

Verbal Verification of Employment

BORROWER INFORMATION		
Borrower Name:	Loan Number:	
SALARIED/COMMISSIONED BORROWER - EMPLOY	ER VERIFICATION INFORMATION	
(Must be completed within 10 days prior to closing)		
Current Employer Name:		
Employer Address:		
City, State and Zip:		
Employer Phone Number:		
Employment Verified by:	Position/Department:	
Borrower's Dates of Employment:		
Probability of Continued Employment: Good Fa	air Refuses to provide	
Military: Provide a Military Leave and Earning State	ment (LES) within 30 days of closing	
SELF-EMPLOYED BORROWER – COMPANY VERIFIC	ATION INFORMATION	
(Must be completed within 30 days prior to closing)		
Business Name:		
Business Phone Number:	Listed with Directory Assistance?	
If not, is the company in existence as verified by Secretar	ry of State/other regulatory agency?	
CPA or Disinterested third party name (if applicable):		
CPA or Disinterested third phone number (if applicable):		
Borrower's Position/Title:	Type of Business:	
List any other type of third party verification used (if neces	ssary):	
NON-EMPLOYMENT INCOME		
(Social Security, Pension, Disability, etc.)		
I certify that the borrower's only source of income is	non-employment income	
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VERIFICATION COMPLETED BY		
(By signing this form, the signer confirms that the borrows application)	er was employed and had income at the	e time of loan
Company Name:	Position/Title:	
Signature	Typed Name	Date

Fax completed form to (248) 312-2423