

MINNEAPOLIS ADVANTAGE 2014 GROW NORTH LOAN PROGRAM Application Process

IMPORTANT NOTE: Please allow 30 days from when your completed application is received to your closing date. There is no guarantee your Advantage application will be processed in time for your closing if you do not allow 30 days.

SECTION A. (all applicants)

When ALL of the documents in Section A are received by the Housing *Resource* Center your application will be reviewed for property and income eligibility. If eligible, Advantage funds will be reserved. **Funds will NOT be reserved if only some of the documents are received.** The reservation will expire at the end of 90 days. A written reservation confirmation will be sent.

1. Application Form - attached
2. Government Monitoring Addendum Form - attached
3. Data Privacy Form - attached
4. Authorization to Release Form - attached
5. IRS 4506-T form - attached
6. Copy of ID for all applicants
7. Executed Purchase Agreement - most recent copy
8. Uniform Residential Loan Application - (From 1st mortgage lender)
9. Good Faith Estimate - (From 1st mortgage lender)
10. ALL Buyers - Copy of most recent paystub from participating employer
11. FOR FHA BUYERS --copy of income documentation for all income sources for all household members:
 - Last 2 years Federal Income Tax Returns, including all forms and schedules
 - Wages: 2 current, consecutive pay stubs
 - Business or Rental Property Income: Year to Date signed income and expense form
 - Current award letter for Social Security, current statement for pensions or child support
 - Divorce decree if applicable
 - Any other documentation necessary related to income

SECTION B. (applicants receiving purchase financing)

All of the following documents must be received at the Housing *Resource* Center 10 business days prior to closing. Incomplete documentation will not be considered. **Documents that are received in less time than the 10 business days may delay a closing.**

1. Title Commitment - most recent copy
2. Homeowner's insurance binder
3. Appraisal
4. Home Stretch Class Certificate (from first time homebuyers only)
5. Contractor estimates if funds will be used for repairs
6. Preliminary closing HUD 1

SECTION C. (Self Financed / Cash Buyers)

In addition to the items listed in Section A, the following documents are required to complete your application for closing. All of the following documents must be received at the Housing *Resource* Center 10 business days prior to closing. **Documents that are received in less time than the 10 business days may delay a closing. Incomplete documentation will not be considered.**

1. \$15.00 check for credit report - payable at time of application.
2. Proof of funds for the purchase.
3. Hazard Insurance binder
4. Home Stretch Class Certificate (From all applicants and spouses)
5. Title Commitment - most recent copy
6. Borrower Closing Affidavit
7. Preliminary Closing HUD 1

All Applicants:

1. Minneapolis Advantage 2014 Grow North funds may be used for down payment assistance and normal and usual closing costs. Funds may also be used to finance repairs to correct any substandard conditions i.e. replacing worn carpet, painting, fixing damaged windows, repairing sidewalk, etc. Borrower will receive a no-interest deferred loan due forgiven after 5 years or when the property ceases to be their principal place of residence.
2. Applicants must be an employee of a participating employer in the Grow North Initiative and purchasing in an eligible neighborhood as described below.
3. Applicants do not have to be a first-time homebuyer to participate in the program; however, all first-time homebuyers must complete an approved homeownership class prior to closing.
4. When all of the documents in Sections A and B (C for cash buyers) have been received, the application will be reviewed for final program approval. Incomplete applications will not be considered.
5. When approved, a check for the loan amount and all closing documents for this program will be sent to the title company.

Eligible Neighborhoods

Cleveland	McKinley
Folwell	Near North
Harrison	Shingle Creek
Hawthorne	Sumner Glenwood
Jordan	Victory
Lind-Bohanon	Webber-Camden
Willard Hay	

Eligible Employers (as of 9/1/14)

DC Group, Inc. / West River Road investments, LLC

The Greater Metropolitan Housing Corporation is the administrator for the City of Minneapolis Advantage 2014 Grow North Program. GMHC Staff are available through the Housing *Resource* Centers to advise and answer any questions about the program.

Send applications to the Housing Resource Center listed below.

Housing *Resource* Center - North

2148 44th Ave N.,
Minneapolis, MN 55412
(612) 588-3033



FHA Guidelines for the *Minneapolis Advantage Program - Grow North*

1. **Program Summary:**

The ***Minneapolis Advantage Program - Grow North*** is an assistance program to help homebuyers to purchase a home in north Minneapolis. The program offers a forgivable loan to employees of businesses who participate in the Grow North incentive package. There is currently a total of \$200,000 available for 2014.

2. **Loan terms:**

- a) Zero percent interest.
- b) No monthly payment.
- c) 1/60th of the loan will be forgiven each month so that at the end of the fifth year the loan is no longer repayable.
- d) Prior to the fifth anniversary, the unforgiven balance of the loan is due on sale, transfer of title, when the primary mortgage is paid off, or when the property ceases to be the owner's primary place of residence.
- e) The mortgage may be subordinated as part of a refinance of the primary loan. These loans are considered a "Special Mortgage" under the terms of Minnesota Statute 58.13.

3. **Loan amount:**

Borrowers will receive up to \$10,000.

4. **Use of funds**

The funds may be used to go toward either of the following uses:

- a) The payment of downpayment, normal and usual closing costs, or repairs to the home. Funds used for repair must be correcting any substandard condition, i.e. replacing worn carpet, painting, fixing damaged windows, repairing sidewalk, etc. The borrower may not receive any portion of these funds as cash.
- b) Any portion of the loan that is not applied to the payment of downpayment, closing costs, or construction costs must be repaid to the City of Minneapolis and the loan balance will be reduced accordingly.
- c) Since the intent of the Local loan is to help buyers with their home purchase, the loan may not be used to reimburse a borrower for a purchase transaction that has already occurred.

5. **Eligible properties:**

- a) A single family (including a townhome or condominium) or duplex property located in a North Minneapolis neighborhood. (see Exhibit A attached for a list of eligible neighborhoods).
- b) There is no sale price limit.
- c) The homebuyer must occupy the home within 60 days following the home purchase closing, except that in the case of a home purchase and repair transaction, the homeowner must occupy the home within 60 days of the completion of the construction work.

6. Eligible borrower:

- a) Borrower must be employed by an eligible business participating in the Grown North Program.
- b) Borrower must have a valid fully executed purchase agreement at the time of application.
- c) Borrower must be a U.S. Citizen or be a legal U.S. Resident (have legal immigration status).
- d) The Borrower does not have to be a first-time homebuyer.
- e) Borrowers receiving an FHA insured primary mortgage must have a household income at or below 115% of area median income as determined by the U. S. Department of Housing and Urban Development when adjusted for household size.
- f) All cash buyers will be underwritten by the Program Administrator using standards approved by the City.

7. Homeownership Counseling:

First-time homebuyers must complete homeownership counseling through the Homestretch counseling program sponsored by the Minnesota Home Ownership Center (telephone 651-659-9336 or online at www.hocmn.org) or a comparable approved counseling program prior to closing of the loan.

8. Combining funds:

- a) Eligible primary financing:
 - i. The loan may be offered in connection with any fixed-rate FHA, VA, Fannie Mae, or Freddie Mac insured or uninsured loan product that is generally considered in the lending industry to be an "A" or "prime" lending product.
 - ii. The loan may also be offered in combination with a contract for deed financed and held by a nonprofit developer who has renovated a foreclosed property for resale, provided that the nonprofit developer does not sell the contract for deed without the written approval of the City. The contract for deed program must be approved by the City prior to participation in the Local program.
 - iii. This loan may not be used with sub-prime lending products.
- b) The Local program funds may be combined with other assistance programs to provide greater opportunity for the borrower to secure the purchase of a home.

9. Loan security

- a) The City loan funds and any neighborhood loan funds will be separately secured by a Promissory Note and Mortgage.
- b) The loan may be secured in a subordinate lien position behind other program funds.
- c) No title insurance is required.
- d) No mortgagee clause is required in the owner's hazard insurance policy.

10. Catastrophic Language

In the event the Mortgage holder and the servicer, in their sole and absolute discretion, after a loss mitigation analysis, find that a catastrophic event, including but not limited to Borrower's death or extended illness, or the extended illness of a close family member who depends primarily on the borrower for support, has occurred which substantially and permanently impairs their ability to repay this Promissory Note and Mortgage and requires them to sell the Property for an amount less than the existing balance on the Promissory Note and Mortgage, that portion of the lien of Promissory Note and Mortgage that can not be satisfied from the proceeds of such sale shall be released.

Exhibit A

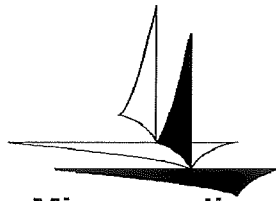
**Minneapolis Advantage Grow North Program
Eligible Neighborhoods**

Neighborhood
Cleveland
Folwell
Harrison
Hawthorne
Jordan
Lind-Bohanon
McKinley
Near North
Shingle Creek
Sumner-Glenwood
Victory
Webber-Camden
Willard-Hay

**MINNEAPOLIS ADVANTAGE LOAN PROGRAM
CASH BUYERS UNDERWRITING**

Minneapolis Advantage Loan Program applicants who are purchasing a property with cash must demonstrate the financial ability to sustain homeownership and bring the property to a mortgageable condition.

- I. Cash buyers will be required to meet at least one of the following criteria to demonstrate an ability to bring the property to a mortgageable condition:**
- a. Creditworthy buyer capable of qualifying for financing to bring the property to a livable condition;
 - b. Proof buyer already has financing arranged to address required repairs cited in the Truth in Housing, Code Compliance Report or report provided by a licensed/certified home inspector;
 - c. Buyer currently has the cash available to correct required repairs.
- II. To determine reasonable costs to correct the required repairs cited in the Truth in Housing, Code Compliance Report or other home inspection report, the buyer must:**
- a. Submit a contractor proposal to GMHC that will be reviewed for reasonableness by a GMHC construction manager, or
 - b. Pay a \$200 fee to GMHC to have a construction manager inspect the property and provide a written cost estimate to the buyer.



Minneapolis
City of Lakes

MINNEAPOLIS ADVANTAGE PROGRAM 2014 GROW NORTH

Greater Metropolitan Housing Corporation

Housing Resource Center- North

2148 44th Avenue North, Minneapolis, MN 55412
612- 588 - 3033

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 30 days from when your completed application is received to your closing date. There is no guarantee your Advantage application will be processed in time for your closing if you do not allow 30 days.

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

I. Applicant's Information - Application is not complete without information from both spouses regardless of who is purchasing the property

Full Name of Applicant:	Full Name of Co-Applicant:
Social Security Number:	Social Security Number:
Marital Status: <input type="radio"/> Married <input type="radio"/> Unmarried (Widowed, Single, or divorced)	Marital Status: <input type="radio"/> Married <input type="radio"/> Unmarried (Widowed, Single, or divorced)
Current Address:	Current Address:
Phone Number: (H) ()	Phone Number: (H) ()
Alternate Phone Number: ()	Alternate Phone Number: ()
E-mail address:	E-mail address:
Are you a first time homebuyer? Yes _____ No _____ (have not owned a home in the last 3 years)	Are you a first time homebuyer? Yes _____ No _____ (have not owned a home in the last 3 years)
Have you attended a homebuyer class within the last 12 months? Yes _____ No _____ If Yes, please attach a copy of the Home Stretch Completion Certificate. If No, you will be required to attend a homebuyer class before closing.	Have you attended a homebuyer class within the last 12 months? Yes _____ No _____ If Yes, please attach a copy of the Home Stretch Completion Certificate. If No, you will be required to attend a homebuyer class before closing.

II. Property Information

Purchase Address: _____

Is this a cash transaction? Yes _____ No _____

III. 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. Note that when a reservation has been made, it will expire at the end of 90 days.

Documents required for closing include those listed in Section B (Section C for Cash Buyers) on the Application Process sheet. Note - Complete documentation must be received before a review for closing can be done.

IV. 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: _____

VI. 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 understand Advantage loan funds can be used for down payment and/or normal and usual closing costs. Funds may also be used to finance repairs to correct and substandard condition, i.e. replacing worn carpet, painting, fixing damaged windows, repairing sidewalk, etc.
- I/We will occupy the home as my/our principal place of residence within sixty (60) days following the home purchase closing, except in the case of a home purchase and repair transaction, I/we will occupy the home within 60 days of the completion of the construction work.
- 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

ADDENDUM TO APPLICATION

Minneapolis Advantage Grow North

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
APPLICANT NAME:	CO-APPLICANT NAME:
<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> I do not wish to furnish this information
ETHNICITY: (select only one) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	ETHNICITY: (select only one) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
GENDER: <input type="checkbox"/> Female <input type="checkbox"/> Male	GENDER: <input type="checkbox"/> Female <input type="checkbox"/> Male
RACE: (select one or more) <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	RACE: (select one or more) <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 _____

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 (GMHC) 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

Social Security Number

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

Social Security Number

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.

Request for Transcript of Tax Return

OMB No. 1545-1872

▶ **Request may be rejected if the form is incomplete or illegible.**
 ▶ **For more information about Form 4506-T, visit www.irs.gov/form4506t.**

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 and click on "Get Transcript of Your Tax Records" under "Tools" 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.	

Housing Resource Center - North 2148 44th Ave N, Minneapolis MN 55412 (612) 588-3033

Caution. If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

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 10 business days

c Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business 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 2011, filed in 2012, will likely not be available from the IRS until 2013. 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 10 business 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/ 12/31/ 12/31/

Caution. Do not sign this form unless all applicable lines have been completed.

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, at least one spouse 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 the signature date.

	Phone number of taxpayer on line 1a or 2a
Signature (see instructions)	Date
Title (if line 1a above is a corporation, partnership, estate, or trust)	
Spouse's signature	Date

Sign Here

Section references are to the Internal Revenue Code unless otherwise noted.

Future Developments

For the latest information about Form 4506-T and its instructions, go to www.irs.gov/form4506t. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

General Instructions

Caution. Do not sign this form unless all applicable lines have been completed.

Purpose of form. Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

Note. If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

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

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 "Get Transcript of Your Tax Records" under "Tools" or call 1-800-908-9946.

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 addresses, send your request to the address based on the address of your most recent return.

Chart for individual transcripts (Form 1040 series and Form W-2 and Form 1099)

If you filed an individual return and lived in:

Mail or fax to:

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	Internal Revenue Service RAIVS Team Stop 6716 AJSC 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	Internal Revenue Service RAIVS Team Stop 37106 Fresno, CA 93888	559-456-7227
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	Internal Revenue Service 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:

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	Internal Revenue Service 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	Internal Revenue Service 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. For a business address, file Form 8822-B, Change of Address or Responsible Party—Business.

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. Ensure that all applicable lines are completed before signing.

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 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.

Signature by a representative. A representative can sign Form 4506-T for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

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:

Internal Revenue Service
Tax Forms and Publications Division
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

City of Minneapolis

105 5th Avenue South, Suite 200
Minneapolis, MN 55401

You are receiving or have received a loan from the City of Minneapolis. This loan is being closed in the name of the City of Minneapolis (City). 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 loan that may guide your decision.

The first fact you should know is that most, if not all, 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's loan along with any other financing automatically moves up in lien position and the new mortgage 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's lien or request and obtain the City's approval to have its loan subordinated. Subordinated means that the City signs an agreement that says it will let its lien move to a lower lien position behind the new mortgage, which allows your new mortgage to move to a higher lien position.

The City will consider each subordination request subject to the *CITY'S SUBORDINATION POLICY* in effect at the time of the request.

The City will not consider a subordination request if any of the following conditions exist:

- ◆ New financing is an open-ended line-of credit
- ◆ Violation of Owner Occupancy requirement

All loan subordinations should be approved by the City prior to the closing of the new financing. The City reserves the right to refuse any subordination request that does not meet the *CITY'S SUBORDINATION POLICY* in effect at the time of the request, or if the request is determined to not be in the City's best interest.

There is a processing/review fee charged for each subordination request.

Borrower _____

Co-Borrower _____

Date _____

Business Name: _____
 Business Address: _____

Date: _____ through Date: _____

Interim Statement

Revenue:

Gross Income \$ _____

Expenses:

Advertising \$ _____
 Bank Charges, Cr Card Fees \$ _____
 Contract Labor \$ _____
 *Gross Wages to Employees \$ _____
 *Gross Wages to Self \$ _____
 *Employer Social Security Taxes \$ _____
 Insurance-business \$ _____
 Interest-loans \$ _____
 Maintenance, Repairs \$ _____
 Office Expenses, supplies, etc. \$ _____
 Office Equipment \$ _____
 Permits and Licenses \$ _____
 Professional Fees \$ _____
 Property Taxes \$ _____
 Rent \$ _____
 Travel \$ _____
 Utilities \$ _____
 Vehicle Expenses \$ _____
 Depreciation \$ _____
 Other: \$ _____
 Other: \$ _____

Total Expenses: \$ _____

Net Income (Loss): \$ _____

This is an accurate summary of my YTD Income and Expenses.

 Signature

 Date

 Name (print)