Bank Reference Letter For Residential Use Only **Please take this form to your bank**

Building Name:		
Customer Name :	Signature	
Bank Name:	Last 4 Digits of Account#:	
Bank Address:		
City:State/Province:_	Country:Postal Code:	
Bank Reference Phone:	Bank Reference Fax:	
Attention Credit Department or Officer:		
The above person has listed your bank as	as its principal banking reference.	
	ck mark below your estimate of this account. This informatio used only for our purposes of residential approval. Custome	
Saving	ing-Account Account is: Satisfactory ngs Account Unsatisfactory Account Closed Date:	
Honest and Unknown to	customer with a good reputation and financial responsibility d reliable, but limited capital resources to us tomer – our experience is limited	
Average Balances for six months are:	Low 3 figures Moderate 4 figures Medium 5 figures High 6 figures	
Remarks:	ONegative Balance	
Signature of Bank Official:	Title:	
Print Name:	Date: Phone:	
Thank you for your assistance.	Please place the official Bank Stamp Here:	
Applycheck LLC Customer Services 57 W Timonium Road, Suite 105A Lutherville-Timonium, MD 21093 (786) 542-6834		

Please send the completed form by email: apply@applycheck.com by fax: 786-475-7840