OMB Control No. 2900-0086
Respondent Burden: 15 minutes

Department of Veterans Affairs

REQUEST FOR A CERTIFICATE OF ELIGIBILITY

TO

Department of Veterans Affairs
Eligibility Center
P. O. Box 20729
Winston-Salem, NC 27120

NOTE: Please read information on reverse before completing this form. If additional space is required, attach a separate sheet.

1. FIRST-MIDDLE-LAST NAME OF VETERAN	2. DATE OF BIRTH	3. VETERAN'S DAYTIME TELEPHONE NO.

4A. ADDRESS OF VETERAN *(No., street or rural route, city or P.O. State and ZIP Code)*	5. MAIL CERTIFICATE OF ELIGIBILITY TO: *(Complete ONLY if the Certificate is to be mailed to an address different from the one listed in Item 4A)*
4B. E-MAIL ADDRESS OF VETERAN *(If applicable)*	

6. MILITARY SERVICE DATA ***(ATTACH PROOF OF SERVICE - SEE PARAGRAPH "D" ON REVERSE)***

A. ITEM	B. PERIODS OF ACTIVE SERVICE DATE FROM	B. PERIODS OF ACTIVE SERVICE DATE TO	C. NAME *(Show your name exactly as it appears on your separation papers or Statement of Service)*	D. SOCIAL SECURITY NUMBER	E. SERVICE No. *(If different from Social Security No.)*	F. BRANCH OF SERVICE
1.						
2.						
3.						
4.						

7A. WERE YOU DISCHARGED, RETIRED OR SEPARATED FROM SERVICE BECAUSE OF DISABILITY OR DO YOU NOW HAVE ANY SERVICE-CONNECTED DISABILITIES?	7B. VA CLAIM FILE NUMBER
☐ YES ☑ NO *(If "Yes," complete Item 7B)*	C -

8. PREVIOUS VA LOANS ***(Must answer N/A if no previous VA home loan. DO NOT LEAVE BLANK)***

A. ITEM	B. TYPE *(Home, Refinance, Manufactured Home, or Direct)*	C. ADDRESS OF PROPERTY	D. DATE OF LOAN	E. DO YOU STILL OWN THE PROPERTY? *(YES/NO)*	F. DATE PROPERTY WAS SOLD *(Submit a copy of HUD-1, Settlement Statement, if available)*	G. VA LOAN NUMBER *(If known)*
1.						
2.						
3.						
4.						
5.						
6.						

I CERTIFY THAT the statements herein are true to the best of my knowledge and belief.

9. SIGNATURE OF VETERAN *(Do NOT print)*	10. DATE SIGNED

FEDERAL STATUTES PROVIDE SEVERE PENALTIES FOR FRAUD, INTENTIONAL MISREPRESENTATION, CRIMINAL CONNIVANCE OR CONSPIRACY PURPOSED TO INFLUENCE THE ISSUANCE OF ANY GUARANTY OR INSURANCE BY THE SECRETARY OF VETERANS AFFAIRS.

FOR VA USE ONLY

11A. DATE CERTIFICATE ISSUED	11B. SIGNATURE OF VA AGENT