

VERIFICATION FORMS CHECKLIST

Due Date: _____

Initial Certification: _____

Annual Certification: _____

Name(s) of Applicant/Tenant: _____

Address: _____

| Source | Date Sent | Second Notice Sent | Date Received | Date Called |
|---|-----------|--------------------|---------------|-------------|
| Employment Verification | | | | |
| Asset Verification | | | | |
| Certificate of Deposit | | | | |
| Documentation of Telephone Verification | | | | |
| College/University | | | | |
| Military Employment | | | | |
| Social Security | | | | |
| Veterans Administration | | | | |
| Department of Human Services (DHS) | | | | |
| Insurance Benefits | | | | |
| Copy of 1040 (Previous Year) | | | | |
| Real Estate Property | | | | |
| Unemployment Benefits | | | | |
| Workman's Compensation | | | | |
| No Income Verification | | | | |
| HUD Section 8 Tenant Release and Consent Form | | | | |
| Self Employment | | | | |
| Alimony | | | | |
| Child Support | | | | |
| Monetary Contribution | | | | |
| Retirement (Pension) | | | | |
| High School | | | | |