



REAL ESTATE VERIFICATION



Send To: _____

Applicant/Tenant: _____ Unit #: _____

Soc. Security #: _____

Property Name: _____

Address: _____

I hereby authorize release of my real estate value information: _____
Tenant Signature Date

Please list all owners of property: _____

Property Location (street address) _____

To be completed by Tax Assessor:
Year Assessed: _____ Assessed Value: _____ % of Fair Market Value: _____
Taxed @: \$ _____ /\$1000 or \$ _____ for tax year: _____
What is the current Market Value? \$ _____
Has this property been sold or transferred within the last 24 months? Yes No
Date of Sale or Transfer: _____ @ _____ % of Fair Market Value

AUTHORIZED SIGNATURE OF PERSON SUPPLYING INFORMATION

Print Name: _____ Title: _____
Signature: _____ Date: _____
Telephone: _____

RETURN TO: _____

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.

****OFFICE USE ONLY****

Date Sent: _____ By: _____

Date Returned: _____

Comments: _____