



# Request for Verification of Current Employment

## Need #'s 9, 10 & 26-30 Only

**Privacy Act Notice:** This information is to be used by the agency collecting it and 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:** **Lender** – Complete items 1 through 7. Have applicant(s) complete item 8. Forward directly to the employer named in item 1. **Employer** – Please complete either Part II or Part III as applicable. Complete Part IV and return DIRECTLY to lender named in item 2. **The form is to be transmitted directly to the lender and is not to be transmitted through the applicant(s) or any other party.**

### Part I – Request

1. To (Name and address of employer)   Employer Phone:	2. From (Name and address of lender) <b>Triad Financial Services, Inc.</b> <b>13901 Sutton Park Drive South, Suite 300</b> <b>Jacksonville, FL 32224</b>  Phone: <b>800-522-2013 x 1635</b> Fax: <b>888-733-1522</b>
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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. Signature of Lender	4. Title	5. Date	6. Lender's No. (Optional)
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I have applied for a mortgage loan 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      Social Security #	8. Signature of Applicant <b>Signature On File</b> <b>X</b>
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### Part II – Verification of Present Employment

9. Applicant's Date of Employment <b>//</b>	10. Present Position	11. Probability of Continued Employment
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12A. Current Gross Pay Base (Enter Amount and Check Period)				13. For Military Personnel Only		14. If overtime or Bonus is Applicable, is its Continuance likely?	
\$ _____ <input type="checkbox"/> Annual <input type="checkbox"/> Weekly <input type="checkbox"/> Other (specify) <input type="checkbox"/> Monthly <input type="checkbox"/> Hourly <input type="checkbox"/>				Pay Grade		Overtime <input type="checkbox"/> Yes <input type="checkbox"/> No Bonus <input type="checkbox"/> Yes <input type="checkbox"/> No	
				Type	Monthly Amount		
12B. Gross Earnings				Rations		15. If paid hourly – avg. hours per week	
Type	Year to Date	Past Year	Past Year	Flight or Hazard	16. Date of applicant's next pay increase		
Base Pay				Clothing		17. Projected amount of next pay increase	
Overtime				Quarters		18. Date of applicant's last pay increase	
Commissions				Pro Pay		19. Amount of last pay increase	
Bonus				Overseas or Combat			
Total				Variable Housing Allowance			

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

### Part IV – Authorized Signature

Federal statutes provide severe penalties for any kind of 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. Please print or type name signed in item 26.	30. Phone No.	

**For Your Customer. For You. For More Than 60 Years.**