the Chickasaw Nation
Department of Community Services / Housing Division
111 Rosedale Road / Ada, OK 74820 / (580) 421-8800 / Fax: (580) 421-8885
Post Office Box 788 / Ada, OK 74821

Chris Anoatubby
Governor

Banking Verification

Applicant/tenant information: Date: _____

Name: _____
First Middle Last Suffix

Social Security no.: _____

Name: _____
First Middle Last Suffix

Social Security no.: _____

Mailing address: _____
Street City State ZIP

Physical address: _____
Street City State ZIP

Account no: _____

I hereby grant **the Chickasaw Nation Housing Division** permission to make inquiries regarding my income and assets. I understand that this information will be kept confidential.

_____ _____
Applicant/tenant signature Date

_____ _____
Applicant/tenant signature Date

****TO BE COMPLETED BY YOUR BANKING INSTITUTION****

Current checking account balance: _____

Interest rate paid: _____

Interest received in the past 12 months: _____

Current savings account balance: _____

Interest rate paid: _____

Interest received in the past 12 months: _____

Amount of savings certificates: _____

Interest rate paid: _____

Interest received in the past 12 months: _____

Name of institution: _____

Address: _____ Phone no.: (_____) _____

Completed by: _____ Title: _____ Date: _____

_____
Housing representative