



Verification of Employment

4870 Viewridge Ave. #100
San Diego, CA 92123
866.344.8935
ResCapInfo.com

PRIVACY ACT NOTICE: Privacy Act Notice: This information is to be used by the agency collecting it 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 complete item 8. Forward directly to 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 or any other party.

Part I - Request

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|--------------------------------------|--|
| 1. To (Name and address of employer) | 2. From (Name and address of lender) Residential Capital 4870 Viewridge Avenue San Diego, CA 92123 |
|--------------------------------------|--|

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) |
|------------------------|----------|---------|----------------------------|

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 (include employee or badge number) | 8. Signature of Applicant |
|---|---------------------------|

Part II - Verification of Present Employment

| | | |
|-----------------------------------|----------------------|---|
| 9. Applicant's Date of Employment | 10. Present Position | 11. Probability of Continued Employment |
|-----------------------------------|----------------------|---|

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|--|---------------------------------|------|--|
| 12A. Current Gross Base Pay (Enter Amount and Check Period) \$ <input type="checkbox"/> Annual <input type="checkbox"/> Hourly <input type="checkbox"/> Monthly <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Weekly <input type="checkbox"/> | 13. For Military Personnel Only | | 14. If Overtime or Bonus is Applicable Is Its Continuation Likely? Overtime <input type="checkbox"/> Yes <input type="checkbox"/> No Bonus <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Pay Grade | Type | |

| 12B. Gross Earnings | | | | Rations | \$ | 15. If paid hourly-average hours per week |
|---------------------|---------------|----------------|----------------|----------------------------|----|---|
| Type | Year To Date | Past Year ____ | Past Year ____ | | | |
| Base Pay | \$ Thru _____ | \$ | \$ | Flight or Hazard | \$ | 16. Date of applicant's next pay increase |
| Overtime | \$ | \$ | \$ | Clothing | \$ | |
| Commissions | \$ | \$ | \$ | Quarters | \$ | 17. Projected amount of next pay increase |
| Bonus | \$ | \$ | \$ | Pro Pay | \$ | |
| Total | \$ | \$ | \$ | Overseas or Combat | \$ | 18. Date of applicant's last pay increase |
| | | | | 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 Employments

| | | | | |
|------------------------|--|----------|-------------------|-------|
| 21. Date Hired | 23. Salary/Wage at Termination Per (Year) (Month) (Week) | | | |
| 22. Date Terminated | Base | Overtime | Commissions | Bonus |
| 24. Reason for Leaving | | | 25. Position Held | |

Part IV - Authorized Signature

Federal statutes provide severe penalties for any 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. Print or type name signed in Item 26 | 30. Phone No. | |