



VETERANS AID LOAN APPLICATION
 NORTH DAKOTA DEPARTMENT OF VETERANS AFFAIRS
 SFN 54411 (05-2024)

Office Use Only

Application Number
Application Date
County/Tribe

APPLICANT INFORMATION

Name		Date of Birth		Social Security Number	
Telephone Number		Email Address			
Address		City		State	ZIP Code
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		Number of Dependents	Age(s) of Dependents		Residence <input type="checkbox"/> Own <input type="checkbox"/> Rent
Resident of North Dakota <input type="checkbox"/> Yes <input type="checkbox"/> No		How Long (ND Resident)		Name of Nearest Relative Not Living With You	
Relative's Address		City		State	ZIP Code

VETERAN INFORMATION

Date Enlisted	Place Enlisted	Veteran's Social Security Number, if not provided as Applicant	
Date Discharged	Place Discharged	Type of Discharge	

APPLICANT EMPLOYMENT/INCOME INFORMATION

Present Employer	Name of Supervisor		Telephone Number
Position Held	Length of Time in Position		Monthly Salary
Employer Address	City		State ZIP Code

SPOUSE EMPLOYMENT/INCOME INFORMATION

Name of Spouse			
Present Employer	Name of Supervisor		Telephone Number
Position Held	Length of Time in Position		Monthly Salary
Employer Address	City		State ZIP Code

OTHER INCOME

Benefit	Veteran	Spouse	Total	Benefit	Veteran	Spouse	Total
VA Compensation				Workers Compensation			
VA Pension				Unemployment Compensation			
VA Education				Retirement			
Social Security				Pension			
SSI / SSDI				Other (rental, alimony, etc.)			

Your social security number is requested to enable the ND Department of Veterans Affairs to conduct credit checks and verify military service pursuant to N.D.C.C. sections 37-14-01.1 and 37-14-10 to determine eligibility for a Veterans Aid Loan. Disclosure of your social security number is mandatory. If you do not provide your social security number, the ND Department of Veterans Affairs will be unable to conduct a credit check and will decline to process your application.

ASSETS

Vehicle Make/Model/Year	Value

Property Owned	Address	Value

LIABILITIES/OBLIGATIONS

Liability Type	Name of Creditor (payment to)	Monthly Payment	Balance
Rent/Mortgage			
Car Payment			
Car Insurance			
Health Insurance			
Utilities			
Telephone			
Personal Loan			
Alimony/Child Support			
Delinquent Taxes <input type="checkbox"/> Yes <input type="checkbox"/> No			
Charge Accounts/Credit Cards <i>(If needed, attach a separate list)</i>			

Ever Filed Bankruptcy <input type="checkbox"/> Yes <input type="checkbox"/> No	When
Type	Date Discharged

Total Monthly Expenses

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Monthly Income

--

Less Expenses

--

Un-Obligated Amount

--

I affirm that I am not required to file taxes.

Applicant Initials

PURPOSE FOR THE LOAN

Explain (NOT TO BE USED FOR DEBT CONSOLIDATION NOR CHILD SUPPORT)

APPLICANT ACKNOWLEDGMENT OF LOAN REPAYMENT

INSTRUCTIONS: *Initial before every statement. Full signature and date are required where designated.*

- _____ 1. I understand all statements made on the application must be true and correct. I understand false statements will be considered fraudulent and subject to prosecution.

- _____ 2. I understand repayment of the loan must be made each month and that payments may be made in advance of time agreed to on the signed note.

- _____ 3. I understand the importance of timely repayment in order that some other worthy applicant could be assisted from this revolving fund and in the event of default, *legal action shall be taken when payments become delinquent as determined by the Loan Officer.*

- _____ 4. I understand in order to receive one-half the interest refund that the loan and fees must be paid by final due date.

- _____ 5. I understand the North Dakota Department of Veterans Affairs must be notified of any change of address and employment immediately.

- _____ 6. I understand the department may assess and collect any late payments penalties of up to \$15.00 for each late payment as well as a fee for any NSF item received by North Dakota Department of Veterans Affairs.

I hereby attest that to the best of my knowledge the answers to the above questions are true and correct. I state that I need additional financial assistance at this time and application is made to the Department of Veterans Affairs for a loan in the amount specified below:

Loan Amount

I UNDERSTAND THE LOAN IS TO BE USED FOR THE PURPOSE STATED AND SHALL BE REPAYED TO THE DEPARTMENT OF VETERANS AFFAIRS AT FARGO, NORTH DAKOTA WITHIN A SPECIFIED PERIOD NOT TO EXCEED FOUR YEARS FROM THE DATE THE LOAN IS GRANTED, using the following percentage of interest:

Interest Rate

One-half of the interest shall be waived if the loan and fees are paid by the final due date. Interest will be adjusted at the end of the loan period.

I hereby authorize the United States Veterans Administration, Job Service of North Dakota, North Dakota State Tax Department, North Dakota Workforce Safety and Insurance, financial institutions and any other credit sources to disclose to the Veteran Service Officer assisting in the preparing of this application and the North Dakota Department of Veterans Affairs any information contained in their files and records concerning myself upon request. I further agree to promptly notify the North Dakota Department of Veterans Affairs of any change of address and/or employment.

Applicant Name	
Applicant Signature	Date

Spouse Name (if applicable)	
Spouse Signature (if applicable)	Date

PROMISSORY NOTE

Name of Veteran	Application Number	Date	
Address	City	State	ZIP Code
Do you wish to receive a monthly loan statement? <input type="checkbox"/> Yes <input type="checkbox"/> No Paper or email? <input type="checkbox"/> Paper <input type="checkbox"/> Email	Email Address		

FOR THE VALUE RECEIVED, I promise to pay to the State of North Dakota for the use of the Veterans' Aid Fund, at the Department of Veterans Affairs, as specified below:

Total Loan Amount	Monthly Payment	Number of Installments	Interest Rate
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Payable to:

Department of Veterans Affairs
LOAN DIVISION
4201 38th St S, Suite 104
Fargo, North Dakota 58104-7535

Interest will be at the percentage rate, specified above, per annum, calculated on a daily basis beginning from the date of loan. One-half of the interest on each payment shall be waived at the termination of the loan if the borrower has made all prior payments of principal, interest and all fees are paid by final due date.

The department may assess and collect any late payment penalties of up to \$15.00 for each late payment as well as a fee for any NSF items received by the North Dakota Department of Veterans Affairs.

If default is made in the payment of any installment of principal or interest, or any part of either, then and thereupon the entire principal sum remaining unpaid, with the interest accrued thereon shall, at the option of the Commissioner, Department of Veterans Affairs, become at once due and payable without further notice.

The several makers, signers, guarantors and endorsers hereof waive presentment, demand, notice of dishonor and protest and consent that the time of payment may be extended or this note renewed without affecting their liability hereon.

Signature of Applicant	Date
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Commissioner of Veterans Affairs or Authorized Representative	Date
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VETERAN SERVICE OFFICERS (VSO) USE ONLY

VSO Recommendation

APPROVAL

DISAPPROVAL

Explanation

I hereby attest that the information contained in this application is true and correct to the best of my knowledge.

VSO Signature

Date

Veterans Aid Loan

Required documentation to be obtained by the VSO and submitted with completed application.

DOCUMENTATION CHECKLIST

Income - Will be determined based on most recent 12 month period.

- Cash Asset Verification Form OR three months of most recent bank statements
AND
- Copy of the last 60 days of payroll checks or stubs or copy of payroll statement
AND/OR
- Copy of award letters, i.e. VA Benefits, Social Security
AND
- Copy of front page of applicant's 1040 tax form or statement on application signed by the applicant stating he/she did not file taxes.

Residency

- Copy of ND Drivers License or ID Card showing address
AND
- Copy of monthly expense bill or bank statement 1 year or older verifying address, i.e. utility, phone, or cable bill

Veteran Status

- Copy of DD214 showing character of Service
OR
- Copy of military orders showing active duty requirements have been met

Unmarried Widow

- Copy of marriage certificate
AND
- Copy of death certificate
AND
- Copy of Veteran's military discharge showing character of Service

Additional Loan Documents

- Promissory Note (Page 4)
AND
- Authorization Agreements for Direct Deposit (ACH Debits), SFN 58957
 - Voided check, if possible

I have obtained and reviewed the required documentation as listed above.

VSO Signature

Date