

Active Military Documents Needed

- Copy last two LES pay statements
- LES must show Home of Residence as "Texas" (or fill out VA Form DD2058)*
- Copy of paycheck stubs for 30 days (for any non military borrowers)
- Copy of W2's from 2007 & 2008
- Copy of PCS orders to Texas
- Copy of current "Service Statement" (obtain from base personnel, or online)
- VA Certificate of Eligibility (fill out VA form 26-1880)*
- Texas Vet Forms filled out* (Notarized signature not necessary)
- Copy of any asset statements (IRA, 401, TSP, Money Market) (all pages)
- Copy of last two months Checking Statements (all pages) (must have your name on)
- Copy of last two months Savings Statements (all pages) (must have your name on)
- Copy of Drivers License (all borrowers)
- Copy of Social Security cards (all borrowers) (or Military ID both sides)
- Check for VA Appraisal made out to United Lending for \$400.00

* Forms can be downloaded from www.texas-vet-loans.com

Please fax all documents to me at the below listed fax number, or my staff can copy these documents, should it be more convenient for you to bring them to us at our office. We do not need originals on anything. **Thanks for the opportunity to serve you.**

The Fitzgerald Team

PrimeLending

270 N Loop 1604 E # 310 | San Antonio, TX 78232-1272
Office (210) 483-4900 | Mobile (210) 862-6296
Fax (877) 877-9028

Pat@PrimeLending.com



VERIFICATION OF VA BENEFITS

PRIVACY ACT NOTICE: The VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 5, Code of Federal Regulations 1.526 for routine uses (i.e., information concerning a veteran's indebtedness to the United States by virtue of a person's participation in a benefits program administered by VA may be disclosed to any third party, except consumer reporting agencies) as identified in the VA system of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant Records, Specially Adapted Housing Applicant Records and Vendee Loan Applicant Records - VA, and published in the Federal Register. Your obligation to respond is required to obtain or retain benefits. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. The VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by a Federal Statute of law in effect prior to January 1, 1975, and still in effect.

TO: NAME AND ADDRESS OF LENDER (Complete mailing address including ZIP Code)

INSTRUCTIONS TO LENDER

Complete this form ONLY if the veteran/applicant:

- is receiving VA disability payments; or
- has received VA disability payments; or
- would receive VA disability payments but for receipt of retired pay; or
- is surviving spouse of a veteran who died on active duty or as a result of a service-connected disability
- has filed a claim for VA disability benefits prior to discharge from active duty service

Complete Items 1 through 10. Send the completed form to the appropriate VA Regional Loan Center where it will be processed and returned to the Lender. The completed form must be retained as part of the lender's loan origination package.

1. NAME OF VETERAN (First, middle, last)	2. CURRENT ADDRESS OF VETERAN
3. DATE OF BIRTH	
4. VA CLAIM FOLDER NUMBER (C-File No., if known)	5. SOCIAL SECURITY NUMBER
	6. SERVICE NUMBER (If different from Social Security Number)

7. HEREBY CERTIFY THAT I DO DO NOT have a VA benefit-related indebtedness to my knowledge. I authorize VA to furnish the information listed below.

8. HEREBY CERTIFY THAT I HAVE HAVE NOT filed a claim for VA disability benefits prior to discharge from active duty service (I am presently still on active duty.)

9. SIGNATURE OF VETERAN

10. DATE SIGNED

FOR VA USE ONLY

The above named veteran does not have a VA benefit-related indebtedness

The veteran has the following VA benefit-related indebtedness

VA BENEFIT-RELATED INDEBTEDNESS (If any)

TYPE OF DEBT(S)	AMOUNT OF DEBT(S)

TERM OF REPAYMENT PLAN (If any)

Veteran is exempt from funding fee due to receipt of service-connected disability compensation of \$ _____ monthly. (Unless checked, the funding fee receipt must be remitted to VA with VA Form 26-1820, Report and Certification of Loan Disbursement)

Veteran is exempt from funding fee due to entitlement to VA compensation benefits upon discharge from service.

Veteran is not exempt from funding fee due to receipt of nonservice-connected pension of \$ _____ monthly. LOAN APPLICATION WILL REQUIRE PRIOR APPROVAL PROCESSING BY VA.

Veteran has been rated incompetent by VA. LOAN APPLICATION WILL REQUIRE PRIOR APPROVAL PROCESSING BY VA.

Insufficient information. VA cannot identify the veteran with the information given. Please furnish more complete information, or a copy of a DD Form 214 or discharge papers. If on active duty, furnish a statement of service written on official government letterhead, signed by the adjutant, personnel officer, or commanding officer. The statement should include name, birth date, service number, entry date and time lost.

SIGNATURE OF AUTHORIZED AGENT

DATE SIGNED

Respondent Burden: We need this information to determine, establish, or verify your eligibility for VA Loan Guaranty Benefits and to determine if you are exempt from paying the VA Funding Fee. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 5 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.whitehouse.gov/library/omb/OMBINVC.html#VA. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

Department of Veterans Affairs		TO	Department of Veterans Affairs Eligibility Center P.O. Box 20729 Winston-Salem, NC 27120			
REQUEST FOR A CERTIFICATE OF ELIGIBILITY						
NOTE: Please read information on reverse before completing this form. If additional space is required, attach a separate sheet.						
1. FIRST-MIDDLE-LAST NAME OF VETERAN		2. DATE OF BIRTH	3. VETERAN'S DAYTIME TELEPHONE NO.			
4. ADDRESS OF VETERAN (No., street or rural route, city or P.O., State and ZIP Code)		5. MAIL CERTIFICATE OF ELIGIBILITY TO: (Complete ONLY if the Certificate is to be mailed to an address different from the one listed in Item 4)				
6. MILITARY SERVICE DATA (ATTACH PROOF OF SERVICE - SEE PARAGRAPH "D" ON REVERSE)						
A. ITEM	B. PERIODS OF ACTIVE SERVICE		C. NAME (Show your name exactly as it appears on your separation papers or Statement of Service)	D. SOCIAL SECURITY NUMBER	E. SERVICE NUMBER (If different from Social Security No.)	F. BRANCH OF SERVICE
	DATE FROM	DATE TO				
1.						
2.						
3.						
7A. WERE YOU DISCHARGED, RETIRED OR SEPARATED FROM SERVICE BECAUSE OF DISABILITY OR DO YOU NOW HAVE ANY SERVICE-CONNECTED DISABILITIES? <input type="checkbox"/> YES <input type="checkbox"/> NO (If "Yes," complete Item 7B)				7B. VA CLAIM FILE NUMBER C-		
8. PREVIOUS VA LOANS (Must answer N/A if no previous VA home loan. DO NOT LEAVE BLANK)						
A. ITEM	B. TYPE (Home, Refinance, Manufactured Home, or Direct)	C. ADDRESS OF PROPERTY	D. DATE OF LOAN	E. DO YOU STILL OWN THE PROPERTY? (YES/NO)	F. DATE PROPERTY WAS SOLD (Submit a copy of HUD-1, Settlement Statement, if available)	G. VA LOAN NUMBER (If known)
1.						
2.						
3.						
4.						
5.						
6.						
I CERTIFY THAT the statements herein are true to the best of my knowledge and belief.						
9. SIGNATURE OF VETERAN (Do NOT print)					10. DATE SIGNED	
FEDERAL STATUTES PROVIDE SEVERE PENALTIES FOR FRAUD, INTENTIONAL MISREPRESENTATION, CRIMINAL CONNIVANCE OR CONSPIRACY PURPOSED TO INFLUENCE THE ISSUANCE OF ANY GUARANTY OR INSURANCE BY THE SECRETARY OF VETERANS AFFAIRS.						
FOR VA USE ONLY						
11A. DATE CERTIFICATE ISSUED				11B. SIGNATURE OF VA AGENT		

Texas Veterans Housing Assistance and Home Improvement Programs



Request for Certification

To be eligible to participate in the Texas Veterans Land Board (VLB) programs, the applicant must have successfully repaid any previous VLB loan. A loan is considered repaid when the account has been paid in full by the original veteran purchaser or last approved assignee. Any active VLB loans in programs other than the one for which application is being made must be in good standing.

Name of Veteran	Last	First	Middle	Date
Current Address	Street or P.O. Box			Social Security Number
	City	State	Zip + Four	Date of Birth

Name of Lender (Housing loans only)	PrimeLending	Pat Fitzgerald	Kristian Tiver
		Loan Officer	Loan Processor

Address	270 N Loop 1604 E # 310	(210) 483-4900
	Street or P.O. Box	Telephone
	San Antonio	TX
	City	State
	Zip + Four	(877) 877-9028
		Fax (Required)

shellie@primelendign.com

Lender Email Address (Required)

Loan Information: Texas Veterans Housing Assistance Program Texas Veterans Home Improvement Program

Term _____ Amount _____

Special Programs: You may qualify for an interest rate discount in the Veterans Housing Assistance and Home Improvement Loan Programs. Ask your lender about a discount available for Veterans with disabilities.

Note: All completed documentation supporting requests for the Veterans with Disabilities Discount must be submitted to the lender at the time of loan application.

Ethnicity (Optional) White Black Hispanic Native American Asian Other

Form 41: Rev. 8/07/08

Texas Veterans Housing Assistance
and Home Improvement Programs



Veteran's Declaration of Eligibility

Please type or print.

Name of Veteran	_____			_____
	Last	First	Middle	Date
Address	_____			_____
	Street or P.O. Box			Social Security Number
	_____	_____	_____	_____
	City	State	Zip Code	Date of Birth
	_____	_____	_____	_____
	Home Phone	Work Phone	Fax Phone	

Are you currently a member of a Reserve or National Guard Unit, or still subject to recall as a member of the Selected Reserve or Individual Ready Reserve (IRR)? Yes No

If yes, indicate which. (Give name of unit and location, if applicable.)

I, _____ (print name), _____ (Social Security number), hereby declare that I am applying for a loan under the Texas Housing Assistance or Home Improvement Program as a qualified veteran under the provisions of the Veterans Housing Assistance Act, and that I desire to purchase, or improve, as the case may be, and hold said home for myself and for no other person. Further, I have made no agreement to transfer or convey my interest in the home purchased or improved under this program to anyone else. I understand that I must occupy the home purchased or improved under this program as my principal residence for a period of three years from the date of the improvement or purchase of the home. I also understand that if I lease, transfer, sell or convey in whole or in part my interest in the home, the Texas Veterans Land Board (VLB) may escalate the interest rate on the loan or accelerate the principal and interest due on the loan, and/or pursue such other remedy or course of action as the VLB may deem appropriate and in the best interest of the program. I fully understand that my application will be subject to cancellation for making any false statement herein.

Veteran's Signature

Required Veteran's Questionnaire:

How did you learn about VLB loan programs? Please check one.

- | | | |
|--|--|---|
| <input type="checkbox"/> Veterans Service Officer | <input type="checkbox"/> VLB Exhibit | <input type="checkbox"/> Television |
| <input type="checkbox"/> Texas Veterans Commission | <input type="checkbox"/> Sign/Billboard | <input type="checkbox"/> Radio |
| <input type="checkbox"/> VLB Seminar | <input type="checkbox"/> Friend/Relative | <input type="checkbox"/> Lender |
| <input type="checkbox"/> VLB Internet Website | <input type="checkbox"/> VLB Employee | <input type="checkbox"/> Realtor |
| <input type="checkbox"/> VLB Newsletter "Veterans Voice" | <input type="checkbox"/> VLB Postcard | <input type="checkbox"/> Newspaper Ad |
| <input type="checkbox"/> Veterans Organization | <input type="checkbox"/> VLB Letter | <input type="checkbox"/> Other (please specify) |

Form 42: Rev. 8/07/08

