

# DISPOSED OF ASSETS VERIFICATION

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

## THIS SECTION TO BE COMPLETED BY APPLICANT

1. Has any member of your household sold or otherwise disposed of any asset during the past two years?  Yes .  No
2. If the answer to No. 1 is "no", no further action is required.  
If the answer to No. 1 is "yes", was this asset disposed of due to foreclosure, bankruptcy, divorce or separation settlement?  Yes .  No
3. If the answer to No. 2 is "Yes", no further action is required.  
If the answer to No. 2 is "No", please continue:
  - a. Describe the asset: \_\_\_\_\_
  - b. The fair market value of the asset was: \$ \_\_\_\_\_  
(attach copy of most recent tax bill and/or real estate comparability study)
  - c. The fair market value of this asset was determined by: \_\_\_\_\_
  - d. This asset was sold or disposed of for: \$ \_\_\_\_\_
  - e. The documentation providing proof of the amount of sale is: \_\_\_\_\_  
(attach support documentation)

## THIS SECTION TO BE COMPLETED BY METRO GOVERNMENT

Calculation of disposed asset:

A. Amount on line 3b: \$ \_\_\_\_\_

B. Less the amount on line 3d: \$ \_\_\_\_\_

C. Equals Total      \$ \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_  
(Current HUD passbook rate)

\*Total income from the asset disposed of for less than fair market value.

Signature

Title

Date

**WARNING:** Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful, false statements of misrepresentation to any department or agency of the U.S. or to any matter within its jurisdiction.