)				
Account #	Current Balance	Interest Rate	Date Acct Opened	Date Acct Closed
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____

OTHER ASSETS (CD, IRA, Money Market Funds, Trusts, Treasury Bills, etc)						
Account #	Type of Account	Interest Rate	Total Value	Cash Value*	Date Acct Opened	Date Acct Closed
_____	_____	_____ %	_____	_____	_____	_____
_____	_____	_____ %	_____	_____	_____	_____
_____	_____	_____ %	_____	_____	_____	_____

(\*Cash value is the total value minus penalties for early withdrawal or cost to convert assets to cash (broker fees, etc).

Note: If assets are owned by more than one person, prorate the assets according to their percentage of ownership. If no percentage is specified, prorate the assets evenly among all owners.

I hereby certify that the information supplied in this section is true and complete to the best of my knowledge.

\_\_\_\_\_  
Printed Name of Authorized Bank/Financial Institution Representative

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of Authorized Bank/Financial Institution Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Firm/Organization

\_\_\_\_\_  
Phone Number

Please return this completed verification form to:

**Vermillion Housing  
25 Center Street  
Vermillion, SD 57069**

**FAX 605-677-7192**

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***PENALTIES FOR MISUSING THIS CONSENT:***

*Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains, or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8). Violations of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).\*\**

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