

EAST PHILLIPS HOMEBUYER ASSISTANCE LOAN PROGRAM NRP APPLICATION

Please submit the following documents at least 30 days prior to your scheduled closing date:

- Application Form (attached)
- Government Monitoring Addendum (attached)
- Data Privacy Act Statement (attached)
- Authorization to Release (attached)
- Subordination Disclosure (attached)
- IRS Form 4506-T (attached)
- Copy of a current photo ID for all applicants
- Copy of 2 most recent paystubs
- Copy of last 3 years Federal Income Tax Returns including W-2's and all schedules
- Executed Purchase Agreement- most recent copy
- Uniform Residential Loan Application
- Loan Estimate

After all of the above documentation have been received by the *HousingResource* Center your application has been processed, East Phillips Homebuyer Assistance Loan Program funds will be reserved.

Once funds are reserved, the following documents must be received at least 10 days before closing:

- Lender Closing Disclosure
- Title Commitment
- Appraisal
- Lender Commitment Letter
- Homestretch Class Certificate

Loan consultants are available to advise and answer questions about the program. For assistance call 612-588-3033

SUBMIT COMPLETED DOCUMENTS TO:

***HousingResource* Center
2148 44th Ave North
Minneapolis, MN 55412
612-588-3033
Fax: (612) 588-3028**

PROGRAM GUIDELINES

(EAST PHILLIPS: Phase II Home Improvement and Homebuyer Program)

Program Overview: The East Phillips neighborhood is making funds available for East Phillips homeowners to make improvements to their properties. The program consists of 3 distinct loan offerings, the Deferred Loan, Homebuyer Deferred Loan and the Emergency Deferred Loan. The East Phillips Rehabilitation Program is designed to supplement existing loan programs available from a variety of other housing resources. This program is not intended to be the sole source of improvement funds available to the neighborhood. Greater Minnesota Housing Corporation (GMHC) shall serve as the administrator for the East Phillips programs and will provide the most beneficial financing that the borrower is best qualified for.

Homebuyer Deferred Loan Program

1. **Interest Rate:** 0% deferred
2. **Loan Amount:** Minimum of \$1,000 and maximum of \$5,000.
3. **Income Limit:** \$99,500.00 [based on the Minnesota Housing Finance Agency's (MHFA) Fix-Up Fund income limit] except that borrowers receiving an FHA primary mortgage shall have 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.
4. **Loan Closing Date:** Loans will be closed simultaneously with the purchase of the property.
5. **Loan term:** The loan will be due upon sale or transfer of ownership of the property. If the borrower sells, transfers title, or if the home is no longer the primary residence of the original borrower the loan will be due.
6. **Eligible Costs:** Loan funds may be used toward the purchaser's down payment or for closing costs. If the borrower would like to make repairs to the new property, funds may be used to help finance these projects but applications must be received prior to the closing and work must be completed with 90 days of the NRP loan funding. Most interior and exterior projects are eligible. **Borrowers are only eligible to access the Homebuyer Deferred Loan Program once per lifetime.**
7. **Debt to Income Ratio:** N/A for a deferred loan program.
8. **Loan - to - Value Ratio:** The ratio of all loans secured by the property, including the new loan, must not exceed 120% of the property value.

9. **Eligible Properties:** The property must be 1-4 unit property located within the geographical boundaries of the East Phillips Neighborhood. The property must become owner occupied, homesteaded and the borrower's primary residence. Condos and Townhomes are eligible. Contract for deed properties are ineligible.
10. **Prior Participation:** Prior recipients of EPIC NRP funding are eligible to participate in the Phase II Program; however, a borrower may access the homebuyer deferred loan only once per lifetime.

General Conditions and Procedures

Rehabilitation Consulting: A GMHC construction manager will be available to borrowers to advise them about proposed projects and will review bids for reasonableness. NRP funds will pay for this service to be provided.

Loan Costs: Loan origination fees will be paid for with NRP funds. The borrower is responsible for paying the following fees:

1. Credit Report: \$15.00 per person or \$20.00 per married couple. A credit report is required for all installment loans. The fee is due at the time of application.
2. Title Work: \$100.00 (may be included in the loan amount)
3. Mortgage Filing Fees: \$46 plus Mortgage Registration Tax, as applicable. Fees are due at the time of loan closing.

Loan Servicing: Loans are serviced by the Community Reinvestment Fund. Borrowers will be assessed a 5% fee for submitting a late payment and/or a \$35.00 fee if a payment is returned to the servicer for insufficient funds.

Contractors & Permits: Contractors contracting for work must be properly licensed by the City of Minneapolis when required by city ordinance. Permits must be obtained when required by city ordinance. Two Bids must be obtained for all projects costing \$5,000 or more.

Work Completion: Weather permitting; all work must be completed within 120 days of the loan closing.

Applications for Funding: Applications will be accepted by GMHC on an on-going basis and processed on a first-come, first-served basis, as funds are available until all program funds are committed. Borrowers shall be required to submit:

1. A completed application form and government addendum
2. A copy of current photo ID
3. A copy of the last three years' Federal Income Tax Returns, including W-2's and all schedules
4. A copy of two most recent payroll statements
5. A copy of your current mortgage statement
6. A signed "Data Privacy Act Statement and Authorization to Release form
7. Other documentation as requested.

Total Project Cost: It is the borrower's responsibility to obtain the amount of funds necessary to finance the entire cost of the work. If the final cost exceeds the loan amount the borrower must obtain the additional funds. NRP funds will not be disbursed until all other funds have been paid into the project.

Custody of Funds: Loan funds will remain in the custody of GMHC until payment for completed work.

Disbursement Process:

1. Payment to the contractor (or owner) will be made after completion of the work. An inspection will be performed by the City and/or the GMHC construction manager to verify the completion of the work.
2. The following items must be received before the funds can be released:
 - a) Final Invoice from each contractor showing all amounts paid and due.
 - b) Lien Waiver. Original from each contractor.
 - c) Material Receipts for sweat equity projects.
 - d) Completion Certificate signed by each contractor and the borrower.
 - e) Permits Closed. Have the inspector sign the permit card, or have the inspector leave a message at the HousingResource Center, 612-588-3033 or the permit must be closed on the Minneapolis Inspections computer 612- 673-5890.
 - f) Final Inspection and approval by the Resource Center. The above items must be provided to GMHC to begin the preparation of the check(s). Lien waivers must be provided before the funds will be released.
3. Payment checks may take up to 10 business days after the above items are received to prepare. Payment checks to contractors must be countersigned by the borrower. A maximum of two draws will be allowed per loan. Payments will only be made for work completed and approved.

EAST PHILLIPS

HOMEBUYER ASSISTANCE PROGRAM

Greater Metropolitan Housing Corporation
HousingResource Center
 2148 44th Avenue North
 Minneapolis, MN 55412
 Ph: 612-588-3033 Fax: 612-588-3028

IMPORTANT NOTE: To ensure approval of your application and the timely delivery of the closing funds and documents, **please submit your application at least 30 days prior to the closing.** Your application cannot be processed without all of the required documentation.
PLEASE READ THE ATTACHED PROGRAM GUIDELINES.

1. Applicant's Information

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:	Address:
City: _____ State: _____	City: _____ State: _____
Zip Code: _____ How Long: (yrs.) _____	Zip Code: _____ How Long: (yrs.) _____
Phone Number: (H) ()- _____	Phone Number: (H) ()- _____
Address of property being purchased:	What is the purchase price for this property?
Type of dwelling being purchased: <input type="radio"/> Single Family <input type="radio"/> Duplex <input type="radio"/> Condominium/Townhouse Age of the property? _____ # of bedrooms _____	Are you a first time homebuyer? Yes No (Never owned interest in a home or has not held interest as a owner in a property for not less than 3 years?)
Have you attended a first time homebuyer classes with in the last 12 months? Yes NO	If yes, when? _____ Please attached the completion certificate.
Are you receiving any other homebuyer assistance funds? HAF ECHO CASA MMP NRP Other: _____	Will you be purchasing the home from any of the following organizations? PPL PRG GMHC HOW NRRC Other: _____

2. Sources of Income

Please list your sources of income such as employment, investments, social security, etc, how much you receive, and how often do you receive this income(ie. weekly, semi weekly, monthly, or yearly).

Applicant:			Co-Applicant:		
Income Source	Amount	How often?	Income Source	Amount	How often?

3. Required Documentation

➤ **Funds are available on a first come first served basis. In order to be considered a complete application, the following must be attached.**

- Signed Subordination Disclosure
- Copy of executed purchase agreement
- Copy of mortgage loan commitment letter.
- Appraisal
- Title Commitment
- Copy of homebuyer’s Home Stretch class completion certificate
- Written documentation of closing date, time, and location
- Addendum to Application

Once the application has been approved, we will call you to sign a Participation Agreement.

Number of persons in household: _____ adults _____ children under the age of 18

Signature of Applicant

Date

Signature of Co-Applicant

Date

**Both sides of this application must be filled out.
Your application cannot be processed without all of the required documentation.**

-Only - Office Use - Only -

	Closing Date:	Approved by:
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ADDENDUM TO APPLICATION

East Phillips NRP

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
<u>Greater Metropolitan Housing Corporation</u>
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 (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

_____	XXX-XX-_____	_____
Print Name	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

_____	XXX-XX-_____	_____
Print Name	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.

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 _____

Request for Transcript of Tax Return

OMB No. 1545-1872

- ▶ Do not sign this form unless all applicable lines have been completed.
- ▶ 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 a Tax Transcript..." 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.

Greater Metropolitan Housing Corporation, 2148 44th Avenue N., Minneapolis, MN 55412 Phone: (612)-588-3033 Fax: (612) 588-3028

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 1120-A, Form 1120-H, Form 1120-L, 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 / 2014 | 12 / 31 / 2015 | / / | / /

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, 1 percent or more shareholder, partner, managing member, 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.

Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T. See instructions.

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

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 a Tax Transcript..." 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 AUSC Austin, TX 73301
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	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
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	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
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	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, 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 P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409
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	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
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	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 (TIN) 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 addresses 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.

 **CAUTION** You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.

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. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-T but must provide documentation to support the requester's right to receive the information.

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.

Note: If you are heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

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.

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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.