

**Nearest Living Relative**  
**REQUIRED FOR ALL VA APPLICATIONS**

The Department of Veteran Affairs requires the following information to be disclosed by the Veteran for all VA applications.

Nearest Living Relative Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_

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**VA Debt Questions**  
**REQUIRED FOR ALL VA APPLICATIONS**

- I am receiving VA disability benefits
- I would be entitled to receive VA disability benefits but for the receipt of retired pay.  
I have received VA disability benefits in the past
- I am a surviving spouse of a Veteran who died on active duty or as a result of a service-connected disability.
- NONE OF THE ABOVE APPLY

***If any of the First Four Boxes are checked;***

*The Veteran must sign VA form 26-8937 - Verification of VA Benefit-Related Indebtedness Form and lender must have form completed by VA local office.*

\_\_\_\_\_  
Signature of Veteran

\_\_\_\_\_  
Date