

## Welcome to Minnetonka Program

### Application Process

#### Section A.

When all of the following documents are received by the HousingResource Center (HRC) you will receive a Good Faith Estimate and Truth in Lending form. At that time a \$65.00 non-refundable application fee will be due. On receipt of the fee your application will be processed. Applicants that meet the program criteria will have loan funds reserved. The reservation will expire at the end of 45 days. A written reservation confirmation will be sent. Applications will not be processed and funds will not be reserved if only some of the documents are received or if the application fee is not paid.

1. Welcome to Minnetonka Application Form – attached
2. Notice to Homeowner Form – attached
3. Data Privacy Form – attached
4. Authorization to Release Form – attached
5. Government Monitoring Addendum Form – attached
6. Form 4506-T for each adult household member - attached
7. Subordination Disclosure - attached
8. Photocopy of ID
9. Executed Purchase Agreement – most recent copy
10. Uniform Residential Loan Application – 1<sup>st</sup> mortgage
11. Good Faith Estimate – 1st mortgage
12. Copy of Income documentation for all income sources for all household members:
  - Last 3 years Federal Income Tax Returns, including all forms and schedules (Forms 1040 signed where indicated by applicant(s) upon submittal)
  - Wages: 2 current, consecutive pay stubs
  - Business or Rental Property Income: Year to Date income and expense form, signed by applicant – form attached.
  - Current award letter for Social Security, current statements for pensions or child support.
  - Divorce decree if applicable.
  - Most current bank statement
  - Any other documentation necessary related to income.
13. Copy of Appraisal—not needed for loan reservation. Send as soon as available.

#### Section B.

All of the following documents must be received at the HRC 5 business days prior to closing. Incomplete documentation will not be considered. Documents that are received in less time than the 5 business days may delay a closing.

1. Lender Request for Check (form sent with the Minnetonka reservation confirmation)
2. Title commitments on 1<sup>st</sup> mortgage policy and Minnetonka loan junior policy.
3. Lender commitment letter – most recent copy
4. Note – copy
5. HUD-1 settlement statement that includes the Minnetonka loan

1. The Welcome to Minnetonka funds may be used for down payment assistance and closing costs only. The borrower may not receive any portion of these funds in cash.
2. The property to be purchased must be a single family detached home, condominium or town home.
3. Applicant must be a first-time homebuyer to participate in this program.
4. When all the documents in Sections A. & B. have been received, the application will be reviewed for final program approval. Incomplete applications will not be considered.
5. When approved, funds for the Minnetonka loan amount and all closing documents for this program will be sent to the Title Company where your loan is closing.
6. After closing, have the title company forward to us a copy of the signed HUD 1 and the Minnetonka mortgage. Also, have the title company send us all of the other original closing documents with original signatures, including the Note and Truth in Lending prepared by the HRC and the City of Minnetonka Title Policy. The letter to the title company closer identifies these documents.
7. Borrowers must occupy the home within 60 days of the real estate closing.

The Greater Metropolitan Housing Corporation (GMHC) is the loan administrator for the City of Minnetonka. GMHC Staff are available through the HRC to advise and answer any questions about the program.

**RETURN ALL COMPLETED DOCUMENTS TO:  
GMHC HousingResource Center – South  
3749 Cedar Avenue South  
Phone: (612) 722-7141 Fax: (612) 722-6367**



## WELCOME TO MINNETONKA PROGRAM

### PROGRAM GUIDELINES

**Overview:** The City of Minnetonka is offering downpayment and closing cost assistance to first-time homebuyers purchasing a home to live in and homestead within the City of Minnetonka. Current available dollars for loans are based upon the fund balance for any given period.

**Loan Amount:** The maximum loan amount is \$10,000.

**Interest Rate & Loan Term:** The interest rate is updated monthly on the first business day of each month of the calendar year and is 75% of the prime rate plus two points. At time of loan application, the borrowers' interest rate is fixed for the entire term of the loan.

The loan term is 10 years.

**Loan Security:** All loans will be secured by a mortgage in favor of the City. The loan may be secured in a subordinate lien position behind other loans in accordance with the City's loan subordination guidelines. Subordination requests are subject to the current subordination guidelines in effect at the time of the request.

**Borrower Eligibility:**

- a. **First-time Homebuyer Status:** Borrower must be a first-time homebuyer (a person or household that has not owned a home within the last three years).
- b. **Debt to Income:** Borrower's gross monthly debts cannot exceed 50% of gross monthly income.
- c. **Homebuyer Contribution:** The homebuyer must contribute at least 25% of the total downpayment and closing costs.
- d. **Homebuyer Workshop:** The borrower must attend a Home Stretch workshop prior to the real estate purchase.
- e. **Income:** The total gross annual household income cannot exceed 120% of the Area Median Income (AMI) by household size as determined by the U. S. Department of Housing and Urban Development (HUD) or 115% of the AMI for borrowers receiving an FHA first-mortgage loan.

<u>Household Size</u>	<u>Income Limit (120%)</u>	<u>Income Limit (115%)</u>
1	\$ 69,240	\$ 66,355
2	\$ 79,080	\$ 75,785
3	\$ 88,920	\$ 85,215
4	\$ 98,760	\$ 94,645
5	\$106,680	\$102,235
6	\$114,600	\$109,825
7	\$122,520	\$117,415
8	\$130,440	\$125,005

- f. **Asset Limit:** Borrower may not own a second property. Borrower will be required to fill out a Declaration of Assets form. The maximum gross assets of the borrower, excluding the residential property to be purchased, and a retirement account that is or was subject to penalty for early withdrawal before the age of 59 ½, shall not exceed \$25,000. Gross assets will generally be defined as: cash on hand, money in checking and savings accounts, cash value of securities or bonds, and recreational vehicles such as boats or snowmobiles.

**Property Eligibility:**

- Only properties that will be owner-occupied and homesteaded will be eligible. Owner must reside in the property within 60 days of purchase.
- Single-family detached homes; townhouses and condos subject to Association covenants.
- Taxable market value of home, as determined by Hennepin County for the year you apply for the loan, cannot exceed \$300,000.
- First mortgage loan must be a prime/A-rated fixed-rate loan
- Contract for Deed properties will be considered by the city on a case-by-case basis.
- Maximum loan to value, including the loan being applied for, cannot exceed 110% loan to value.

**Underwriting Process:** The HousingResource Center will determine applicant's eligibility based on the above criteria. Appeals can be made to the City of Minnetonka.

**Eligible Use of Funds:** Loan funds can be used for downpayment and closing costs. The borrower cannot receive any portion of these funds in cash.

**APPLICATION & LOAN DISBURSEMENT PROCESS**

**Application Process:** Completed applications will be processed by the HousingResource Center on a first-come, first-served basis as funds are available, until all program funds are committed.

**Loan Costs:**

- Borrowers will be charged a non-refundable \$65.00 application fee after receiving loan disclosure forms.
- The borrower will be required to purchase title insurance on this loan for the City of Minnetonka.
- A recording fee of \$46.00 will be collected at closing.

**Disbursement Process:**

- A check and the loan documents will be sent to the title insurance company prior to the loan closing.
- The closing on this loan will be conducted immediately following the real estate closing. The borrower will sign a promissory note and mortgage. The title insurance company may charge an additional fee to close this loan.
- The title company will record the mortgage at the County and will provide the City with the original signed documents.

# Minnetonka Welcome to Minnetonka Program Program

Greater Metropolitan Housing Corporation  
Housing *Resource* Center - South  
3749 Cedar Avenue South  
Minneapolis, MN 55407  
Ph: 612- 22-7141 Fax: 612- 722- 6367

**IMPORTANT NOTE:** To ensure approval of your application and the timely delivery of the closing funds and documents, submit complete documentation as required on the "Application Process" sheet. Application review and fund reservation cannot be completed until ALL of the required documentation has been submitted. Please allow three to four weeks for underwriting.

**PLEASE READ THE ATTACHED PROGRAM GUIDELINES FOR  
DETAILS ON LOAN TERMS AND PROGRAM ELIGIBILITY.**

## 1. Applicant Information

Full Name of Applicant:	Full Name of Co-Applicant:
Social Security Number:	Social Security Number:
Marital Status: o Married o Unmarried (Widowed, Single, or divorced)	Marital Status: o Married o Unmarried (Widowed, Single, or divorced)
Current Address:	Current Address:
Phone Number: (H) (    )	Phone Number: (H) (    )
Alternate Phone Number: (    )	Alternate Phone Number: (    )
E-mail*: _____	E-mail*: _____

Entering your e-mail address above speeds up processing time by allowing the Greater Metropolitan Housing Corporation to contact you via e-mail with information, requests for information and required disclosures of loan terms.

## 2. Property Information

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

Type of dwelling being purchased:  Single Family Detached  Condominium/Townhome

Purchase Price: \$ \_\_\_\_\_

## 3. Household Information

(Please list the names of all residents in the household excluding applicant and co-applicant)

Name:	Birth date	Relationship:	Student (Yes/No):	Income (Yes/No):

#### 4. Household Income Information

(Please list all sources of income for all household residents aged 18 years or older)

1. Household Member _____	Source _____	Phone _____
Location _____	Start Date _____	Monthly Gross _____
2. Household Member _____	Source _____	Phone _____
Location _____	Start Date _____	Monthly Gross _____
3. Household Member _____	Source _____	Phone _____
Location _____	Start Date _____	Monthly Gross _____
4. Household Member _____	Source _____	Phone _____
Location _____	Start Date _____	Monthly Gross _____

#### 5. Required Documentation

Funds are reserved on a first come, first served basis with a completed application.

In order to reserve funds, a complete application must be received. A complete application must include all of the documents as listed in Section A. on the Application Process sheet.

Documents required for closing include those listed in Section B. on the Application Process sheet. Note - Complete documentation must be received at least ten days prior to closing.

#### 6. Closing Information

Title Company: \_\_\_\_\_

Contact: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Closing Date: \_\_\_\_\_

Closing location: \_\_\_\_\_

Mortgage Lending Company: \_\_\_\_\_

Loan officer: \_\_\_\_\_

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

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

E-mail: \_\_\_\_\_

Buyer's Real Estate Agency: \_\_\_\_\_

Realtor: \_\_\_\_\_

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

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

E-mail: \_\_\_\_\_

## 7. Disclosure and Authorization

- √ I/We certify that all information contained in this application is true, accurate and complete to the best of my/our knowledge and belief.
- √ I/We have read and understand the Program Guidelines.
- √ I/we will occupy the home as my/our principal place of residence within sixty (60) days following the home purchase closing. I/we will notify GMHC in writing if the home ceases to be my/our principal residence.

---

Applicant's Signature

Date

Co-Applicant's Signature

Date

**NOTICE TO HOMEOWNER OF HOME OWNERSHIP  
COUNSELING REQUIREMENTS**

Under Minnesota law the loan that you are receiving is considered a "Special Mortgage" under the terms of Minnesota Statute § 58.13. It is possible that your loan may be qualified for subordination as part of the refinance of a primary loan; however, prior to a refinance, you, the owner, must receive counseling regarding the refinance transaction. Proof of the completion of counseling will be required prior to the approval of subordination.

Refinance counseling is available through organizations that are part of the Minnesota Home Ownership Center network. The attached Refinance Counseling Overview provides information regarding why counseling is required and what information is necessary in order to receive the counseling. The Minnesota Home Ownership Center can be reached at (651) 659-9336 or online at [www.hocmn.org](http://www.hocmn.org).

By signing this disclosure, you are acknowledging that you have been provided with notice of the counseling requirements and a copy of the Refinance Counseling Overview from the Minnesota Home Ownership Center.

**PURCHASERS**

\_\_\_\_\_

\_\_\_\_\_

*Please sign two copies of this disclosure form. Return one signed copy with your loan application and keep the other copy for your records.*

**NOTICE TO HOMEOWNER OF HOME OWNERSHIP  
COUNSELING REQUIREMENTS**

Under Minnesota law the loan that you are receiving is considered a "Special Mortgage" under the terms of Minnesota Statute § 58.13. It is possible that your loan may be qualified for subordination as part of the refinance of a primary loan; however, prior to a refinance, you, the owner, must receive counseling regarding the refinance transaction. Proof of the completion of counseling will be required prior to the approval of subordination.

Refinance counseling is available through organizations that are part of the Minnesota Home Ownership Center network. The attached Refinance Counseling Overview provides information regarding why counseling is required and what information is necessary in order to receive the counseling. The Minnesota Home Ownership Center can be reached at (651) 659-9336 or online at [www.hocmn.org](http://www.hocmn.org).

By signing this disclosure, you are acknowledging that you have been provided with notice of the counseling requirements and a copy of the Refinance Counseling Overview from the Minnesota Home Ownership Center.

**PURCHASERS**

\_\_\_\_\_

\_\_\_\_\_

*Please sign two copies of this disclosure form. Return one signed copy with your loan application and keep the other copy for your records.*

THIS FORM MUST BE SIGNED AND RETURNED WITH THE APPLICATION

**DATA PRIVACY ACT**

In accordance with Minnesota Government Data Practices Act the Greater Metropolitan Housing Corporation (GHMC) is required to inform you of your rights regarding the private data collected from you.

Private data, collected from you or from other organizations authorized by you, is used to determine your eligibility for programs administered by GMHC. The use of private data we collect is limited to that necessary for administering programs and providing our services.

You may refuse to provide the requested information. If you do not provide the requested information, you may not be eligible for specific loans, grants or services.

Unless authorized by state or federal law, other government agencies using the reported private data must also treat the information as private. You may wish to exercise your rights as contained in the Minnesota Government Data Practices Act. These rights include:

- 1) The right to see and obtain copies of the data maintained on you
- 2) The right to be told the contents and meaning of data
- 3) The right to contest the accuracy and completeness of the data

I have read and understand the above information regarding my rights as a subject of government data.

Print Name _____	Print Name _____
Date: _____ Signature _____	Date: _____ Signature _____
Print Name _____	Print Name _____
Date: _____ Signature _____	Date: _____ Signature _____

THIS FORM MUST BE SIGNED AND RETURNED WITH THE APPLICATION

## AUTHORIZATION TO RELEASE INFORMATION

I have applied for a loan or grant through the Greater Metropolitan Housing Corporation (GMHC), at the HousingResource Center™. As part of the application process, employees of GMHC may verify information contained in my/our loan or grant application and in other documents required in connection with the loan. This verification process can be conducted either prior to closing or subsequent to closing, and may be performed either by employees of GMHC or by independent third parties, as a part of the origination, processing, underwriting, closing or quality control programs of GMHC.

I authorize you to provide to GMHC and to any investor to whom GMHC may sell my loan, to any servicer or any funder of the program for which I have applied, any and all information and documentation that they request. Such information includes, but is not limited to employment history, income; bank, money market and other financial account balances; credit history; copies of income tax returns and property information.

A copy of this authorization may be accepted as an original.

Your prompt reply is appreciated.

Thank you

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
XXX-XX-  
Social Security Number – last 4 digits

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

NOTE: Use a separate form for each individual who is an applicant, guarantor or other individual whose information is considered in the application. Only one person signs each form.

THIS FORM MUST BE SIGNED AND RETURNED WITH THE APPLICATION

## AUTHORIZATION TO RELEASE INFORMATION

I have applied for a loan or grant through the Greater Metropolitan Housing Corporation (GMHC), at the HousingResource Center™. As part of the application process, employees of GMHC may verify information contained in my/our loan or grant application and in other documents required in connection with the loan. This verification process can be conducted either prior to closing or subsequent to closing, and may be performed either by employees of GMHC or by independent third parties, as a part of the origination, processing, underwriting, closing or quality control programs of GMHC.

I authorize you to provide to GMHC and to any investor to whom GMHC may sell my loan, to any servicer or any funder of the program for which I have applied, any and all information and documentation that they request. Such information includes, but is not limited to employment history, income; bank, money market and other financial account balances; credit history; copies of income tax returns and property information.

A copy of this authorization may be accepted as an original.

Your prompt reply is appreciated.

Thank you

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
XXX-XX-  
Social Security Number – last 4 digits

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

NOTE: Use a separate form for each individual who is an applicant, guarantor or other individual whose information is considered in the application. Only one person signs each form.

**ADDENDUM TO APPLICATION**

Welcome to Minnetonka

Information for Government Monitoring Purposes

The information being requested below is for determining compliance with federal equal credit opportunity, fair housing and home mortgage disclosure law. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may not discriminate on the basis of this information, or on whether you choose to furnish the information. If you choose not to furnish this information and you have made the application in person, we are required to note ethnicity, race and sex on the basis of visual observation or surname. Please check below if you choose not to furnish the information.

**DATE OF APPLICATION:** \_\_\_\_\_

APPLICANT	CO-APPLICANT
<b>APPLICANT NAME:</b>	<b>CO-APPLICANT NAME:</b>
<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> I do not wish to furnish this information
<b>ETHNICITY: (select only one )</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	<b>ETHNICITY: (select only one )</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
<b>GENDER:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male	<b>GENDER:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male
<b>RACE: (select one or more)</b> <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian/Alaska Native & White <input type="checkbox"/> Asian & White <input type="checkbox"/> Black/African American & White <input type="checkbox"/> American Indian/Alaska Native & Black/African American <input type="checkbox"/> Other Multi Racial	<b>RACE: (select one or more)</b> <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian/Alaska Native & White <input type="checkbox"/> Asian & White <input type="checkbox"/> Black/African American & White <input type="checkbox"/> American Indian/Alaska Native & Black/African American <input type="checkbox"/> Other Multi Racial

\_\_\_\_\_  
**APPLICANT SIGNATURE**

\_\_\_\_\_  
**CO-APPLICANT SIGNATURE**

This Section For Lender Use	
Greater Metropolitan Housing Corporation	
Application received by:	mail    face-to-face interview    telephone
Staff Name:	Date:

## Request for Transcript of Tax Return

OMB No. 1545-1872

▶ Request may be rejected if the form is incomplete or illegible.

**Tip.** Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at [IRS.gov](http://IRS.gov) and click on "Order a Transcript" or call 1-800-908-9946. If you need a copy of your return, use Form 4506, Request for Copy of Tax Return. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return

3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (See instructions)

4 Previous address shown on the last return filed if different from line 3 (See instructions)

5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.

**GMHC Housing Resource Center - South (612) 722-7141**  
**3749 Cedar Avenue S, Minneapolis, MN 55407**

**Caution.** If the transcript is being mailed to a third party, ensure that you have filled in line 6 and line 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy.

6 **Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ 1040

a **Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days . . . . .

b **Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days. . . . .

c **Record of Account**, which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days . . . . .

7 **Verification of Nonfiling**, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days . . . . .

8 **Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2007, filed in 2008, will not be available from the IRS until 2009. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days . . . . .

**Caution.** If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 **Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

12/31/2010                      12/31/2011                      \_\_\_\_\_

**Signature of taxpayer(s).** I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, either husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** For transcripts being sent to a third party, this form must be received within 120 days of signature date.

Signature (see instructions)	Date
Title (if line 1a above is a corporation, partnership, estate, or trust)	
Spouse's signature	Date

## General Instructions

**Purpose of form.** Use Form 4506-T to request tax return information. You can also designate a third party to receive the information. See line 5.

**Tip.** Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

**Where to file.** Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different RAVS teams, send your request to the team based on the address of your most recent return.

**Automated transcript request.** You can quickly request transcripts by using our automated self help-service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946.

### Chart for individual transcripts (Form 1040 series and Form W-2)

If you filed an individual return and lived in:	Mail or fax to the "Internal Revenue Service" at:
Florida, Georgia (After June 30, 2011, send your transcript requests to Kansas City, MO)	RAIVS Team P.O. Box 47-421 Stop 91 Doraville, GA 30362 770-455-2335
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	RAIVS Team Stop 6716 AUSC Austin, TX 73301  512-460-2272
Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	RAIVS Team Stop 37106 Fresno, CA 93888  559-456-5876
Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	RAIVS Team Stop 6705 P-6 Kansas City, MO 64999  816-292-6102

### Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to the "Internal Revenue Service" at:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409  801-620-6922
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250  859-669-3592

**Line 1b.** Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

**Line 3.** Enter your current address. If you use a P. O. box, include it on this line.

**Line 4.** Enter the address shown on the last return filed if different from the address entered on line 3.

**Note.** If the address on Lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address.

**Line 6.** Enter only one tax form number per request.

**Signature and date.** Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected.

**Individuals.** Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506-T exactly as your name appeared on the original return. If you changed your name, also sign your current name.

**Corporations.** Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer.

**Partnerships.** Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

**All others.** See Internal Revenue Code section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

**Documentation.** For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the Letters Testamentary authorizing an individual to act for an estate.

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form, 10 min.; Preparing the form, 12 min.; and Copying, assembling, and sending the form to the IRS, 20 min.**

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send the form to this address. Instead, see *Where to file* on this page.



## SUBORDINATION DISCLOSURE

You are receiving or have received a loan from the City of Minnetonka that is in a subordinate lien position. If at some future date, you choose to obtain a new first mortgage or other financing that uses your home as security, there are some facts you should know about your City of Minnetonka loan that may guide your decision.

Most lenders will want their new mortgage to have as high a lien position as possible. If your new financing is a refinance of your current first mortgage, when your first mortgage is paid off, the City of Minnetonka's loan and any other financing you have against your home automatically moves up in lien position. The new mortgage then takes the lowest lien position on the title of your property. The only way for your new mortgage lender to obtain a first lien position is to either pay off the City of Minnetonka's lien or to request and obtain the City of Minnetonka's approval to have its loan subordinated. Subordination means that the City of Minnetonka signs an agreement that say it will let its lien move to a lower lien position behind the new mortgage. This allows your new mortgage to move to a higher lien position.

The City of Minnetonka *will consider* a subordination request subject to the city's subordination guidelines in effect at the time of the request. These guidelines may change without prior notice.

**All loan subordinations must be approved by the City of Minnetonka prior to closing on the new financing. The City of Minnetonka reserves the right to refuse any subordination request that does not meet the City of Minnetonka's subordination guidelines in effect at the time of the request or if the request is determined to be not in the City of Minnetonka's best interest.**

Borrower's signature \_\_\_\_\_

Co-Borrower's signature \_\_\_\_\_

Date \_\_\_\_\_