

Date: [Date]

To:

[Financial Institution Name]

[Institution Address]

[City, State, Zip Code]

Subject: Verification of Deposit for FHA Loan Application

To Whom It May Concern,

The applicant(s) listed below has applied for a mortgage loan insured by the Federal Housing Administration (FHA). We request your assistance in verifying the deposit accounts for this applicant.

Applicant Information:

- **Name:** [Applicant Name]
- **Address:** [Applicant Address]
- **Social Security Number:** [Last 4 Digits or Full SSN]
- **Account Number(s):** [Account Number 1, Account Number 2]

To be completed by Financial Institution:

Please provide the following information regarding the accounts listed above:

Type of Account	Account Number	Current Balance	Average Balance (Past 2 Months)	Date Opened
[Type]	[Number]	[\$[Amount]]	[\$[Amount]]	[Date]
[Type]	[Number]	[\$[Amount]]	[\$[Amount]]	[Date]

Additional Information:

Are there any outstanding loans against these accounts? [Yes/No]

If yes, please provide the balance and terms: [Details]

Authorized Signature:

[Name of Bank Representative]

[Title]

[Phone Number]

Applicant Consent:

I hereby authorize the release of the requested information to [Lending Institution Name].

[Applicant Signature]

[Date]

Please return this form directly to:

[Lender Name/Company]

[Lender Address]

[Lender Email/Fax]