

Request for Verification of Employment

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et. seq., or 7 USC, 1921 et. seq. (if USDA/FmHA).

Instructions: **Applicant:** Complete items 1-2, and 7-8. Return to Bend-Redmond Habitat for Humanity

Employer: Please complete part II and IV or III and IV, then return to Bend-Redmond Habitat for Humanity directly (not through a third party)
 224 NE Thurston Ave., Bend, OR 97701 or homeownership@brhabitat.org

Part I - Request

1. To (Name and address of employer)	2. From (Name and address of lender)
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I certify that this verification has been sent directly to the employer and has not passed through the hands of the applicant or any other interested party.

3. Habitat Staff Signature	4. Title	5. Date	6. Lender's Number (Optional)
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I have applied for the Bend-Redmond Habitat for Humanity partnership program and stated that I am now or was formerly employed by you. My signature below authorizes Verification of this information.

7. Name and Address of Applicant (include employee or badge number)	8. Signature of Applicant
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Part II – Verification of Present Employment

9. Applicant's Date of Employment	10. Present Position	11. Probability of Continued Employment
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12A. Current Gross Base Pay (Enter Amount and Check Period) <input type="checkbox"/> Annual <input type="checkbox"/> Hourly <input type="checkbox"/> Monthly <input type="checkbox"/> Other (Specify) \$ _____ <input type="checkbox"/> Weekly				13. For Military Personnel Only Pay Grade _____ <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Type</th> <th style="width:50%;">Monthly Amount</th> </tr> <tr> <td>Base Pay</td> <td>\$ _____</td> </tr> <tr> <td>Rations</td> <td>\$ _____</td> </tr> <tr> <td>Flight or Hazard</td> <td>\$ _____</td> </tr> <tr> <td>Clothing</td> <td>\$ _____</td> </tr> <tr> <td>Quarters</td> <td>\$ _____</td> </tr> <tr> <td>Pro Pay</td> <td>\$ _____</td> </tr> <tr> <td>Overseas or Combat</td> <td>\$ _____</td> </tr> <tr> <td>Variable Housing Allowance</td> <td>\$ _____</td> </tr> </table>		Type	Monthly Amount	Base Pay	\$ _____	Rations	\$ _____	Flight or Hazard	\$ _____	Clothing	\$ _____	Quarters	\$ _____	Pro Pay	\$ _____	Overseas or Combat	\$ _____	Variable Housing Allowance	\$ _____	14. If Overtime or Bonus is Applicable, Is Its Continuance Likely? Overtime <input type="checkbox"/> Yes <input type="checkbox"/> No Bonus <input type="checkbox"/> Yes <input type="checkbox"/> No	
Type	Monthly Amount																								
Base Pay	\$ _____																								
Rations	\$ _____																								
Flight or Hazard	\$ _____																								
Clothing	\$ _____																								
Quarters	\$ _____																								
Pro Pay	\$ _____																								
Overseas or Combat	\$ _____																								
Variable Housing Allowance	\$ _____																								
12B. Gross Earnings																									
Type	Year To Date	Past Year	Past Year	Rations	\$ _____	15. If paid hourly - average hours per week _____ 16. Date of applicant's next pay increase _____ 17. Projected amount of next pay increase _____ 18. Date of applicant's last pay increase _____ 19. Amount of last pay increase _____																			
Base Pay	Thru _____ \$ _____	\$ _____	\$ _____	Flight or Hazard	\$ _____																				
Overtime	\$ _____	\$ _____	\$ _____	Clothing	\$ _____																				
Commissions	\$ _____	\$ _____	\$ _____	Quarters	\$ _____																				
Bonus	\$ _____	\$ _____	\$ _____	Pro Pay	\$ _____																				
Total	\$ 0.00	\$ 0.00	\$ 0.00	Overseas or Combat	\$ _____																				

20. Remarks (If employee was off work for any length of time, please indicate time period and reason)

Part III – Verification of Previous Employment

21. Date Hired _____	22. Salary/Wage at Termination Per (Year) (Month) (Week)			
23. Date Terminated _____	Base _____	Overtime _____	Commissions _____	Bonus _____
24. Reason for Leaving _____		25. Position Held _____		

Part IV - Authorized Signature - Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy purposed to influence the issuance of any guaranty or insurance by the VA Secretary, the U.S.D.A., FmHA/FHA Commissioner, or the HUD/CPD Assistant Secretary.

26. Signature of Employer	27. Title (Please print or type)	28. Date
29. Print or type name signed in Item 26	30. Phone No.	

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LANDLORD REFERENCE FORM

Date: _____

Tenant Name(s): _____

Property Address: _____

Apartment/Complex Name (if applicable): _____

Length of Time at Address: _____ Year(s) _____ Month(s)

Monthly Rent Amount: _____ Tenant Pays on Time: YES or No
(Please circle)

Number of Late Payments: 0 1 2 3 4 5 6+
(within the past 12 months) (Please circle one)

Number of Returned Checks: 0 1 2 3 4 5 6+
(within the past 12 months) (Please circle one)

Number of Eviction Notices: 0 1 2 3 4 5 6+
(within the past 12 months) (Please circle one)

Tenant takes care of property: YES NO Comment: _____
(Please circle)

Please make comments below that you believe would be of interest to the Habitat for Humanity Homeownership Program.

Landlord Name: _____ Phone Number: _____

Landlord Signature: X _____

PLEASE RETURN THIS FORM IN AN ENVELOPE SIGNED ACROSS THE CLOSED SEAL, DIRECTLY TO THE APPLICANT/CO-APPLICANT. Or scan and email homeownership@brhabitat.org

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NEIGHBOR REFERENCE FORM

Date: _____

Applicant/Co-Applicant Name(s): _____

TO THE NEIGHBOR REFERENCE: The person named above is applying to Bend Redmond Habitat for Humanity's Homeownership Program. The applicant/co-applicant have indicated that you would be able to evaluate his or her qualifications and provide us with a candid recommendation. Considerable value is placed on personal references during the application review and selection process. Your input is greatly appreciated.

Name of Reference: _____ Phone: _____

How long have you been a neighbor of the applicant/co-applicant?

Address: _____

Please comment on such qualities as the applicant/co-applicant's level of dependability, tidiness of dwelling, yard, or common space.

Why do you recommend this applicant/co-applicant to us as a good partner family? Specific examples are always more helpful to us rather than general statements. Has the applicant/co-applicant been a courteous neighbor, considerate of noise level, privacy, or space? *(Please attach a separate sheet if additional space is needed).*

Your Signature: X _____

Date: _____

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PERSONAL REFERENCE FORM

Date: _____

Applicant/Co-Applicant Name(s): _____

TO THE PERSONAL REFERENCE: The person named above is applying to Bend Redmond Habitat for Humanity's Homeownership Program. The applicant/co-applicant have indicated that you would be able to evaluate his or her qualifications and provide us with a candid recommendation. Considerable value is placed on personal references during the application review and selection process. Your input is greatly appreciated.

Name of Reference: _____ **Phone:** _____

Position/ Title: _____ Organization/Institution: _____

Address: _____

How long have you been a neighbor of the applicant/co-applicant?

Please comment on such qualities as the applicant/co-applicant's level of dependability, team work, collaboration etc.

Why do you recommend this applicant/co-applicant to us as a good partner family? Specific examples are always more helpful to us rather than general statements. (Please attach a separate sheet if additional space is needed).

Your Signature: X _____

Date: _____

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