



HTC Form 900
VERIFICATION OF UNEMPLOYMENT BENEFITS

The individual named below has applied for a rental housing unit located in a development which has been allocated housing tax credits from the Wisconsin Housing and Economic Development Authority. Eligibility of prospective residents must be verified by third-party sources. Please provide the information requested below. We ask your cooperation in supplying the requested information. If you have any questions about this request, please contact _____ at _____.

I do hereby authorize the release by the Employment Security Commission of any information received from me which they have in their files. This information is to be released to _____.

Signature Social Security Number Date

- 1. Are benefits being paid now? () YES () NO
2. If yes, what is weekly benefit amount? \$
3. When did/will benefits start?
4. What is the balance of benefits available?
5. If benefits have expired, when did they expire?
6. Is recipient eligible for extended benefits?
7. Remarks:

Completed by Date
Title Phone

PLEASE RETURN TO:

Attn: