



State of North Carolina

OFFICE OF THE COMMISSIONER OF BANKS

Verification of Deposit Account

Instruct the financial institution to send this form VIA Email to vod@nccob.gov on or before March 31st, with the subject line: 10K Liquid Asset Verification [your company name and NMLS ID number].

Date: ____/____/____

Dear Mortgage Broker,

Pursuant to North Carolina Administrative Code Rules 04 NCAC 03M .0205(a)(2)(C) and .0401(a), mortgage brokers, as part of their annual reporting requirements, must provide certification from an FDIC-insured financial institution that a demand deposit account in the broker's name exists and has continuously maintained an account balance of \$10,000 or more.

To fulfill this requirement, please have your financial institution complete, sign, and submit the following:

Financial Institution: _____
Account in the name of: _____
Account Type (e.g. Checking or Savings): _____
Account Number: _____
Current Account Balance: _____
Account Open Date: ____/____/____
Has the mortgage broker continuously maintained an account balance of \$10,000 or more?
Yes <input type="checkbox"/> No <input type="checkbox"/>

The undersigned represent and acknowledge that the information contained herein is current, true and complete. In addition, the employee signing on behalf of the financial institution should have the authorization to do so. This information will be relied upon by the Commissioner of Banks.

_____/_____
(Signature of Financial Institution Employee) / *Print Name*

_____/_____
(Name of Company) / *NMLS ID #*

_____/_____
(Signature of Qualifying Individual) / *Print Name*

LOCATION: 316 W. EDENTON STREET, RALEIGH, NC 27603
MAILING ADDRESS: 4309 MAIL SERVICE CENTER, RALEIGH, NC 27699-4309
(919) 733-3016 FAX (919) 733-6918 INTERNET: WWW.NCCOB.GOV
AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER