

REQUEST FOR VERIFICATION OF MORTGAGE OR DEED OF TRUST		c. APPLICATION NUMBER
		d. DATE OF APPLICATION
a. NAME, ADDRESS AND ZIP CODE OF APPLICANT FOR LOAN		e. ADDRESS OF MORTGAGED PROPERTY
b. NAME ADDRESS AND ZIP CODE OF MORTGAGEE		
MORTGAGE DATA		
1. FINANCIAL DATA		2. TYPE OF MORTGAGE
DATE OF MORTGAGE	ORIGINAL AMOUNT \$	<input type="checkbox"/> CONVENTIONAL <input type="checkbox"/> FHA <input type="checkbox"/> VA
DATE OF MATURITY	PRESENT BALANCE \$	
MONTHLY PAYMENT TO PRINCIPAL & INTEREST	\$	3. ARE PAYMENTS CURRENT <input type="checkbox"/> YES <input type="checkbox"/> NO IF NOT, STATE AMOUNT IN ARREARS PERIOD \$
MORTGAGE INSURANCE PREMIUM	\$	4. STATE THE AMOUNT OF TERMINATION FEE OR PREPAYMENT PENALTY PAYABLE UPON FULL PREPAYMENT OF THE LOAN \$
REAL ESTATE TAXES	\$	
FIRE INSURANCE	\$	5. HAS THIS ACCOUNT BEEN SATISFACTORY? <input type="checkbox"/> YES <input type="checkbox"/> NO
TOTAL MONTHLY PAYMENT	\$	
f. OTHER REMARKS		
g. AUTHORIZATION BY APPLICANT I authorize the mortgagee to furnish to the Public Body (identified in block i.) the information regarding the mortgage identified above.		
_____		_____
Date of Authorization		Signature
h. SIGNATURE OF MORTGEE The above information furnished in strict confidence, in response to your request.		i. NAME, ADDRESS AND ZIP CODE OF AGENCY TO WHICH FORM IS TO BE RETURNED DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT 3700 PENDER DRIVE FAIRFAX, VA 22030-7444
_____	_____	
Date	Signature	

	Title	