



ASSUMPTION PACKAGE

We appreciate your interest in an assumption of an existing SC Housing Mortgage loan. We understand that purchasing a home is one of the biggest decisions to make and we are here to help you through it. An assumption may or may not be the right option available for you. Please read the FAQ section for additional information. If you still have questions, don't hesitate to contact our Mortgage Production Department for more information. You can contact Mortgage Production at 803-896-2211 or via email at mortgage.production@schousing.com.

Please note: all loans are subject to investor guidelines and approval. Not all applicants are eligible.

Here's what you need to provide us in order to start the process:

- Complete the attached application and required documents attached
- Provide us with Name, current address, contact information to include phone number, email, etc. and social security number
- Name(s), and work number(s) of employer(s) for the past two years
- Monthly income for you and your co-borrower and all household occupants over the age of 18 that will be living in the household (most recent pay stub(s) with year-to-date income) including bonuses, commissions and overtime income for the past two years (this information is on your tax return)
- If you are self-employed, you will need the last two years' tax returns for the type of business you own: Sole Proprietorship (Schedule C), Partnership (Form 1065), or Corporation (Form 1120 or 1120s). In addition, the last two years' personal tax returns (including K-1s)

What to expect during the process:

- **Step 1:** Read over the FAQ's carefully prior to filling out the Assumption Package application.
- **Step 2:** Gather the information above to complete all required pages of the Assumption Package application.
- **Step 3:** Complete the Assumption Package in its entirety and send back to our Homeownership – Mortgage Production Department at:

SC State Housing Finance and Development Authority
Attn: Mortgage Production – Assumptions
300-C Outlet Point Blvd
Columbia, SC 29210

- It is recommended that copies are made of all documents to retain for your records prior to mailing them to our office.

- **Step 4:** Upon receipt of the package, all necessary disclosures are sent to the applicant(s) at the mailing address provided within three business days. The applicant(s) should read all pages carefully and not hesitate to call us with any and all questions about the disclosures. A letter will also go out requesting any outstanding missing items.
- **Step 5:** Sign all required disclosures and return back, along with any requested items, to:

SC State Housing Finance and Development Authority
Attn: Mortgage Production – Assumptions
300-C Outlet Point Blvd
Columbia, SC 29210

- **Step 6:** The Assumption Package will not be considered complete until all signed disclosures and outstanding items are provided; therefore, a review of the request will not be made until the package is considered complete. An underwriting decision will be made within fifteen (15) days of receipt of a complete package. Failure to provide all outstanding items will result in the assumption request being terminated.
- **Step 7:** The applicant(s) will be contacted by phone or email and a letter is sent once an underwriting decision has been made.
- **Step 8:** If approved, the applicant(s) is to provide the name, address and contact person at a Real Estate Attorney's office in order to send out closing documents.
- **Step 9:** Applicant is to contact closing attorney to set up time for closing and advise SC Housing. Once received SC Housing will prepare and send the final Assumption closing documents to the Real Estate Attorney to have signed at closing.
- **Step 10:** All parties meet with Closing Attorney, sign all required closing documents and attorney records Assumption Agreement with the county Register of Deeds.
- **Step 11:** Closing Attorney returns back all executed/recorded documents to SC Housing, along with an updated insurance policy declaration page and deed of transfer.
- **Step 12:** Changes to the loan will be made within fifteen (15) business days upon receipt.

FREQUENTLY ASKED QUESTIONS

Q: Who can assume my loan?

A: All loans must meet income limits of program and insurer requirements. Eligibility varies per investor.

Q: If I cannot qualify on my own, can I have a co-borrower?

A: You can have a co-borrower assume with you, but they must meet the same guidelines to qualify.

Q: How long will the process take?

A: An underwriting decision can take up to fifteen (15) business days from the receipt of a complete application. Once approved, a closing will

need to be held, at your expense, which will add additional days to the complete process.

Q: What are the total costs involved?

A: In addition to our Assumption Processing Fee of \$300.00, either the current borrower(s) or applicant(s) will be responsible for all closing costs with the real estate attorney. Also, any outstanding fees on the loan must be satisfied before or at closing.

Q: Who is responsible for making the mortgage payments during the assumption?

A: The mortgage payments will continue to be the paid by the current borrower(s).

Q: Can any payments be skipped during an assumption?

A: All payments must continue to be made on time throughout the assumption process. If the loan becomes delinquent at any time, the assumption process will be closed.

Q: Will the interest rate/term change during an assumption?

A: No. The terms of the note will remain unchanged after the assumption is complete.

Q: Who receives the funds in escrow once the assumption is completed?

A: The escrow funds will remain with the loan once it is assumed. If there is a shortage, it will need to be satisfied by the current owner or an authorized representative before or at closing.

Q: I am just removing the other party from the loan. Why do I have to qualify for an assumption?

A: Removing a borrower from the loan is similar to a sale and considered an assumption. An assumption is a qualifying process. The remaining borrower must demonstrate ability to repay the loan, even if their financials were used to obtain the original loan.

Q: There is no buyer. This is a divorce situation. Do we still need to complete an Assumption Package?

A: Yes. Even though there is no buyer, one borrower is being released. An assumption would need to be completed. Applicant must provide a full property settlement or a full divorce decree showing who was awarded the property.

Q: Whose name should appear on the deed?

A: The new deed must only have the parties assuming the loan.

Q: What documents are included in the Assumption Package?

A: The Assumption Package contains the following documents:

- o Residential Loan Application
- o Addendum to Residential Loan Application
- o Buyer's Information Sheet
- o Occupancy Statement
- o Mortgagor's Certificate

- Borrower's Affidavit (SF-025)
- Declaration of Citizenship Status (SF-021)
- Patriots Act Disclosure (SF-064)
- Affidavit of Non-Taxpayer (SF-027)
- Zero Income Affidavit (SF-041)
- W-9
- 4506-T Request for Tax Transcripts

Q: Can the Assumption Package be faxed or emailed?

A: The original, completed, Assumption Package must be mailed to:
SC State Housing Finance and Development Authority
Attn: Mortgage Production – Assumptions
300-C Outlet Point Blvd
Columbia, SC 29210

FHA ASSUMPTION PACKAGE WITH RELEASE OF LIABILITY

The loan must be current **PRIOR** to the receipt of the Assumption Package. The assumption process will **NOT** begin until the below items and monies required are received by our office. If the loan becomes delinquent during the review, the assumption process will automatically be terminated.

During our review, we must first determine whether the prospective buyer(s) is/are creditworthy to assume this obligation. Therefore, we have enclosed the following documents to be completed and mailed to us for processing:

Document	Description
Residential Loan Application	Loan application to be completed by Purchaser(s). Applicant information, Employer information, Monthly Income Combined Housing Expense Information, Assets and Liabilities and Declarations section must be completed.
Addendum to Residential Loan Application	Housing Urban Development form required to be completed by Purchaser(s) to obtain financing.
Buyer's Information Sheet	Contact information for Purchaser(s).
Occupancy Statement	Purchaser(s) to indicate whether the assumed property will be occupied.
Borrower Signature Authorization	To be completed by Purchaser(s). Provides authorization to obtain credit, verify employment history, bank accounts and other assets of the applicant.
Mortgagor's Certificate	Purchaser(s), Seller(s) and Broker

	Acknowledgement that all statements in contract are true and accurate. Must be signed by purchaser(s), seller(s) and broker(s), if applicable. (EXECUTED ON NON-DIVORCE ASSUMPTIONS).
Borrower's Affidavit (SF-025)	Borrowers Affidavit and Certifications to SC Housing Program Compliance
Declaration of Citizenship Status (SF-021)	Must be completed for all parties on the assumption and all household wage earning occupants over the age of 18
Affidavit of Non Taxpayer (SF-027)	Completed only when applicants or household applicants 18 and over who are not required to file tax returns
Zero Income Affidavit (SF-041)	Only required when any applicant or household applicants 18 and over has no income
W-9 Taxpayer ID Certificate	Request for Taxpayer Identification Number and Certification.
4506-T Request for Tax Transcripts	Request must be completed by all applicants. This allows SC Housing to verify the tax return information provide with what was filed with the Internal Revenue Service.

In addition to the items above, SC Housing requires a copy of the following items in order to consider your application complete:

- o W-2's for the past three years.
- o Most recent paystubs for all applicants covering the most recent 30 day period.
 - o If self-employed **ONLY**, please provide tax returns (personal and business) with all schedules for the past two years, along with a year-to-date profit and loss statement.
- o Three consecutive bank statements for all accounts (**ALL PAGES**). IRA account statements are not required.
- o Sales contract between seller and buyer. **ONLY** in the case of a divorce, provide a copy of the Property Settlement Agreement/Divorce Decree showing who was awarded the property.
- o If there is a second mortgage, supply the balance, monthly payment, name, address, and account number of lender on the Uniform Residential Loan Application.
- o A valid and legible Passport or United States Driver's License or other government issued photo ID **AND** Social Security Card.
- o A cashier's check or money order for the non-refundable Assumption processing Fee in the amount of **\$300.00**.

Once you have completed all of the enclosed forms and included all of the requested information above, please mail the completed and **ORIGINAL** Assumption Package to:

SC State Housing Finance and Development Authority
Attn: Mortgage Production – Assumptions
300-C Outlet Point Blvd
Columbia, SC 29210

We will also receive the completed Assumption Package and all supporting documentation by email as well. Submissions by email can be sent to mortgage.production@schousing.com

Uniform Residential Loan Application

This application is designed to be completed by the applicant(s) with the Lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower", as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when ☐ the income or assets of a person other than the "Borrower" (including the Borrower's spouse) will be used as a basis for loan qualification or ☐ the income or assets of the Borrower's spouse or other person who has community property rights pursuant to state law will not be used as a basis for loan qualification, but his or her liabilities must be considered because the spouse or other person has community property rights pursuant to applicable law and Borrower resides in a community property state, the security property is located in a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of the loan.

If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below):

Borrower _____		Co-Borrower _____	
I. TYPE OF MORTGAGE AND TERMS OF LOAN			
Mortgage Applied for: <input type="checkbox"/> VA <input type="checkbox"/> Conventional <input type="checkbox"/> Other (explain): _____		Agency Case Number _____	
<input type="checkbox"/> FHA <input type="checkbox"/> USDA/Rural Housing Service		Lender Case Number _____	
Amount \$ _____	Interest Rate % _____	No. of Months _____	Amortization Type: <input type="checkbox"/> Fixed Rate <input type="checkbox"/> Other (explain): _____ <input type="checkbox"/> GPM <input type="checkbox"/> ARM (type): _____
II. PROPERTY INFORMATION AND PURPOSE OF LOAN			
Subject Property Address (street, city, state, & ZIP) _____			No. of Units _____
Legal Description of Subject Property (attach description if necessary) _____			Year Built _____
Purpose of Loan <input type="checkbox"/> Purchase <input type="checkbox"/> Construction <input type="checkbox"/> Other (explain): _____ <input type="checkbox"/> Refinance <input type="checkbox"/> Construction-Permanent		Property will be: <input type="checkbox"/> Primary Residence <input type="checkbox"/> Secondary Residence <input type="checkbox"/> Investment	
Complete this line if construction or construction-permanent loan.			
Year Lot Acquired _____	Original Cost \$ _____	Amount Existing Liens \$ _____	(a) Present Value of Lot \$ _____
			(b) Cost of Improvements \$ _____
			Total (a+b) \$ _____
Complete this line if this is a refinance loan.			
Year Acquired _____	Original Cost \$ _____	Amount Existing Liens \$ _____	Purpose of Refinance _____
			Describe Improvements <input type="checkbox"/> made <input type="checkbox"/> to be made
			Cost: \$ _____
Title will be held in what Name(s) _____		Manner in which Title will be held _____	Estate will be held in: <input type="checkbox"/> Fee Simple <input type="checkbox"/> Leasehold (show expiration date) _____
Source of Down Payment, Settlement Charges and/or Subordinate Financing (explain) _____			
III. BORROWER INFORMATION			
Borrower		Co-Borrower	
Borrower's Name (include Jr. or Sr. if applicable) _____		Co-Borrower's Name (include Jr. or Sr. if applicable) _____	
Social Security Number _____	Home Phone (incl. area code) _____	DOB (mm/dd/yyyy) _____	Yrs. School _____
<input type="checkbox"/> Married (includes registered domestic partners)	Dependents (not listed by Co-Borrower) No. _____		<input type="checkbox"/> Married (includes registered domestic partners)
<input type="checkbox"/> Unmarried (includes single, divorced, widowed)	Ages _____		<input type="checkbox"/> Unmarried (includes single, divorced, widowed)
<input type="checkbox"/> Separated			<input type="checkbox"/> Separated
Present Address (street, city, state, ZIP/ country) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs. _____		Present Address (street, city, state, ZIP/ country) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs. _____	
Mailing Address, if different from Present Address _____		Mailing Address, if different from Present Address _____	
If residing at present address for less than two years, complete the following:			
Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs. _____		Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs. _____	
Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs. _____		Former Address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent _____ No. Yrs. _____	

Borrower		IV. EMPLOYMENT INFORMATION		Co-Borrower	
Name & Address of Employer	<input type="checkbox"/> Self Employed	Yrs. on this job	Name & Address of Employer	<input type="checkbox"/> Self Employed	Yrs. on this job
		Yrs. employed in this line of work/profession			Yrs. employed in this line of work/profession
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	

If employed in current position for less than two years or if currently employed in more than one position, complete the following:

Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	
Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)	Name & Address of Employer	<input type="checkbox"/> Self Employed	Dates (from-to)
		Monthly Income \$			Monthly Income \$
Position/Title/Type of Business	Business Phone (incl. area code)		Position/Title/Type of Business	Business Phone (incl. area code)	

V. MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION						
Gross Monthly Income	Borrower	Co-Borrower	Total	Combined Monthly Housing Expense	Present	Proposed
Base Empl. Income*	\$	\$	\$	Rent	\$	
Overtime				First Mortgage (P&I)		\$
Bonuses				Other Financing (P&I)		
Commissions				Hazard Insurance		
Dividends/Interest				Real Estate Taxes		
Net Rental Income				Mortgage Insurance		
Other (before completing, see the notice in "describe other income," below)				Homeowner Assn. Dues		
				Other:		
Total	\$	\$	\$	Total	\$	\$

* Self Employed Borrower(s) may be required to provide additional documentation such as tax returns and financial statements.

Describe Other Income **Notice:** Alimony, child support, or separate maintenance income need not be revealed if the Borrower (B) or Co-Borrower (C) does not choose to have it considered for repaying this loan.

B/C	Monthly Amount
	\$

VI. ASSETS AND LIABILITIES

This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Co-borrowers if their assets and liabilities are sufficiently joined so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise, separate Statements and Schedules are required. If the Co-Borrower section was completed about a non-applicant spouse or other person, this Statement and supporting schedules must be completed by that spouse or other person also.

Completed ☐ Jointly ☐ Not Jointly

ASSETS	Cash or Market Value	LIABILITIES and Pledged Assets. List the creditor's name, address and account number for all outstanding debts, including automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. Use continuation sheet, if necessary. Indicate by (*) those liabilities which will be satisfied upon sale of real estate owned or upon refinancing of the subject property.			
Description		LIABILITIES	Monthly Payment & Months Left to Pay	Unpaid Balance	
Cash deposit toward purchase held by:	\$				
List checking and savings accounts below		Name and address of Company	\$ Payment/Months	\$	
Name and address of Bank, S&L, or Credit Union					
Acct. no.		Acct. no.			
Acct. no.	\$	Name and address of Company	\$ Payment/Months	\$	
Name and address of Bank, S&L, or Credit Union					
Acct. no.		Acct. no.			
Acct. no.	\$	Name and address of Company	\$ Payment/Months	\$	
Name and address of Bank, S&L, or Credit Union					
Acct. no.		Acct. no.			
Acct. no.	\$	Name and address of Company	\$ Payment/Months	\$	
Stocks & Bonds (Company name/number description)					
Acct. no.		Acct. no.			
Life insurance net cash value		Name and address of Company	\$ Payment/Months	\$	
Face amount: \$					
Subtotal Liquid Assets	\$	Acct. no.			
Real estate owned (enter market value from schedule of real estate owned)	\$	Name and address of Company	\$ Payment/Months	\$	
Vested interest in retirement fund	\$				
Net worth of business(es) owned (attach financial statement)	\$	Acct. no.			
Automobiles owned (make and year)	\$	Alimony/Child Support/Separate Maintenance Payments Owed to:	\$		
Other Assets (itemize)	\$	Job-Related Expense (child care, union dues, etc.)	\$		
		Total Monthly Payments	\$		
Total Assets a.	\$	Net Worth (a minus b) =>	\$	Total Liabilities b.	\$

Schedule of Real Estate Owned (if additional properties are owned, use continuation sheet)

Property Address (enter S if sold, PS if pending sale or R if rental being held for income)	Type of Property	Present Market Value	Amount of Mortgages & Liens	Gross Rental Income	Mortgage Payments	Insurance, Maintenance, Taxes & Misc.	Net Rental Income
		\$	\$	\$	\$	\$	\$
	Totals	\$	\$	\$	\$	\$	\$

List any additional names under which credit has previously been received and indicate appropriate creditor name(s) and account number(s):

Alternate Name	Creditor Name	Account Number

VII. DETAILS OF TRANSACTION		VIII. DECLARATIONS				
a. Purchase price	\$	If you answer "Yes" to any questions a through i, please use continuation sheet for explanation. a. Are there any outstanding judgments against you? b. Have you been declared bankrupt within the past 7 years? c. Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years? d. Are you a party to a lawsuit? e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment? <small>(This would include such loans as home mortgage loans, SBA loans, home improvement loans, educational loans, manufactured (mobile) home loans, any mortgage, financial obligation, bond, or loan guarantee. If "Yes," provide details, including date, name, and address of Lender, FHA or VA case number, if any, and reasons for the action.)</small> f. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee? <small>If "Yes," give details as described in the preceding question.</small> g. Are you obligated to pay alimony, child support, or separate maintenance? h. Is any part of the down payment borrowed? i. Are you a co-maker or endorser on a note? ----- j. Are you a U. S. citizen? k. Are you a permanent resident alien? l. Do you intend to occupy the property as your primary residence? <small>If "Yes," complete question m below.</small> m. Have you had an ownership interest in a property in the last three years? (1) What type of property did you own-principal residence (PR), second home (SH), or investment property (IP)? (2) How did you hold title to the home-solely by yourself (S), jointly with your spouse (SP), or jointly with another person (O)?	Borrower		Co-Borrower	
b. Alterations, improvements, repairs			Yes	No	Yes	No
c. Land (if acquired separately)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Refinance (incl. debts to be paid off)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Estimated prepaid items			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Estimated closing costs			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. PMI, MIP, Funding Fee			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Discount (if Borrower will pay)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Total costs (add items a through h)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Subordinate financing			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Borrower's closing costs paid by Seller			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Other Credits (explain)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Loan amount (exclude PMI, MIP, Funding Fee financed)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. PMI, MIP, Funding Fee financed			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Loan amount (add m & n)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
p. Cash from/to Borrower (subtract j, k, l & o from i)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

IX. ACKNOWLEDGEMENT AND AGREEMENT

Each of the undersigned specifically represents to Lender and to Lender's actual or potential agents, brokers, processors, attorneys, insurers, servicers, successors and assigns and agrees and acknowledges that: (1) the information provided in this application is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this application may result in civil liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Sec. 1001, et seq.; (2) the loan requested pursuant to this application (the "Loan") will be secured by a mortgage or deed of trust on the property described in this application; (3) the property will not be used for any illegal or prohibited purpose or use; (4) all statements made in this application are made for the purpose of obtaining a residential mortgage loan; (5) the property will be occupied as indicated in this application; (6) the Lender, its servicers, successors or assigns may retain the original and/or an electronic record of this application, whether or not the loan is approved; (7) the Lender and its agents, brokers, insurers, servicers, successors and assigns may continuously rely on the information contained in the application, and I am obligated to amend and/or supplement the information provided in this application if any of the material facts that I have represented herein should change prior to closing of the Loan; (8) in the event that my payments on the Loan become delinquent, the Lender, its servicers, successors, or assigns may, in addition to any other rights and remedies that it may have relating to such delinquency, report my name and account information to one or more consumer credit reporting agencies; (9) ownership of the Loan and/or administration of the Loan account may be transferred with such notice as may be required by law; (10) neither Lender nor its agents, brokers, insurers, servicers, successors or assigns has made any representation or warranty, express or implied, to me regarding the property or the condition or value of the property; and (11) my transmission of this application as an "electronic record" containing my "electronic signature," as those terms are defined in applicable federal and/or state laws (excluding audio and video recordings), or my facsimile transmission of this application containing a facsimile of my signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.

Acknowledgement. Each of the undersigned hereby acknowledges that any owner of the Loan, its servicers, successors and assigns, may verify or reverify any information contained in this application or obtain any information or data relating to the Loan, for any legitimate purpose through any source, including a source named in this application or a consumer reporting agency.

Borrower's Signature X	Date	Co-Borrower's Signature X	Date
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X. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a Lender may not discriminate either on the basis of this information, or on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, this lender is required to note the information on the basis of visual observation and surname if you have made this application in person. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

BORROWER <input type="checkbox"/> I do not wish to furnish this information Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	CO-BORROWER <input type="checkbox"/> I do not wish to furnish this information Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino Race: <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male
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To be Completed by Loan Originator:

This information was provided:
☐ In a face-to-face interview ☐ By the applicant and submitted by fax or mail
☐ In a telephone interview ☐ By the applicant and submitted via e-mail or the internet

Loan Originator's Signature X	Date
Loan Originator's Name (print or type)	Loan Originator Identifier
Loan Origination Company's Name	Loan Origination Company Identifier
	Loan Origination Company's Address

HUD/VA Addendum to Uniform Residential Loan Application

OMB Approval No. VA: 2900-0144
HUD: 2502-0059 (expires 11/30/2010)

Part I - Identifying Information (mark the type of application)

1. ☐ VA Application for Home Loan Guaranty ☐ HUD/FHA Application for Insurance under the National Housing Act

2. Agency Case No: (include any suffix)

3. Lender's Case No.

4. Section of the Act (for HUD cases)

5. Borrower's Name & Present Address (include zip code)

7. Loan Amount (include the UFMIP if for HUD or Funding Fee if for VA)

8. Interest Rate

9. Proposed Maturity

10. Discount Amount (only if borrower is permitted to pay)

11. Amount of Up Front Premium

12a. Amount of Monthly Premium

12b. Term of Monthly Premium

6. Property Address (including name of subdivision, lot & block no. & zip code)

13. Lender's I.D. Code

14. Sponsor/Agent I.D. Code

15. Lender's Name & Address (include zip code)

16. Name & Address of Sponsor/Agent

17. Lender's Telephone Number

Type or Print all entries clearly

VA: The veteran and the lender hereby apply to the Secretary of Veterans Affairs for Guaranty of the loan described here under Section 3710, Chapter 37, Title 38, United States Code, to the full extent permitted by the veteran's entitlement and severally agree that the Regulations promulgated pursuant to Chapter 37, and in effect on the date of the loan shall govern the rights, duties, and liabilities of the parties.

18. First Time Homebuyer?

19. VA Only: Title will be Vested in:

20. Purpose of Loan (blocks 9 - 12 are for VA loans only)

a. ☐ Yes
b. ☐ No

☐ Veteran
☐ Veteran & Spouse
☐ Other (Specify):

1) ☐ Purchase Existing Home Previously Occupied
2) ☐ Finance Improvements to Existing Property
3) ☐ Refinance (Refl.)
4) ☐ Purchase New Condo. Unit
5) ☐ Purchase Existing Condo. Unit
6) ☐ Purchase Existing Home Not Previously Occupied

7) ☐ Construct Home (proceeds to be paid out during construction)
8) ☐ Finance Co-op Purchase
9) ☐ Purchase Permanently Sited Manufactured Home
10) ☐ Purchase Permanently Sited Manufactured Home & Lot
11) ☐ Refi. Permanently Sited Manufactured Home to Buy Lot
12) ☐ Refi. Permanently Sited Manufactured Home/Lot Loan

Part II - Lender's Certification

21. The undersigned lender makes the following certifications to induce the Department of Veterans Affairs to issue a certificate of commitment to guarantee the subject loan or a Loan Guaranty Certificate under Title 38, U.S. Code, or to induce the Department of Housing and Urban Development - Federal Housing Commissioner to issue a firm commitment for mortgage insurance or a Mortgage Insurance Certificate under the National Housing Act.

- The loan terms furnished in the Uniform Residential Loan Application and this Addendum are true, accurate and complete.
- The information contained in the Uniform Residential Loan Application and this Addendum was obtained directly from the borrower by an employee of the undersigned lender or its duly authorized agent and is true to the best of the lender's knowledge and belief.
- The credit report submitted on the subject borrower (and co-borrower, if any) was ordered by the undersigned lender or its duly authorized agent directly from the credit bureau which prepared the report and was received directly from said credit bureau.
- The verification of employment and verification of deposits were requested and received by the lender or its duly authorized agent without passing through the hands of any third persons and are true to the best of the lender's knowledge and belief.

- The Uniform Residential Loan Application and this Addendum were signed by the borrower after all sections were completed.
- This proposed loan to the named borrower meets the income and credit requirements of the governing law in the judgment of the undersigned.
- To the best of my knowledge and belief, I and my firm and its principals: (1) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency; (2) have not, within a three-year period preceding this proposal, been convicted of or had a civil judgment rendered against them for (a) commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; (b) violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; (3) are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph G(2) of this certification; and (4) have not, within a three-year period preceding this application/proposal, had one or more public transactions (Federal, State or local) terminated for cause or default.

Items "H" through "J" are to be completed as applicable for VA loans only.

H. The names and functions of any duly authorized agents who developed on behalf of the lender any of the information or supporting credit data submitted are as follows:

Name & Address

Function (e.g., obtained information on the Uniform Residential Loan Application, ordered credit report, verifications of employment, deposits, etc.)

If no agent is shown above, the undersigned lender affirmatively certifies that all information and supporting credit data were obtained directly by the lender.

- The undersigned lender understands and agrees that it is responsible for the omissions, errors, or acts of agents identified in item H as to the functions with which they are identified
- The proposed loan conforms otherwise with the applicable provisions of Title 38, U.S. Code, and of the regulations concerning guaranty or insurance of loans to veterans.

Signature of Officer of Lender

Title of Officer of Lender

Date (mm/dd/yyyy)

Part III - Notices to Borrowers. Public reporting burden for this collection of information is estimated to average 6 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number can be located on the OMB Internet page at http://www.whitehouse.gov/omb/library/OMB/INV.LIST.OF.AGENCIES.html#LIST_OF_AGENCIES.

Privacy Act Information. The information requested on the Uniform Residential Loan Application and this Addendum is authorized by 38 U.S.C. 3710 (if for DVA) and 12 U.S.C. 1701 et seq. (if for HUD/FHA). The Debt Collection Act of 1982, Pub. Law 97-365, and HUD's Housing and Community Development Act of 1987, 42 U.S.C. 3543, require persons applying for a federally insured or guaranteed loan to furnish his/her social security number (SSN). You must provide all the requested information, including your SSN. HUD and/or VA may conduct a computer match to verify the information you provide. HUD and/or VA may disclose certain information to Federal, State, and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not otherwise be disclosed or released outside of HUD or VA, except as required and permitted by law. The information will be used to determine whether you qualify as a mortgagor. Any disclosure of information outside VA or HUD/FHA will be made only as permitted by law. Failure to provide any of the requested information, including SSN, may

result in disapproval of your loan application. This is notice to you as required by the Right to Financial Privacy Act of 1978 that VA or HUD/FHA has a right of access to financial records held by financial institutions in connection with the consideration or administration of assistance to you. Financial records involving your transaction will be available to VA and HUD/FHA without further notice or authorization but will not be disclosed or released by this institution to another Government Agency or Department without your consent except as required or permitted by law. Caution. Delinquencies, defaults, foreclosures and abuses of mortgage loans involving programs of the Federal Government can be costly and detrimental to your credit, now and in the future. The lender in this transaction, its agents and assigns as well as the Federal Government, its agencies, agents and assigns, are authorized to take any and all of the following actions in the event loan payments become delinquent on the mortgage loan described in the attached application: (1) Report your name and account information to a credit bureau; (2) Assess additional interest and penalty charges for the period of time that payment is not made; (3) Assess charges to cover additional administrative costs incurred by the Government to service your account; (4) Offset amounts owed to you under other Federal programs; (5) Refer your account to a private attorney, collection agency or mortgage servicing agency to collect the amount due, foreclose the mortgage, sell the property and seek judgment against you for any deficiency; (6) Refer your account to the Department of Justice for litigation in the courts; (7) If you are a current or retired Federal employee, take action to offset your salary, or civil service retirement benefits; (8) Refer your debt to the Internal Revenue Service for offset against any amount owed to you as an income tax refund; and (9) Report any resulting written-off debt of yours to the Internal Revenue Service as your taxable income. All of these actions can and will be used to recover any debts owed when it is determined to be in the interest of the lender and/or the Federal Government to do so.

Part IV - Borrower Consent for Social Security Administration to Verify Social Security Number

I authorize the Social Security Administration to verify my Social Security number to the Lender identified in this document and HUD/FHA, through a computer match conducted by HUD/FHA.

I understand that my consent allows no additional information from my Social Security records to be provided to the Lender, and HUD/FHA and that verification of my Social Security number does not constitute confirmation of my identity. I also understand that my Social Security number may not be used for any other purpose than the one stated above, including resale or redisclosure to other parties. The only other redisclosure permitted by this authorization is for review purposes to ensure that HUD/FHA complies with SSA's consent requirements.

I am the individual to whom the Social Security number was issued or that person's legal guardian. I declare and affirm under the penalty of perjury that the information contained herein is true and correct. I know that if I make any representation that I know is false to obtain information from Social Security records, I could be punished by a fine or imprisonment or both.

This consent is valid for 180 days from the date signed, unless indicated otherwise by the individual(s) named in this loan application.

Read consent carefully. Review accuracy of social security number(s) and birth dates provided on this application.

Signature(s) of Borrower(s)	Date signed	Signature(s) of Co-Borrower(s)	Date signed
	/ /		/ /

Part V - Borrower Certification

22. Complete the following for a HUD/FHA Mortgage

- | | | | |
|--|--|----------------------|--------------------------------|
| 22 a. Do you own or have you sold other real estate within the past 60 months on which there was a HUD / FHA mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No | Is it to be sold? <input type="checkbox"/> Yes <input type="checkbox"/> No | 22 b. Sales Price \$ | 22 c. Original Mortgage Amt \$ |
| 22 d. Address | | | |
| 22 e. If the dwelling to be covered by this mortgage is to be rented, is it a part of, adjacent or contiguous to any project subdivision or group of concentrated rental properties involving eight or more dwelling units in which you have any financial interest? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" give details. | | | |
| 22 f. Do you own more than four dwellings? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes" submit form HUD-92561. | | | |

23. Complete for VA - Guaranteed Mortgage. Have you ever had a VA home loan? ☐ Yes ☐ No

24. **Applicable for Both VA & HUD.** As a home loan borrower, you will be legally obligated to make the mortgage payments called for by your mortgage loan contract. The fact that you dispose of your property after the loan has been made will **not relieve you of liability for making these payments. Payment of the loan in full is ordinarily the way liability on a mortgage note is ended.** Some home buyers have the mistaken impression that if they sell their homes when they move to another locality, or dispose of it for any other reasons, they are no longer liable for the mortgage payments and that liability for these payments is solely that of the new owners. Even though the new owners may agree in writing to assume liability for your mortgage payments, this assumption agreement will not relieve you from liability to the holder of the note which you signed when you obtained the loan to buy the property. Unless you are able to sell the property to a buyer who is acceptable to VA or to HUD/FHA and who will assume the payment of your obligation to the lender, you will not be relieved from liability to repay any claim which VA or HUD/FHA may be required to pay your lender on account of default in your loan payments. **The amount of any such claim payment will be a debt owed by you to the Federal Government.** This debt will be the object of established collection procedures.

25. I, the Undersigned Borrower(s) Certify that:

(1) I have read and understand the foregoing concerning my liability on the loan and Part III Notices to Borrowers.

(2) Occupancy: (for VA only -- mark the applicable box)

- ☐ (a) I now actually occupy the above-described property as my home or intend to move into and occupy said property as my home within a reasonable period of time or intend to reoccupy it after the completion of major alterations, repairs or improvements.
- ☐ (b) My spouse is on active military duty and in his or her absence, I occupy or intend to occupy the property securing this loan as my home.
- ☐ (c) I previously occupied the property securing this loan as my home. (for interest rate reductions)
- ☐ (d) While my spouse was on active military duty and unable to occupy the property securing this loan, I previously occupied the property that is securing this loan as my home. (for interest rate reduction loans)

Note: If box 2b or 2d is checked, the veteran's spouse must also sign below.

(3) Mark the applicable box (not applicable for Home Improvement or Refinancing Loan) I have been informed that (\$) is:

- ☐ the reasonable value of the property as determined by VA or;
- ☐ the statement of appraised value as determined by HUD/FHA.

Note: If the contract price or cost exceeds the VA "Reasonable Value" or HUD/FHA "Statement of Appraised Value" mark either item (a) or item (b), whichever is applicable.

- ☐ (a) I was aware of this valuation when I signed my contract and I have paid or will pay in cash from my own resources at or prior to loan closing a sum equal to the difference between the contract purchase price or cost and the VA or HUD/FHA established value.

I do not and will not have outstanding after loan closing any unpaid contractual obligation on account of such cash payment;

- ☐ (b) I was not aware of this valuation when I signed my contract but have elected to complete the transaction at the contract purchase price or cost. I have paid or will pay in cash from my own resources at or prior to loan closing a sum equal to the difference between contract purchase price or cost and the VA or HUD/FHA established value. I do not and will not have outstanding after loan closing any unpaid contractual obligation on account of such cash payment.

(4) Neither I, nor anyone authorized to act for me, will refuse to sell or rent, after the making of a bona fide offer, or refuse to negotiate for the sale or rental of, or otherwise make unavailable or deny the dwelling or property covered by his/her loan to any person because of race, color, religion, sex, handicap, familial status or national origin. I recognize that any restrictive covenant on this property relating to race, color, religion, sex, handicap, familial status or national origin is illegal and void and civil action for preventive relief may be brought by the Attorney General of the United States in any appropriate U.S. District Court against any person responsible for the violation of the applicable law.

(5) All information in this application is given for the purpose of obtaining a loan to be insured under the National Housing Act or guaranteed by the Department of Veterans Affairs and the information in the Uniform Residential Loan Application and this Addendum is true and complete to the best of my knowledge and belief. Verification may be obtained from any source named herein.

(6) **For HUD Only** (for properties constructed prior to 1978) I have received information on lead paint poisoning. ☐ Yes ☐ Not Applicable

(7) **I am aware that neither HUD/FHA nor VA warrants the condition or value of the property.**

Signature(s) of Borrower(s) -- **Do not sign** unless this application is fully completed. Read the certifications carefully & review accuracy of this application.

Signature(s) of Borrower(s)	Date signed	Signature(s) of Co-Borrower(s)	Date signed
X	/ /	X	/ /

(Borrowers Must Sign Both Parts IV & V) Federal statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy purposed to influence the issuance of any guaranty or insurance by the VA Secretary or the HUD/FHA Commissioner.

BUYER'S INFORMATION

TO BE COMPLETED BY PURCHASER(S)

LOAN NUMBER: _____

DATE: _____

BORROWER

NAME: _____

SOCIAL SECURITY NUMBER: _____ - _____ - _____

PRESENT ADDRESS: _____

HOME PHONE NUMBER: _____

BUSINESS PHONE NUMBER: _____

EMAIL ADDRESS*: _____

FUTURE BILLING ADDRESS: _____

PLACE OF EMPLOYMENT: _____

Co - BORROWER

NAME: _____

SOCIAL SECURITY NUMBER: _____ - _____ - _____

PRESENT ADDRESS: _____

HOME PHONE NUMBER: _____

BUSINESS PHONE NUMBER: _____

EMAIL ADDRESS*: _____

FUTURE BILLING ADDRESS: _____

PLACE OF EMPLOYMENT: _____

() BORROWER(S) **WILL** OCCUPY THE PROPERTY

() BORROWER(S) **WILL NOT** OCCUPY THE PROPERTY

Purchaser (Borrower)

Purchaser (Co-Borrower)

**By providing your email address, you acknowledge that you consent to receiving correspondence via email, including notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided. We will not use your email address as an offer or for solicitation purposes. Also, we do not intend to share your email address with any other third party.*

OCCUPANCY STATEMENT

TO BE COMPLETED BY PURCHASER(S)

LOAN NUMBER: _____

DATE: _____

PROPERTY ADDRESS: _____

I / WE INTEND TO OCCUPY THE ABOVE REFERENCED PROPERTY AS MY / OUR PRIMARY RESIDENCE.
(PLEASE CHECK THE APPROPRIATE BOX)

YES _____ NO _____

IF YOU DO **NOT** INTEND FOR THIS PROPERTY TO BE YOUR PRIMARY RESIDENCE, PLEASE PROVIDE
US WITH THE MAILING ADDRESS ALL FUTURE CORRESPONDENCE SHOULD BE SENT TO BELOW:

Purchaser (Borrower)

Purchaser (Co-Borrower)

IMPORTANT INFORMATION REGARDING THE ABOVE PROPERTY:

A flood zone determination will be ordered as part of the assumption process. If it is determined that the property is in a flood hazard area, flood insurance will be required. The flood insurance premium will be added to the escrow portion of the mortgage payment.

Please be advised that when this loan is assumed, all Mortgage Life and/or Accident and Health Insurance will be terminated. Premiums will no longer be included in the monthly mortgage payments. It may be possible to obtain new Optional Mortgage Insurance coverage through another carrier. Please contact the Mortgage Servicing Department for more information.

Also, prior to the assumption being approved, a Deed of Transfer is required. You should contact a Real Estate Attorney or the local county's office for more information.

MORTGAGOR'S CERTIFICATE

TO BE COMPLETED BY PURCHASER(S), SELLER(S) AND BROKER(S)

(TO BE EXECUTED ON ALL ASSUMPTIONS, OTHER
THAN DIVORCE ASSUMPTIONS)

LOAN NUMBER: _____

We the undersigned, the seller(s), the purchaser(s), and the broker(s) involved in this transaction, each certify that the terms of the contract for purchase are true to his/her best knowledge and belief and that any other agreement entered into by any of these parties in connection with this transaction is attached to the sales agreement.

Purchaser Signature

Date

Purchaser Signature

Date

Seller Signature

Date

Seller Signature

Date

Broker Signature

Date

Broker Signature

Date

Warning: It is a crime to knowingly make false statements to the United States on this or any other similar form. Penalties upon conviction can include a fine and imprisonment. For details, see Title 18 U. S. Code Section 1001 and Section 1010.

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR AN ASSUMPTION*

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you.

MORTGAGOR'S CERTIFICATE

TO BE COMPLETED BY PURCHASER(S), SELLER(S) AND BROKER(S)

(TO BE EXECUTED ON ALL ASSUMPTIONS, OTHER
THAN DIVORCE ASSUMPTIONS)

LOAN NUMBER: _____

We the undersigned, the seller(s), the purchaser(s), and the broker(s) involved in this transaction, each certify that the terms of the contract for purchase are true to his/her best knowledge and belief and that any other agreement entered into by any of these parties in connection with this transaction is attached to the sales agreement.

Purchaser Signature

Date

Purchaser Signature

Date

Seller Signature

Date

Seller Signature

Date

Broker Signature

Date

Broker Signature

Date

Warning: It is a crime to knowingly make false statements to the United States on this or any other similar form. Penalties upon conviction can include a fine and imprisonment. For details, see Title 18 U. S. Code Section 1001 and Section 1010.

**IMPORTANT INFORMATION ABOUT PROCEDURES FOR AN ASSUMPTION*

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you.

BORROWER SIGNATURE AUTHORIZATION

TO BE COMPLETED BY PURCHASER(S)

LOAN NUMBER: _____

DATE: _____

Privacy Policy Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. Seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et. Seq., or 7 USC, 1921 et. Seq. (if USDA/FmHA).

Part 1 – General Information

1. Borrower(s)

2. Name and address of Lender/Broker

Part 2 – Borrower Authorization

I hereby authorize the Lender/Broker to verify my past and present employment earnings records, bank accounts, stocks holding, and any other asset balances that are needed to process my mortgage loan application. I further authorize the Lender/Broker to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references. It is understood that a copy of this form will also serve as authorization.

The information the Lender/Broker obtains is only to be used in the processing of my application for a mortgage loan.

Borrower

Date

Borrower

Date



HOMEOWNERSHIP MORTGAGE PURCHASE PROGRAM
BORROWER'S AFFIDAVIT

IT IS A FEDERAL OFFENSE PUNISHABLE BY A MAXIMUM OF A \$5,000 FINE, TWO YEARS IMPRISONMENT, OR BOTH, KNOWINGLY TO MAKE A FALSE STATEMENT IN THIS AFFIDAVIT IF THE LENDER IS FEDERALLY CHARTERED, SUPERVISED, OR INSURED (TITLE 18, UNITED STATES CODE, SECTION 1014).

READ THIS AFFIDAVIT CAREFULLY TO BE SURE THE INFORMATION IS TRUE AND COMPLETE. If you are uncertain as to the meaning of any questions, ask an authorized representative of the lender for an explanation. COMPLETE ALL QUESTIONS. If any question is not applicable, answer "N/A".

STATE OF SOUTH CAROLINA)
)
COUNTY OF: -----)

AFFIDAVIT

PERSONALLY appeared before me the following person(s): _____
_____ and _____

who, being duly sworn, depose(s) and say(s):

1. That he (she, they) is (are) the applicant(s) for a mortgage loan to be purchased by SC Housing as part of its Homeownership Mortgage Purchase Program; and that my (our) application (1003) is dated _____ .

ELIGIBLE BORROWER

2. Listed below are all the persons who will live in the dwelling (collectively, the "occupants") and the gross annual individual income of each occupant who is 18 years of age or older. All income, including child support, alimony, SSI, maintenance payments, military income, etc., must be included.

Name	Age	Relationship	Gross Annual Income
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Gross Annual Household Income of all occupants who are 18 years of age or older: _____

COUNTY MAX INCOME:

NOTICE: YOU **MUST** COMPLETE A 4506 AND PROVIDE TAX TRANSCRIPTS FOR **ALL** WAGE EARNING BORROWERS & OCCUPANTS OVER THE AGE OF 18

3. Title to the residence will be acquired by the following persons: (List all persons that will hold title to the property)
- _____

PRINCIPAL DWELLING AND LOCATION

4. The dwelling is, or is to be, located at the following address:

Property Address: _____ City: _____ SC Zip: _____

5. The name(s) of the seller(s) of the dwelling is (are) as follows:

Seller(s): _____

6. None of the occupants own, or at the time of closing will own, any other residential property, including mobile homes, vacation homes or time-sharing interests in properties in excess of four weeks.

7. The borrowers intend to and will occupy the dwelling as their principal residence, and not as a second home or vacation home, within 60 calendar days after the closing of the mortgage loan.

8. The borrowers certify and represent that no portion of the dwelling will be used in any trade or business activity.

9. The borrowers certify and represent that construction of the dwelling either has been completed or will be completed prior to the closing of the mortgage loan. Borrowers further certify and represent that the completed dwelling either contains or will contain no unfinished space or incompletely constructed areas, except as previously approved by the Authority.

10. The borrowers have been advised that current requirements prohibit the use of proceeds of the mortgage loan to:

- (a) purchase any land in excess of an amount required to reasonably maintain the basic livability of the dwelling; or
- (b) purchase any land or outbuilding intended for a trade or business use; or
- (c) pay any settlement of financing costs relating to mortgage loan or any items required by paragraph 13 of this affidavit to be deducted from the sales contract price in calculating the "Total Acquisition Cost" of the dwelling.

11. The borrowers certify and represent that: (i) the dwelling is of sufficient size for all the occupants without additions or completions (other than the additions and completions listed and valued in paragraph 13 of this affidavit) and includes all necessary fixtures, i.e., bathing facilities and heat and hot water (other than the items listed and valued in paragraph 13 of this affidavit), and (ii) upon completion of all the work and installation of all the items listed and valued in paragraph 13 of this affidavit, the dwelling will be complete for purposes of the borrowers' occupancy of the dwelling as their principal dwelling.

12. The borrowers have been advised that current requirements of federal legislation prohibit the use of SC Housing's Bonds to purchase the mortgage loan if the total acquisition cost of the dwelling and certain improvements exceeds limits published by the U.S. Treasury Department. These limits vary according to the location and prior occupancy of the dwelling. In order to calculate the total acquisition cost of the dwelling it is necessary to identify all amounts expected to be paid by anyone in connection with the acquisition and improvements of the dwelling.

The borrowers certify and represent that attached are true and correct copies of all contracts and agreements between the borrower and seller (or anyone either directly or indirectly acting on behalf of the borrower and the seller) or any other person relating to the purchase, occupancy or equipping of the dwelling.

13. The acquisition cost of the dwelling and the land on which the dwelling is, or is to be, located is calculated as follows:

Sales Contract Amount	_____
Contracts for repairs, improvements, services, or additions	_____
Land (if separate contract, or current appraised value if a gift or if owned by borrower)	_____
Estimated cost to complete unfurnished space	_____
TOTAL PROGRAM PURCHASE PRICE	_____
Purchased by borrower from sources other than proceeds of the mortgage loan	_____
Personal property not included in purchase price	_____
Additional land or outbuildings in connection with the property	_____
TOTAL FEDERAL ACQUISITION COST	_____

NEW HOMEOWNER REQUIREMENT

14. The present address of each borrower is as follows:

Name of Borrower	Present Address
<div></div>	<div></div>
<div></div>	<div></div>

None of the borrowers has had a present ownership interest in his or her principal dwelling (other than a mobile home that was not permanently fixed to real property) at any time during the three years preceding the date of this affidavit. Note: a "present ownership interest" includes all forms of ownership interests other than:

- (a) an ordinary lease, with or without a purchase option,
- (b) the interest of a buyer under a standard residential purchase contract,
- (c) an expectancy to inherit property,
- (d) a remainder or reverter interest.

15. Either (i) true and correct copies of the Federal Income Tax Transcripts of each borrower and wage earning occupant who is 18 years of age or older, if applicable, as filed with the Internal Revenue Service, as required by the Authority, will be provided prior to the approval of the mortgage loan, or (ii) the borrower/occupant whose return for a required year is omitted certifies that he or she was not required under applicable law to file a Federal Income Tax Return for such year and they are required to complete the applicable Affidavit of Non-Taxpayer.

REFINANCING

16. No part of the proceeds of the mortgage loan will be used directly or indirectly to repay any existing loan, except as follows:

N/A

ACKNOWLEDGMENT OF NOTICE

17. The borrowers have been advised that the making of any misrepresentations or misstatements in this Affidavit or any other document executed in connection with the mortgage and DPA loan will constitute an Event of Default under the mortgage loan and entitle the holder of the mortgage loan and DPA to accelerate the debt and institute Foreclosure and other appropriate proceedings.

18. The borrowers have been advised that SC Housing may consent to a qualified assumption in accordance with its procedures without jeopardizing the tax-exempt statue of its Bonds. Without such prior consent, the dwelling may not be sold subject to the mortgage loan and DPA. The execution by the borrowers (or any borrower individually) of a land sale contract, contract for deed, or similar agreement that transfers the benefits and burdens of ownership and/or changes the occupancy status of the dwelling (or the borrower's rights) is a sale of the dwelling for this purpose.

19. By the borrowers or occupants signing this Affidavit, he (she or they) is attesting to income or the lack of income of all occupants of the dwelling.

Applicant Signature	<div></div>	Date	<div></div>
Co-Applicant Signature	<div></div>	Date	<div></div>
Occupant Signature	<div></div>	Date	<div></div>
	(18 years of age or older)		
Occupant Signature	<div></div>	Date	<div></div>
	(18 years of age or older)		
Occupant Signature	<div></div>	Date	<div></div>
	(18 years of age or older)		

SWORN to before me this _____ day of _____, 20 ____.

_____(Seal)

Notary Public for South Carolina

My Commission Expires _____

Please read both sides of this form carefully and complete either block 1, 2 or 3. If this form is completed on behalf of a child, the adult who is responsible for the child should indicate that and sign and date below.

Family Member Name		Social Security #		Sex
				Date of Birth (mm/dd/yyyy)
Relationship to Head of Household	Alien Registration #	Admission # (INS Form I-94)		Nationality

I, _____ (print member name neatly) hereby declare, under penalty of perjury, that I am:

- ☐ **1. a citizen** by birth, a naturalized citizen or national of the United States. If you checked this block, no further action is required. Sign and date below.
- ☐ **2. a noncitizen with eligible immigration status** in the category checked below:

☐ **(i)** Noncitizen lawfully admitted for permanent residence, as defined by section 101(1)(20) of the Immigration and Nationality Act (INA) as an immigrant, as defined by section 101(a)(15) of the INA (8 U.S.C. 1001(a)(20) and 1101(a)(15), respectively. [immigrants] (This category includes a non-citizen admitted under Section 210 or 210A of the INA (8 U.S.C. 1160 or 1161), [special agricultural worker] who has been granted lawful resident status;

☐ **(ii)** A noncitizen who entered the U.S. before January 1, 1972, or such later date as enacted by law, and has continuously maintained residence in the U.S. since then, and who is not eligible for citizenship, but who is deemed to be lawfully admitted for permanent residence as a result of an exercise of discretion by the Attorney General under Section 249 of the INA (8 U.S.C. 1259);

☐ **(iii)** A noncitizen who is lawfully present in the U.S. pursuant to an admission under section 207 of the INA (8 U.S.C. 1157) [refugee status]; pursuant to the granting of asylum (which has not been terminated) under section 208 of the INA (8 U.S.C. 1158) [asylum status]; or as a result of being granted conditional entry under section 203(a)(7) of the INA (8 U.S.C. 1153(a)(7)) before April 1, 1980, because of persecution or fear of persecution on account of race, religion, or political opinion or because of being uprooted by catastrophic national calamity;

☐ **(iv)** 1182(d)(5)) [parole status]; A noncitizen who is lawfully present in the U.S. as a result of an exercise of discretion by the Attorney General for emergency reasons or reasons deemed strictly in the public interest under section 212(d)(5) of the INA (8 U.S.C.

☐ **(v)** A noncitizen who is lawfully present in the U.S. as a result of the Attorney General's withholding deportation under section 243(h) of the INA (8 U.S.C. 1253(h)) [threat to life or freedom]; or

☐ **(vi)** A noncitizen lawfully admitted for temporary or permanent residence under section 245A of the INA (8 U.S.C. 1255a) [amnesty granted under INA 245A].

☐ If you checked this **block 2** and you are 62 years of age or older and receiving assistance on June 19, 1995, you should submit a proof of age document, together with this form, and sign/date below

☐ If you checked this **block 2** and you are under 62 years of age, you must submit the documents listed on the back of this form, together with this form, and sign/date below
- ☐ **3. not contending eligible immigration** status and I understand that I am not eligible for financial assistance. If you checked **block 3**, no further information is required and the person named above is not eligible for assistance. Sign and date below.

Signature of Applicant (Must be "WET" signed)	Date

Check here if Adult signing for a child: ☐

Request for an Extension - I hereby certify that I am a noncitizen with eligible immigration status, as noted in block 2 above, but the evidence needed to support my claim is temporarily unavailable. Therefore, I am requesting additional time to obtain the necessary evidence. I further certify that diligent and prompt efforts will be undertaken to obtain this evidence.

Signature of Adult Family Member (Must be "WET" signed)	Date

Check here if Adult signing for a child: ☐



300-C Outlet Pointe Blvd., Columbia SC 29210

Declaration of Citizenship Status

Please read both sides of this form carefully and complete either block 1, 2 or 3. If this form is completed on behalf of a child, the adult who is responsible for the child should indicate that and sign and date below.

Family Member Name		Social Security #		Date of Birth (mm/dd/yyyy)
Relationship to Head of Household	Alien Registration #	Admission # (INS Form I-94)		Nationality

I, _____ (print member name neatly) hereby declare, under penalty of perjury, that I am:

- ☐ **1. a citizen** by birth, a naturalized citizen or national of the United States. If you checked this block, no further action is required. Sign and date below.
- ☐ **2. a noncitizen with eligible immigration status** in the category checked below:

☐ **(i)** Noncitizen lawfully admitted for permanent residence, as defined by section 101(1)(20) of the Immigration and Nationality Act (INA) as an immigrant, as defined by section 101(a)(15) of the INA (8 U.S.C. 1001(a)(20) and 1101(a)(15), respectively. [immigrants] (This category includes a non-citizen admitted under Section 210 or 210A of the INA (8 U.S.C. 1160 or 1161), [special agricultural worker] who has been granted lawful resident status;

☐ **(ii)** A noncitizen who entered the U.S. before January 1, 1972, or such later date as enacted by law, and has continuously maintained residence in the U.S. since then, and who is not eligible for citizenship, but who is deemed to be lawfully admitted for permanent residence as a result of an exercise of discretion by the Attorney General under Section 249 of the INA (8 U.S.C. 1259);

☐ **(iii)** A noncitizen who is lawfully present in the U.S. pursuant to an admission under section 207 of the INA (8 U.S.C. 1157) [refugee status]; pursuant to the granting of asylum (which has not been terminated) under section 208 of the INA (8 U.S.C. 1158) [asylum status]; or as a result of being granted conditional entry under section 203(a)(7) of the INA (8 U.S.C. 1153(a)(7)) before April 1, 1980, because of persecution or fear of persecution on account of race, religion, or political opinion or because of being uprooted by catastrophic national calamity;

☐ **(iv)** 1182(d)(5)) [parole status]; A noncitizen who is lawfully present in the U.S. as a result of an exercise of discretion by the Attorney General for emergency reasons or reasons deemed strictly in the public interest under section 212(d)(5) of the INA (8 U.S.C.

☐ **(v)** A noncitizen who is lawfully present in the U.S. as a result of the Attorney General's withholding deportation under section 243(h) of the INA (8 U.S.C. 1253(h)) [threat to life or freedom]; or

☐ **(vi)** A noncitizen lawfully admitted for temporary or permanent residence under section 245A of the INA (8 U.S.C. 1255a) [amnesty granted under INA 245A].

If you checked this **block 2** and you are 62 years of age or older and receiving assistance on June 19, 1995, you should submit a proof of age document, together with this form, and sign/date below

If you checked this **block 2** and you are under 62 years of age, you must submit the documents listed on the back of this form, together with this form, and sign/date below
- ☐ **3. not contending eligible immigration** status and I understand that I am not eligible for financial assistance. If you checked **block 3**, no further information is required and the person named above is not eligible for assistance. Sign and date below.

Signature of Co-Applicant (Must be "WET" signed)	Date

Check here if Adult signing for a child: ☐

Request for an Extension - I hereby certify that I am a noncitizen with eligible immigration status, as noted in block 2 above, but the evidence needed to support my claim is temporarily unavailable. Therefore, I am requesting additional time to obtain the necessary evidence. I further certify that diligent and prompt efforts will be undertaken to obtain this evidence.

Signature of Adult Family Member (Must be "WET" signed)	Date

Check here if Adult signing for a child: ☐



HOMEOWNERSHIP MORTGAGE PURCHASE PROGRAM
ZERO INCOME AFFIDAVIT

(Please mark only the individual(s) to which this Affidavit applies)

- ☐ _____ BORROWER
- ☐ _____ CO-BORROWER
- ☐ _____ OCCUPANT
- ☐ _____ OCCUPANT
- ☐ _____ OCCUPANT

PROPERTY ADDRESS: _____

City: _____ SC Zip: _____

- I hereby certify that I do not receive any income from any of the following sources:***
- A. Wages from employment (including commissions, tips, bonuses, etc.);
 - B. Income from the operation of a business;
 - C. Rental income from real or personal property;
 - D. Interests or dividends from assets;
 - E. Social Security payments, annuities, insurance policies, retirement funds, pensions or death benefits;
 - F. Unemployment or disability payments;
 - G. Public assistance payments;
 - H. Periodic allowances such as alimony, child support, or gifts received from persons not living in my house hold;
 - I Sales from self employed resources;
 - J. Any other sources not named above.

I currently have no income of any kind and there is no imminent change expected in my financial status or employment status during the next thirty (30) days. If there are any changes in the above prior to the closing of the purchase of the aforementioned property I will notify my lending officer immediately and provide documented evidence of such changes to the lender with full disclosure and knowledge that the new income may change the eligibility requirements of my loan.

I have answered these questions truthfully and to the best of my ability.

(Signatures only required for individuals indicated above)

Signature- Applicant

Signature Occupant

Signature Co-Applicant

Signature - Occupant

Signature -Occupant

WARNING: SECTION 1010 OF TITLE 18 U.S.C., PROVIDES: "WHOEVER, FOR THE PURPOSE OF..., INFLUENCES SUCH ADMINISTRATION..., MAKES, PASSES, UTTERS, OR PUBLISHES ANY STATEMENT, KNOWING THE SAME TO BE FALSE..., SHALL BE FINED BUT NOT MORE THAN \$5,000 OR IMPRISONED NOT MORE THAN TWO (2) YEARS, OR BOTH."

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Print type See Specific Instructions on page 2.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) * Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) *	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number									
				-			-		
or									
Employer identification number									
				-					

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person *	Date *
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General Instructions

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

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Request for Transcript of Tax Return

- ▶ **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.**

OMB No. 1545-1872

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)	
5a 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.	
5b Customer file number (if applicable) (see instructions)	

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 5a, 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. ▶

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.

/	/	/	/
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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:** This form must be received by IRS within 120 days of the signature date.

<input type="checkbox"/> 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.	Phone number of taxpayer on line 1a or 2a
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Signature (see instructions) </div> <div style="width: 40%;"> Date </div> </div>	
Title (if line 1a above is a corporation, partnership, estate, or trust)	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Spouse's signature </div> <div style="width: 40%;"> Date </div> </div>	

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.

What's New. The transcripts provided by the IRS have been modified to protect taxpayers' privacy. Transcripts only display partial personal information, such as the last four digits of the taxpayer's Social Security Number. Full financial and tax information, such as wages and taxable income, is shown on the transcript.

A new optional Customer File Number field is available to use when requesting a transcript. You have the option of inputting a number, such as a loan number, in this field. You can input up to 10 numeric characters. The customer file number should not contain an SSN. This number will print on the transcript. The customer file number is an optional field and not required.

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 5a) 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	855-587-9604
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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	855-800-8105
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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 S-2 Kansas City, MO 64999	855-821-0094
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Chart for all other transcripts

If you lived in or your business was in:

Mail or fax to:

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Washington, West Virginia, Wisconsin, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409	855-298-1145
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Maine, Massachusetts, New Hampshire, New York, Pennsylvania, Vermont	Internal Revenue Service RAIVS Team Stop 6705 S-2 Kansas City, MO 64999	855-821-0094
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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 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 5b. Enter up to 10 numeric characters to create a unique customer file number that will appear on the transcript. The customer file number **should not** contain an SSN. Completion of this line is not required.

Note. If you use an SSN, name or combination of both, we will not input the information and the customer file number will be blank on the transcript.

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. 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.



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.

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.