STOCKS / BONDS VERIFICATION

TO: (Name & address)

_____
_____
_____

RE: _____ _____ _____
Applicant/Tenant Name | Social Security Number | Unit # (if assigned)

I hereby authorize release of the requested information.

_____ _____
Signature of Applicant/Tenant | Date

We are required by the Internal Revenue Service (IRS) to verify the incomes of all family members applying for admission to any Low Income Housing Tax Credit Program housing. The Delaware State Housing Authority monitors compliance for IRS requirements. Please complete the form below and return it to the address shown below as soon as possible. This information will only be used to determine the family's eligibility for admission or continued occupancy. Your cooperation is appreciated.

_____
Property Owner/Management Agent

MAIL OR FAX THIS FORM TO:

THIS SECTION TO BE COMPLETED BY BROKER OR AUTHORIZED OFFICIAL

STOCKS:

Name of Stock Company: _____

Current Market Value minus broker/legal fees for conversion to cash: $_____

Total dividends paid in previous 12 months (included even if reinvested): $_____

Name of Stock Company: _____

Current Market Value minus broker/legal fees for conversion to cash: $_____

Total dividends paid in previous 12 months (included even if reinvested): $_____

BONDS:

Name of Issuing Agent: _____

Current Market Value minus broker/legal fees for conversion to cash: $_____

Total interest paid in previous 12 months: $_____

Name of Issuing Agent: _____

Current Market Value minus broker/legal fees for conversion to cash: $_____

Total interest paid in previous 12 months: $_____

Signature of Broker or Authorized Official

Signature: _____ Date:_____
Print your name: _____ Telephone #: _____
Title: _____
Company Name _____
Address _____
_____

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