

Plano Housing Authority, 1740 Avenue G, Plano, Texas 75074
ASSET VERIFICATION

Request for Verification of Deposit

The individual named above is an applicant for housing assistance which is subsidized through the Department of Housing & Urban Development. Federal regulations require that in order for the family to be eligible, we must verify the family's income, expenses and other information related to eligibility. The individual has authorized below your release of the requested information. The information you provide will be used for the purpose of determining the family's eligibility for the program. We are required to complete our verification process in a short time period and would appreciate your prompt response.. A self addressed envelope has been included for your convenience. If you have any questions, please feel free to contact our office. Thank you for your cooperation.

Public Housing Authority: Complete Items 1 through 8. **Applicant:** complete Item 8 through 9. **Depository:** Please complete Items 10 through 13 and return DIRECTLY to Public Housing Authority named in Item 2.

Part 1. Request

1. TO (Name and Address of Depository)

2. FROM :

PLANO HOUSING AUTHORITY
1740 AVENUE G
PLANO, TEXAS 75074

I certify that this verification has been sent directly to the bank or depository and has not passed through the hands of the applicant or any other party.

3. _____
 Signature of PHA OFFICIAL

5. _____
 Date

4. _____
 Title

6. _____
 Phone Number

7. INFORMATION TO BE VERIFIED:

TYPE OF ACCOUNT	ACCOUNT NUMBER	BALANCE	NAMES ON ACCOUNT

TO DEPOSITORY: I have applied for public housing and stated that the balance on deposit and/or outstanding loans with you are as shown above. You are authorized to verify this information and to supply PLANO HOUSING AUTHORITY with the information requested in Items 10 through 12. Your response is solely a matter of courtesy for which no responsibility is attached to your institution or any of your officers.

8. Name and Address of Applicant(s)

9. Signature(s) of Applicant(s)

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 PREVIOUS 6 MTHS	DATE ACCOUNT OPENED	ANNUAL INTEREST RATE

11. _____
 Signature of Depository Official

12. _____
 Date

 Title

13. _____
 Phone Number

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 or local processing agency and is not to be transmitted through the applicant or any other party.

PLEASE RETURN COMPLETED FORM TO PLANO HOUSING AUTHORITY.

1740 AVENUE G FAX: 972-516-0251
 PLANO, TEXAS 75074

FOR OFFICE USE ONLY:				
METHOD OF VERIFICATION:	FAX	MAIL	HAND DELIVER	DATE: _____
SECOND REQUEST	FAX	MAIL	HAND DELIVER	DATE: _____
COMMENTS:				
PHA FORM: ASSET VERIFICATION:1/2007				