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| --- | --- |
| Resident/Applicant Name |  |
| Unit Number (if Resident) |  |
| Verification Used For | Eligibility for Residency/Assistance  Annual Certification  Interim Certification  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Verification Statement | |
| *“Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.  HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form.  Use of the information collected based on this verification form is restricted to the purposes cited above.  Any person who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than $5,000.  Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use.  Penalty provisions for misusing the social security number are contained in the Social Security Act at 208 (a) (6), (7) and (8).  Violation of these provisions are cited as violations of 42 U.S.C.  408 (a) (6), (7) and (8).* | |
| Name or Type of Document | Direct Express Card |
| Last 4 Numbers on Card |  |
| Name of Document Provider | Federal Government |
| Is a copy of the document in the file? | X No |
| If no, explain why document was not copied: | The document was not copied because the owner/agent did not want to maintain a document with the complete card/account number in the file in compliance with federal security recommendations. This document is used in compliance with verification instruction provided in HH 4350.3 R1, C4, Paragraph 5-18. |
| Notes: The applicant/resident indicated above provided a copy of a current ATM receipt or online balance statement for the Direct Express Account. A copy of an ATM receipt or online balance statement showing the current balance is attached. Because the ATM receipt or online balance statement does not provide all required information (the name of the recipient or the complete account number), the OA has reviewed the Direct Express card to make sure the last four characters on the card match the last four characters on the ATM receipt or online balance statement. The OA is using the current balance shown on the ATM receipt or online balance statement to verify the amount to use as the asset value of the Direct Express account in accordance with RHIIP ListServ 296. | |

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_