

# VIDA Program: Saver's Nonqualified Withdrawal Request Form

Use this form to make an emergency withdrawal or terminate participation. To be completed by the saver and intermediary, mail or fax to DHCD using the information at the bottom of the form.

## Saver Information

Full Name: \_\_\_\_\_  
*First* *Last*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_ *City* *State* *ZIP Code*

Home Phone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

Last four digits of Social Security Number: \_\_\_\_\_

Intermediary Site Name: \_\_\_\_\_

## Withdrawal Information

Withdrawal Amount: \_\_\_\_\_ Last four digits bank acct#: \_\_\_\_\_

<b>Purpose of the withdrawal:</b>	<input type="checkbox"/> <b>an emergency withdrawal (does not terminate program participation)</b>	<input type="checkbox"/> <b>terminate participation* (close your VIDA account)</b>
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If an emergency withdrawal, answer the following questions:

1. Check the purpose of the withdrawal: \_\_\_\_\_  
 medical care  
 rental payment, due to pending eviction  
 living expenses, due to loss of employment

2. How will this withdrawal affect your savings goal?  
\_\_\_\_\_

3. How do you plan to repay the money back to your account? How long will this take to repay?  
\_\_\_\_\_

## Signatures

**\* If terminating from the program:** By signing below, saver requests that the Virginia Department of Housing and Community Development withdraw saver's deposited funds from their VIDA account and closes the account. The participant understands that all match funds earned will be forfeited and that this request will end program participation.

Saver's  
Signature: \_\_\_\_\_  
Name \_\_\_\_\_ Date \_\_\_\_\_

Intermediary's  
Signature: \_\_\_\_\_  
Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

DHCD Program  
Representative  
Signature: \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

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Fax or mail to: Virginia Department of Housing and Community Development, VIDA Program, Main Street Centre, 600 East Main Street, Suite 300, Richmond, Virginia 23219. Phone: (804) 371-7030, Fax: (804) 371-7093