## Appendix B Home Ownership Application

## **BANK VERIFICATION FORM**

It is the responsibility of the applicant to have this two page form completed by a bank, trust company or credit union and to ensure is it returned to the County of Oxford. Each financial institution must complete one form. If more than one form is required, please photocopy this blank form or contact the County of Oxford.

This form is for verification of income producing assets listed below. If you have other types of income producing or non-income producing assets, please contact the County of Oxford regarding proper

verification.

I				(and)			
residing at that the information red homeownership applica		ow be given	to the	County of Oxford as red	quired und	_ hereby authori er the terms of r	ze my
Applicant Signature	Applicant Signature			Applicant Signature		Date	
household income. Ple All information will rem	of Oxford's ase provide	all available		Ownership Program is banation as requested for th			
Saving/Chequing Accounts  Account Number Balar		nce (\$)	e (\$) Current Interest Rate (%)		Interest Earned in the Past 12 Months (\$)		
Direct Deposits (i.e. Pension	n Cheques	s) Made to	Abov	e Account(s)			
Source			Amount	Monthly/Weekly			
Term Deposits, Investment	Certificate	s, Canada	Savi	ngs Bonds, etc.			
Security	Valu	ue (\$)	Cı	urrent Interest Rate (%)		t Earned in the t 12 Months	Maturity Date mm/dd/yyyy
	1		1		1		1

Registered Retirement Savings Plans (RRSP's)							
Registration Number	Value (\$)	Interest Rate (%)	Type of R.R.S.P.	Valuation Date mm/dd/yyyy			

Financial Institution Seal or Stamp:	Name of Financial Institution:
	Address:
	Authorized Signature:
	Position:

Phone Number:

Date: