

Loan number: <loan\_num>

## Mortgage Assistance Application

If you are having mortgage payment challenges, please complete and submit this application, along with the required documentation, to (Servicer name) \_\_\_\_\_ via mail: \_\_\_\_\_, fax: \_\_\_\_\_, or online (website/e-mail address): \_\_\_\_\_. We will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents.

We will use the information you provide to help us identify the assistance you may be eligible to receive. If you need help completing this application, please contact (Servicer name) \_\_\_\_\_ at (phone #) \_\_\_\_\_.

If you are experiencing a financial hardship you may be eligible for mortgage assistance from your state's housing finance agency or other state or local government agency.

For a list of HUD-approved housing counseling agencies that can provide foreclosure prevention information, or information on state or local government mortgage assistance programs that may be available, contact one of the following federal government agencies:

- The U.S. Department of Housing and Urban Development (HUD) at (800) 569-4287 or [www.hud.gov/counseling](http://www.hud.gov/counseling)
- The Consumer Financial Protection Bureau (CFPB) at (855) 411-2372 or [www.consumerfinance.gov/mortgagehelp](http://www.consumerfinance.gov/mortgagehelp)

If you need assistance with translation or other language assistance, HUD-approved housing counseling agencies may be able to assist you. These services are provided without charge.

**For additional information on how to avoid foreclosure, including help for military servicemembers, you may also visit Freddie Mac's My Home web site at <http://myhome.freddiemac.com>. Freddie Mac is the owner of your Mortgage loan.**

### Borrower Information

**Borrower's name:** \_\_\_\_\_

Social Security Number (last 4 digits): \_\_\_\_\_

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

Primary phone number: \_\_\_\_\_ ☐ Cell ☐ Home ☐ Work ☐ Other

Alternate phone number: \_\_\_\_\_ ☐ Cell ☐ Home ☐ Work ☐ Other

**Co-borrower's name:** \_\_\_\_\_

Social Security Number (last 4 digits): \_\_\_\_\_

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

Primary phone number: \_\_\_\_\_ ☐ Cell ☐ Home ☐ Work ☐ Other

Alternate phone number: \_\_\_\_\_ ☐ Cell ☐ Home ☐ Work ☐ Other

Preferred contact method (choose all that apply): ☐ Cell phone ☐ Home phone ☐ Work phone ☐ Email ☐ Text—checking this box indicates your consent for text messaging

Is either borrower on active duty with the military (including the National Guard and Reserves), the dependent of a borrower on active duty, or the surviving spouse of a member of the military who was on active duty at the time of death? ☐ Yes ☐ No

### Property Information

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

Mailing address (if different from property address): \_\_\_\_\_

• The property is currently: ☐ A primary residence ☐ A second home ☐ An investment property

• The property is (select all that apply): ☐ Owner occupied ☐ Renter occupied ☐ Vacant

• I want to: ☐ Keep the property ☐ Sell the property ☐ Transfer ownership of the property to my servicer ☐ Undecided

Is the property listed for sale? ☐ Yes ☐ No – If yes, provide the listing agent's name and phone number—or indicate “for sale by owner” if applicable: \_\_\_\_\_

Is the property subject to condominium or homeowners' association (HOA) fees? ☐ Yes ☐ No – If yes, indicate monthly dues: \$ \_\_\_\_\_

## Hardship Information

The hardship causing mortgage payment challenges began on approximately (date) \_\_\_\_\_ and is believed to be:

- ☐ Short-term (up to 6 months)  
☐ Long-term or permanent (greater than 6 months)  
☐ Resolved as of (date) \_\_\_\_\_

TYPE OF HARDSHIP (CHECK ALL THAT APPLY)	REQUIRED HARDSHIP DOCUMENTATION
<input type="checkbox"/> Unemployment	<ul style="list-style-type: none"> <li>Not required</li> </ul>
<input type="checkbox"/> Reduction in income: a hardship that has caused a decrease in your income due to circumstances outside your control (e.g., elimination of overtime, reduction in regular working hours, a reduction in base pay)	<ul style="list-style-type: none"> <li>Not required</li> </ul>
<input type="checkbox"/> Increase in housing-related expenses: a hardship that has caused an increase in your housing expenses due to circumstances outside your control (e.g., uninsured losses, increased property taxes, HOA special assessment)	<ul style="list-style-type: none"> <li>Not required</li> </ul>
<input type="checkbox"/> Disaster (natural or man-made) impacting the property or borrower's place of employment	<ul style="list-style-type: none"> <li>Not required</li> </ul>
<input type="checkbox"/> Long-term or permanent disability, or serious illness of a borrower/co-borrower or dependent family member	<ul style="list-style-type: none"> <li>Written statement from the borrower, or other documentation verifying disability or illness  <b>Note:</b> Detailed medical information is not required, and information from a medical provider is not required</li> </ul>
<input type="checkbox"/> Divorce or legal separation	<ul style="list-style-type: none"> <li>Final divorce decree or final separation agreement <b>OR</b></li> <li>Recorded quitclaim deed</li> </ul>
<input type="checkbox"/> Separation of borrowers unrelated by marriage, civil union, or similar domestic partnership under applicable law	<ul style="list-style-type: none"> <li>Recorded quitclaim deed <b>OR</b></li> <li>Legally binding agreement evidencing that the non-occupying borrower or co-borrower has relinquished all rights to the property</li> </ul>
<input type="checkbox"/> Death of borrower or death of either the primary or secondary wage earner	<ul style="list-style-type: none"> <li>Death certificate <b>OR</b></li> <li>Obituary or newspaper article reporting the death</li> </ul>
<input type="checkbox"/> Distant employment transfer/relocation	<ul style="list-style-type: none"> <li><b>For active duty service members:</b> Permanent Change of Station (PCS) orders or letter showing transfer.</li> <li><b>For employment transfers/new employment:</b> Copy of signed offer letter or notice from employer showing transfer to a new location or written explanation if employer documentation not applicable, <b>AND</b></li> <li>Documentation that reflects the amount of any relocation assistance provided (not required for those with PCS orders)</li> </ul>

TYPE OF HARDSHIP (CHECK ALL THAT APPLY)	REQUIRED HARDSHIP DOCUMENTATION
<input type="checkbox"/> Other – hardship that is not covered above: <hr/> <hr/> <hr/> <hr/> <hr/>	<ul style="list-style-type: none"> <li>Written explanation describing the details of the hardship and any relevant documentation</li> </ul>

## Borrower Income

Please enter all borrower income amounts in middle column.

MONTHLY TOTAL BORROWER INCOME TYPE & AMOUNT		REQUIRED INCOME DOCUMENTATION
Gross (pre-tax) wages, salaries and overtime pay, commissions, tips, and bonuses	\$	<ul style="list-style-type: none"> <li>Most recent pay stub and documentation of year-to-date earnings if not on pay stub <b>OR</b></li> <li>Two most recent bank statements showing income deposit amounts</li> </ul>
Self-employment income	\$	<ul style="list-style-type: none"> <li>Two most recent bank statements showing self-employed income deposit amounts <b>OR</b></li> <li>Most recent signed and dated quarterly or year-to-date profit/loss statement <b>OR</b></li> <li>Most recent complete and signed business tax return <b>OR</b></li> <li>Most recent complete and signed individual federal income tax return</li> </ul>
Unemployment benefit income	\$	<ul style="list-style-type: none"> <li>No documentation required</li> </ul>
Taxable Social Security, pension, disability, death benefits, adoption assistance, housing allowance, and other public assistance	\$	<ul style="list-style-type: none"> <li>Two most recent bank statements showing deposit amounts <b>OR</b></li> <li>Award letters or other documentation showing the amount and frequency of the benefits</li> </ul>
Non-taxable Social Security or disability income	\$	<ul style="list-style-type: none"> <li>Two most recent bank statements showing deposit amounts <b>OR</b></li> <li>Award letters or other documentation showing the amount and frequency of the benefits</li> </ul>
Rental income (rents received, less expenses other than mortgage expense)	\$	<ul style="list-style-type: none"> <li>Two most recent bank statements demonstrating receipt of rent <b>OR</b></li> <li>Two most recent deposited rent checks</li> </ul>
Investment or insurance income	\$	<ul style="list-style-type: none"> <li>Two most recent investment statements <b>OR</b></li> <li>Two most recent bank statements supporting receipt of the income</li> </ul>
Other types of income not listed above (Note: Only include alimony, child support, or separate maintenance income if you choose to have it considered for repaying this loan)	\$	<ul style="list-style-type: none"> <li>Two most recent bank statements showing receipt of income <b>OR</b></li> <li>Other documentation showing the amount and frequency of the income</li> </ul>

## Current Borrower Assets

Exclude retirement funds such as a 401(k) or Individual Retirement Account (IRA), and college savings accounts such as a 529 plan.

Checking account(s) and cash on hand	\$
Savings, money market funds, and Certificates of Deposit (CDs)	\$
Stocks and bonds (non-retirement accounts)	\$
Other:	\$

## Borrower Certification and Agreement

1. I certify and acknowledge that all of the information in this Mortgage Assistance Application is truthful, and the hardship I identified contributed to my need for mortgage relief. Knowingly submitting false information may violate Federal and other applicable law.
2. I agree to provide my servicer with all required documents, including any additional supporting documentation as requested, and will respond in a timely manner to all servicer or authorized third party\* communications.
3. I acknowledge and agree that my servicer is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with my request.
4. I consent to the servicer or authorized third party\* obtaining a current credit report for the borrower and co-borrower.
5. I consent to the disclosure by my servicer, authorized third party,\* or any investor/guarantor of my mortgage loan(s), of any personal information collected during the mortgage assistance process and of any information about any relief I receive, to any third party that deals with my first lien or subordinate lien (if applicable) mortgage loan(s), including Fannie Mae, Freddie Mac, or any investor, insurer, guarantor, or servicer of my mortgage loan(s) or any companies that provide support services to them, for purposes permitted by applicable law, including but not limited to providing mortgage assistance, verifying any data or information contained in this application, and performing audit and quality control reviews. Personal information may include, but is not limited to: (a) my name, address, telephone number, (b) my Social Security number, (c) my credit score, (d) my income, (e) my payment history and information about my account balances and activity, and (f) my tax return and the information contained therein.
6. I agree that the terms of this borrower certification and agreement will apply to any modification trial period plan, repayment plan, or forbearance plan that I may be offered based on this application. If I receive an offer for a modification trial period plan or repayment plan, I agree that my first timely payment under the plan will serve as acceptance of the plan.
7. I consent to being contacted concerning this application for mortgage assistance at any telephone number, including mobile telephone number, or email address I have provided to the lender, servicer, or authorized third party.\*

\* An authorized third party may include, but is not limited to, a housing counseling agency, Housing Finance Agency (HFA) or other similar entity that is assisting me in obtaining a foreclosure prevention alternative.

Borrower signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Borrower signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please submit your completed application, together with the required documentation, to [servicer name] via mail: [address], fax: [fax #], or online: [website/email address]. We will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents.**

**We will use the information you provided to help us identify the assistance you may be eligible to receive.**

## Information on Avoiding Foreclosure

These options may be available to you depending on your hardship. There are options to help you stay in your home and bring your mortgage current, and options that allow you to leave your home while avoiding foreclosure. We can answer any questions you may have about these options, including the general eligibility requirements.

OPTIONS TO STAY IN YOUR HOME	OVERVIEW	BENEFIT
<b>Reinstatement</b>	<ul style="list-style-type: none"> <li>Pay all past due amounts in a single lump-sum payment.</li> <li>Available if you have the funds to pay now.</li> </ul>	<ul style="list-style-type: none"> <li>Allows you to bring your mortgage current immediately.</li> </ul>
<b>Repayment Plan</b>	<ul style="list-style-type: none"> <li>Pay all past due amounts together with your regular monthly payments over an extended period of time.</li> <li>Available if you have sufficient income to cover more than your regular monthly payment.</li> </ul>	<ul style="list-style-type: none"> <li>Allows you time to bring your mortgage current without having to make a single lump-sum payment.</li> </ul>
<b>Payment Deferral</b>	<ul style="list-style-type: none"> <li>Defer repayment of two to six past-due principal and interest payments and certain other amounts into a non-interest bearing balance due and payable at the maturity of the mortgage loan or earlier upon the sale or transfer of the property, refinance of the mortgage loan, or payoff of the interest-bearing unpaid principal balance.</li> </ul>	<ul style="list-style-type: none"> <li>Allows you to bring your mortgage current by delaying repayment of past-due principal and interest and certain other amounts without changing other terms of your mortgage.</li> <li>Interest is not charged on those amounts.</li> </ul>
<b>Forbearance Plan</b>	<ul style="list-style-type: none"> <li>Make reduced payments or no payments for a specific period of time (for example, six months). During this time your mortgage will become increasingly delinquent.</li> </ul>	<ul style="list-style-type: none"> <li>Allows you time to improve your financial situation and possibly qualify for another option, such as a modification, upon completion of the forbearance plan.</li> </ul>
<b>Modification</b>	<ul style="list-style-type: none"> <li>Make modified payments based on new terms.</li> <li>Requires your successful completion of a three-month trial period plan.</li> </ul>	<ul style="list-style-type: none"> <li>Allows you to bring your mortgage current by permanently modifying your mortgage.</li> <li>Intended to make your payments or terms more manageable; typically results in a lower monthly payment.</li> </ul>
OPTIONS TO LEAVE YOUR HOME	OVERVIEW	BENEFIT
<b>Traditional Sale (sale with equity)</b>	<ul style="list-style-type: none"> <li>Sell your property.</li> <li>Proceeds from the sale are used to pay off the mortgage debt and any other debts secured by the property.</li> </ul>	<ul style="list-style-type: none"> <li>Keep the excess proceeds from the sale once all debts and closing costs are paid.</li> <li>Allows you to transition out of your home to avoid foreclosure.</li> </ul>
<b>Short Sale</b>	<ul style="list-style-type: none"> <li>Sell your property.</li> <li>Proceeds from the sale are used to pay off a portion of your mortgage balance when you owe more on your mortgage than the home is worth.</li> </ul>	<ul style="list-style-type: none"> <li>Allows you to transition out of your home to avoid foreclosure.</li> <li>Relocation funds may be available.</li> <li>The remainder of your mortgage debt after the transfer of ownership may be</li> </ul>

		forgiven, but there may be tax consequences – consult a tax advisor.
<b>Mortgage Release (Deed-in-Lieu of Foreclosure)</b>	<ul style="list-style-type: none"> <li>▪ Transfer ownership of your property to us in exchange for relief from some or all of the mortgage debt.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Allows you to transition out of your home if you are unable to sell your home to avoid foreclosure.</li> <li>▪ Relocation funds may be available.</li> <li>▪ The remainder of your mortgage debt after the transfer of ownership may be forgiven, but there may be tax consequences—consult a tax advisor.</li> </ul>

## Frequently Asked Questions

### Q1. Will it cost money to get help?

- No. There should never be a fee to obtain assistance or information about foreclosure prevention options from your mortgage servicer or a qualified housing finance agency.
- Never send a mortgage payment to a company except the one listed on your monthly mortgage statement.
- Beware of scams and anyone offering to help you for a fee (see **Beware of Foreclosure Rescue Scams!** for additional information).

### Q2. What is foreclosure?

- Foreclosure is the loss of your home through a legal process where your mortgage servicer or a third party acquires the property at a foreclosure sale.

### Q3. What are the consequences of foreclosure?

- You must move or you will be evicted from the property.
- It may be as long as seven years before you are eligible for another Fannie Mae or Freddie Mac mortgage.
- You and any additional borrower listed on the mortgage may experience negative credit implications.

### Q4. Will the foreclosure process begin if I do not respond to my mortgage servicer's notices regarding missed payments?

- If you disregard your mortgage servicer's notices, your mortgage servicer may refer your mortgage to foreclosure as authorized by your mortgage documents and applicable law.

### Q5. Should I still contact my mortgage servicer if I have waited too long and my property has been referred to foreclosure?

- Yes, the sooner the better! If you wish to keep your home, contact your mortgage servicer immediately.
- You may also contact a HUD-approved housing counselor (see **Additional Resources** on page 1) and request a three-way call that would include you, the HUD-approved housing counselor, and your mortgage servicer to discuss your hardship.
- A HUD-approved housing counselor can also provide free advice on debt management.

### Q6. Can I still be evaluated for mortgage assistance if my property is scheduled for a foreclosure sale?

- Yes, but it is important that you reach out to your servicer as soon as possible to discuss potential options. If your mortgage servicer receives your complete Mortgage Assistance Application with only 37 or fewer calendar days before the scheduled foreclosure sale, there is no guarantee that your servicer will be able to evaluate you for mortgage assistance in time to stop the foreclosure sale.
- Even if your mortgage servicer approves you for a foreclosure alternative prior to a sale, a court with jurisdiction over the foreclosure proceeding (if any) or public official charged with carrying out the sale may not be able to halt the scheduled sale.

### Q7. Will my property be sold at a foreclosure sale if I accept a foreclosure alternative?

- No. Your property will not be sold at a foreclosure sale if you accept a foreclosure avoidance option and comply with its requirements.

**Q8. What if I acquired an ownership interest in the property, such as through death, divorce, or legal separation?**

- You should contact us as soon as possible. We are here to help you adjust to these events and provide you with information on where to send the mortgage payments. Please contact us to obtain a list of documentation that is needed to confirm your identity and ownership interest in the property, and to discuss next steps.

## **Beware of Foreclosure Rescue Scams!**

Scam artists have stolen millions of dollars from distressed homeowners by promising immediate relief from foreclosure, or demanding cash for counseling services. HUD-approved counseling agencies provide the same services for FREE. If you receive an offer, information, or advice that sounds too good to be true, it probably is. If you have any doubts, contact your mortgage servicer. Don't let scammers take advantage of you, your situation, your house, or your money. Keep in mind, your mortgage servicer is not responsible for paying damages resulting from a scam. **Remember, help is FREE.**

**How to Spot a Scam** – beware of a company or person who:

- Asks for a fee in advance to work with your mortgage servicer to modify, refinance, or reinstate your mortgage.
- Guarantees they can stop a foreclosure or get your mortgage modified.
- Advises you to stop paying your mortgage servicer and pay them instead.
- Pressures you to sign over the deed to your home or sign any paperwork that you haven't had a chance to read, and you don't fully understand.
- Claims to offer "government-approved" or "official government" mortgage modifications.
- Asks you to release personal financial information online or over the phone and you have not been working with this person and/or do not know them.

**How to Report a Scam** – do one of the following:

- Go to <https://www.consumerfinance.gov/complaint/> to submit a complaint and get information on how to fight back.
- Call (888) 995-HOPE (4673) and tell the counselor about your situation and that you believe you were scammed or know of a scam.

**\*\*IF YOUR LOAN IS CURRENT, please complete Certification below:**

I am/We are experiencing a reduction in income or the following hardship(s) that will prevent me/us from making the next required Mortgage Payment due on \_\_\_\_\_ during the month that it is due:

\_\_\_\_\_.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to five years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. §§ 3729, 3802)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



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-C, visit [www.irs.gov](http://www.irs.gov) and search IVES.

<b>1a. Current name</b>			<b>2a. Spouse's current name</b> (if joint return and transcripts are requested for both taxpayers)		
i. First name	ii. Middle initial	iii. Last name/BMF company name	i. Spouse's first name	ii. Middle initial	iii. Spouse's last name
<b>1b. First taxpayer identification number</b> (see instructions)			<b>2b. Spouse's taxpayer identification number</b> (if joint return and transcripts are requested for both taxpayers)		
<b>1c. Previous name shown on the last return filed if different from line 1a</b>			<b>2c. Spouse's previous name shown on the last return filed if different from line 2a</b>		
i. First name	ii. Middle initial	iii. Last name	i. First name	ii. Middle initial	iii. Last name
<b>3. Current address</b> (including apt., room, or suite no.), city, state, and ZIP code (see instructions)					
<b>a. Street address</b> (including apt., room, or suite no.)			<b>b. City</b>	<b>c. State</b>	<b>d. ZIP code</b>
<b>4. Previous address shown on the last return filed if different from line 3</b> (see instructions)					
<b>a. Street address</b> (including apt., room, or suite no.)			<b>b. City</b>	<b>c. State</b>	<b>d. ZIP code</b>
<b>5a. IVES participant name, ID number, SOR mailbox ID, and address</b>					
<b>i. IVES participant name</b>			<b>ii. IVES participant ID number</b>	<b>iii. SOR mailbox ID</b>	
<b>iv. Street address</b> (including apt., room, or suite no.)			<b>v. City</b>	<b>vi. State</b>	<b>vii. ZIP code</b>
<b>5b. Customer file number</b> (if applicable) (see instructions)			<b>5c. Unique identifier</b> (if applicable) (see instructions)		
<b>5d. Client name, telephone number, and address</b> (this field cannot be blank or not applicable (NA))					
<b>i. Client name</b>					<b>ii. Telephone number</b>
<b>iii. Street address</b> (including apt., room, or suite no.)			<b>iv. City</b>	<b>v. State</b>	<b>vi. ZIP code</b>
<b>Caution:</b> This tax transcript is being sent to the third party entered on Line 5a and/or 5d. Ensure that lines 5 through 8 are completed before signing. (see instructions)					
<b>6. Transcript requested.</b> Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request for line 6 transcripts					
<b>a. Return Transcript</b> <input type="checkbox"/> <b>b. Account Transcript</b> <input type="checkbox"/> <b>c. Record of Account</b> <input type="checkbox"/>					
<b>7. Wage and Income transcript</b> (W-2, 1098-E, 1099-G, etc.) <input type="checkbox"/>					
<b>a. Enter a max of three form numbers here; if no entry is made, all forms will be sent.</b>					
<b>b. Mark the checkbox for taxpayer(s) requesting the wage and income transcripts.</b> If no box is checked, transcripts will be provided for all listed taxpayers					
Line 1a <input type="checkbox"/> Line 2a <input type="checkbox"/>					
<b>8. Year or period requested.</b> Enter the ending date of the tax year or period using the mm dd yyyy format (see instructions)					
/ / / / / / / /					
<b>Caution:</b> Do not sign this form unless all applicable lines have been completed.					
<b>Signature of taxpayer(s).</b> I declare that I am either the taxpayer whose name is shown on line 1a or, if applicable, line 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; however, if both spouses' names and TINs are listed in lines 1a-1b and 2a-2b, both spouses must sign the request. 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-C on behalf of the taxpayer. <b>Note:</b> This form must be received by IRS within 120 days of the signature date.					
<input type="checkbox"/> <b>Signatory attests that he/she has read the above attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-C. See instructions.</b>					
<b>Sign Here</b>	<b>Signature for Line 1a</b> (see instructions)			<b>Date</b>	<b>Phone number of taxpayer on line 1a or 2a</b>
	<input type="checkbox"/> Form 4506-C was signed by an Authorized Representative			<input type="checkbox"/> Signatory confirms document was electronically signed	
	<b>Print/Type name</b>				
	<b>Title</b> (if line 1a above is a corporation, partnership, estate, or trust)				
	<b>Spouse's signature</b> (required if listed on Line 2a)				<b>Date</b>
	<input type="checkbox"/> Form 4506-C was signed by an Authorized Representative			<input type="checkbox"/> Signatory confirms document was electronically signed	
<b>Print/Type name</b>					

# Instructions for Form 4506-C, IVES Request for Transcript of Tax Return

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

## Future Developments

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

**What's New.** Form 4506-C includes the Client company requesting transcripts and increased the number of Wage and Income transcripts requests.

## General Instructions

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

**Designated Recipient Notification.** Section 6103(c) limits disclosure and use of return information received pursuant to the taxpayer's consent and holds the recipient subject to penalties for any unauthorized access, other use, or redisclosure without the taxpayer's express permission or request.

**Taxpayer Notification.** Section 6103(c) limits disclosure and use of return information provided pursuant to your consent and holds the recipient subject to penalties, brought by private right of action, for any unauthorized access, other use, or redisclosure without your express permission or request.

**Purpose of form.** Use Form 4506-C to request tax return information through an authorized IVES participant. You will designate an IVES participant to receive the information on line 5a.

**Note:** If you are unsure of which type of transcript you need, check with the party requesting your tax information.

**Where to file.** The IVES participant will fax Form 4506-C with the approved IVES cover sheet to their assigned Service Center.

## Chart for ordering transcripts

If your assigned Service Center is:	Fax the requests with the approved coversheet to:
Austin Submission Processing Center	Austin IVES Team 844-249-6238
Kansas City Submission Processing Center	Kansas City IVES Team 844-249-8128
Ogden Submission Processing Center	Ogden IVES Team 844-249-8129

## Specific Instructions

**Line 1a/2a** (if spouse is also requested). For IMF Requests: Enter the First, Middle Initial, and Last Name in the indicated fields. If all characters will not fit, please enter up to 12 for First name and 22 for Last name. For BMF Requests: Enter the company name in the Last Name field. If all characters will not fit, please enter up to 22.

**Line 1b/2b** (if spouse is also requested). Enter the social security number (SSN) or individual taxpayer identification number (ITIN) for the individual listed on line 1a including the dashes in the correct format, or enter the employer identification number (EIN) for the business listed on line 1a including the dashes in the correct format.

**Line 1c/2c** (if spouse is also requested). Enter your previous name as shown on your last filed tax return if different than line 1a.

**Line 3.** Enter your current address in the indicated fields. If you use a P.O. Box, include it and the number in the Current Address field.

**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, or Form 8822-B, Change of Address or Responsible Party — Business, with Form 4506-C.

**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 cannot contain an SSN, ITIN or EIN. Completion of this line is not required.

**Line 5c.** Enter up to 10 alpha-numeric characters to create a unique identifier that will show in the mailbox file information. The unique identifier cannot contain an SSN, ITIN or EIN. Completion of this line is not required.

**Note.** If you use an SSN, we will not input the information and the customer file number or unique identifier will reflect a generic entry of "9999999999".

**Line 5d.** Enter the Client company name, address, and phone number in the indicated fields. A Client company receives the requested tax transcripts from the IVES participant. If the IVES participant is also the Client company, the IVES participant information should be entered on Line 5a and 5d. These fields cannot be blank or Not Applicable (NA).

**Line 6.** Enter only one tax form number (1040, 1065, 1120, etc.) per request for all line 6 transcripts request types.

**Line 6a.** Return Transcript 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-H, Form 1120-L, and Form 1120-S. Return transcripts are available for the current year and returns processed during the prior 3 processing years.

**Line 6b.** Account Transcript 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.

**Line 6c.** Record of Account 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.

**Line 7.** The IRS can provide a transcript that includes data from these information returns: Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. Enter up to three information return types. If no specific type is requested, all forms will be provided. 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, Form W-2 information for 2016, filed in 2017, will likely not be available from the IRS until 2018. If you need Form W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213.

**Line 8.** Enter the end date of the tax year or period requested in mm dd yyyy format. This may be a calendar year, fiscal year or quarter. Enter each quarter requested for quarterly returns. Example: Enter 12 31 2018 for a calendar year 2018 Form 1040 transcript.



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 if unchecked.

**Signature and date.** Form 4506-C must be signed and dated by the taxpayer listed on line 1a and, if listed, 2a. The IRS must receive Form 4506-C within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines, including lines 5a through 8, are completed before signing.

**Authorized Representative:** A representative can sign Form 4506-C for a taxpayer if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5a, and Form 2848 is attached to the Form 4506-C request. 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. If Form 4506-C is signed by a representative, the Authorized Representative check box must be marked.

**Electronic Signature:** Only IVES participants that opt in to the Electronic Signature usage can accept electronic signatures. Contact the IVES participant for approval and guidance for electronic signatures. If the Form 4506-C is signed electronically, the Electronic Signature check box must be marked.

**Individuals.** Transcripts listed on line 6 may be furnished to either spouse if jointly filed. Signatures are required for all taxpayers listed on Line 1a and 2a.

**Corporations.** Generally, Form 4506-C 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-C but must provide documentation to support the requester's right to receive the information.

**Partnerships.** Generally, Form 4506-C can be signed by any person who was a member of the partnership during any part of the tax period requested on line 8.

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

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

**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-C 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.  
**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-C 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.

# THIRD PARTY AUTHORIZATION FORM

## Homeowner Information

Borrower Name			Co-Borrower Name	
Mailing Address			Property Address (if different than mailing address)	
Phone Numbers/ Contact Information	Daytime:	Evening:	Cell:	E-mail Address:

## Mortgage Information

Name of Mortgage Company (i.e., Mortgage Servicer)			Loan Number	
Mortgage Company Contact Name	Last 4 digits of SSN:	Contact Phone	Contact E-mail Address	
Lender Name (if Different Than Mortgage Company)			Loan Number	
Lender Contact Name	Last 4 digits of SSN:	Contact Phone	Contact E-mail Address	
Housing Counselor Agency			Agency's File Number	
Housing Counselor Name	Last 4 digits of SSN:	Contact Phone	Contact E-mail Address	
Authorized Third Party	Last 4 digits of SSN:	Contact Phone	Contact E-mail Address	
Authorized Third Party	Last 4 digits of SSN:	Contact Phone	Contact E-mail Address	
Loan Type	<input type="checkbox"/> Conventional <input type="checkbox"/> FHA <input type="checkbox"/> VA		Foreclosure Sale Date (if applicable) _____/_____/_____	

The undersigned Borrower and, if applicable, Co-Borrower, is/are currently working with the Housing Counselor named above and hereby authorize the Housing Counselor and its employees to speak with and discuss my mortgage loan on my behalf with the Lender and the Mortgage Loan Servicer named above, as well as with the owner of the mortgage loan (such as Fannie Mae and Freddie Mac), with the Lender, the Mortgage Loan Servicer and the owner of the mortgage loan collectively referred to as "Mortgagee," and also authorize each of the entities constituting the Mortgagee to speak with and discuss my mortgage loan on my behalf with the Housing Counselor and any Authorized Third Party named above. The Housing Counselor and each of the entities constituting the Mortgagee are each authorized to share with the other any and all information concerning me/us in their possession including, but not limited to, financial information, without further authorization from me/us.

The Housing Counselor and its employees are authorized to furnish copies of this Authorization to any of the entities constituting the Mortgagee and such entities may rely on this Authorization.

\_\_\_\_\_  
Borrower's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Borrower's Signature

\_\_\_\_\_  
Date