



GUAM HOUSING CORPORATION

P.O. Box 3457, Hagåtña, Guam 96932

DEPARTMENT OF REVENUE AND TAXATION CLEARANCE

INCOME TAX DIVISION

Date: _____

I, certify that our records for the applicant (s) below:

Applicant: _____ Social Security No.: _____

Applicant: _____ Social Security No.: _____

Mailing Address: _____

Who are currently residing in the village of _____, Guam.

1. Has no records with us ☐
2. Has liability with us ☐
3. Has no Income Tax liability ☐
4. Has no Property Tax liability ☐
5. Others: _____ ☐

Please Indicate Obligations if any:

Income Tax: _____

Balance Due: _____

Instructions:

Applicant (s) must present this clearance form to Guam Housing Corporation for further processing of loan application, after all the clearance have been obtained.

Signature of Authorized Representative
(Department of Revenue and Taxation)

590 S. Marine Corps Drive, Ste. 514 ITC Building, Tamuning, Guam 96931
Telephone Number (671) 647-4143/46 • Fax Number (671) 649-4144



GUAM HOUSING CORPORATION

P.O. Box 3457, Hagåtña, Guam 96932

DEPARTMENT OF REVENUE AND TAXATION CLEARANCE

REAL PROPERTY TAX DIVISION

Date: _____

I, certify that our records for the applicant (s) below:

Applicant: _____ Social Security No.: _____

Applicant: _____ Social Security No.: _____

Mailing Address: _____

Who are currently residing in the village of _____, Guam.

1. Has no records with us ☐
2. Has liability with us ☐
3. Has no Income Tax liability ☐
4. Has no Property Tax liability ☐
5. Others: _____ ☐

Please Indicate Obligations if any:

Property Tax: _____

Balance Due: _____

Instructions:

Applicant (s) must present this clearance form to Guam Housing Corporation for further processing of loan application, after all the clearance have been obtained.

Signature of Authorized Representative
(Department of Revenue and Taxation)

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