



WELLS
FARGO

HOME
MORTGAGE

Union Membership Verification Form

This form must be completed and submitted with your loan application package to Wells Fargo Home Mortgage in order to be eligible for the **Union Plus®** Mortgage program.

Please complete, sign, and provide this form to your local union so that a union representative can verify your membership.

Please mark the appropriate box:

- ☐ I am an active or retired union member
- ☐ I am the parent or child of an active or retired union member
- ☐ I am the spouse or domestic partner of a union member

Union member eligibility

I, _____ verify I have been a member in good standing
of _____ local# _____ since _____.
(Name of union) (Month / Year)

I understand if I voluntarily leave the union, not as a result of layoff, union-sanctioned strike or lock-out, I and any eligible family member will no longer be eligible for the Mortgage Assistance Program. I also understand that if this form is incomplete, illegible, information provided is inaccurate, or if it is determined that the union to which I belong does not participate in the **Union Plus®** Mortgage Program, I will not receive the program benefits offered by Wells Fargo Home Mortgage and Union Privilege. Union Privilege, the administrator of the Mortgage Assistance Program, requires verification of union membership for all benefit requests.

(Signature)

(Date)

(Union member's current address: street, city, zip code)

Family member eligibility

Complete this information only if this mortgage is for an eligible union member's child, parent, spouse, or domestic partner.

I, _____, verify _____
(Union member's name) (Name of mortgage applicant)

is my _____.
(Relationship to you)

(Signature)

(Date)

Attention local union representative

Please complete this section promptly and return this form to the union member/applicant. This form is required for the union member's mortgage application in order to qualify for a **Union Plus®** Mortgage provided by Wells Fargo Home Mortgage.

I verify the information supplied by the union member, whose name and signature appear on this form, is true and complete to the best of my knowledge and the union member is a member of a union that participates in the Union Plus Mortgage program.¹

(Signature of local union representative)

(Date)

(Printed name of local union representative)

(Phone number)

Local union information

(Street address)

(City)

(State)

(Zip code)

(Local president's name)

For WFHM use only

(HMC's name)

(HMC's phone number)

(HMC's fax number)

(HMC's loan number)

(International union name)

(Union code)

1. A majority of AFL-CIO affiliated unions and the Change to Win unions (IBT, SEIU, UFW and UFCW) participate in the **Union Plus** Mortgage Program. Independent unions not affiliated with the AFL-CIO or Change to Win are not eligible.

Union Plus® is a registered trademark of Union Privilege.

