



Providing Homes, Creating Community, Changing Lives

# Asset Verification

Boulder Housing Partners | 4800 North Broadway Boulder, CO 80304 | Phone: 720-564-4610

## Tell Us About Your Assets

<b>Financial Institution Name</b>	<b>Financial Institution Fax #</b>	<b>Financial Institution Phone #</b>
<b>Financial Institution Address</b>		
<b>Name on Account</b>	<b>Head of Household Name</b>	
<b>Applicant/Resident Social Security #</b>	<b>Applicant/Resident Date of Birth</b>	

**Consent to Release Information: My signature below authorizes verification of my account/asset information.**

Applicant/Resident Signature \_\_\_\_\_ Date \_\_\_\_\_

**STAFF USE ONLY**

The above Applicant/Resident is applying to/participating in a housing program that requires verification of assets. The individual has signed a release above giving you permission to supply us with information. The information provided will remain confidential. Please return the completed form to the address/fax below.

**I certify that this verification has been sent directly to the bank/financial institution and was not hand-carried by the applicant/tenant or any other interested party.**

Signature of Owner/Agent \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Owner/Agent Address \_\_\_\_\_ Owner/Agent's Fax Number \_\_\_\_\_

**Financial Institution: Please complete the information requested below.**

**1. CHECKING, SAVINGS, CERTIFICATES (CD'S) ACCOUNTS**

Account #	Type of account	Balance	% Rate	Penalty

**2. STOCKS, BONDS, MUTUAL FUNDS, ETC.**

Account #	Name/Investment Type	Amt. in IRS 1099	Market Value	Current rate of return

**3. CLOSED ACCOUNTS**

Account #	Date of closure	Type of account	Balance	% Rate	Penalty

**Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful, false statements of misrepresentation to any Department or Agency of the U.S. as to any matter within its jurisdiction.**

Signature of Representative \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Telephone # \_\_\_\_\_

