SHORT SALE COORDINATION PACKAGE

Thank you for choosing the ATG® Short Sale Coordination Department to assist you with the coordination of the short sale approval of your client's property. Our Short Sale Coordination professionals can help streamline the short sale process and maximize the Seller's chance of obtaining short sale approval. Our experienced staff will work directly with attorneys, the Seller(s), real estate agents, and lenders to assemble and submit the documentation necessary to allow the lender to agree to the short sale in an efficient and timely manner. Successful short sales are achieved through a team effort involving the Seller's attorney, the parties, the real estate agents, title company, settlement agent, and short sale coordinator. The prompt assistance and cooperation of all of these parties is critical to the success of the Seller's short sale request. Please read and share with the Seller(s) and real estate agents the article included in this package entitled "Short Sales: Ten Important Tips for Real Estate Professionals," which contains some important information to keep in mind regarding the short sale process.

In order to facilitate and streamline the short sale process, please ask the Seller(s) to complete and sign <u>all</u> of the forms in this package and supply <u>all</u> documentation referenced in the Required Documentation Checklist and e-mail (preferred) or fax all documentation in this checklist to ATG as soon as possible. Please be advised that most lenders and servicers also have their own required forms and/or short sale application. Please contact the lender or servicer of the Seller's loan(s) (via phone or website) to retrieve any such forms or contact the ATG Short Sale Coordination Department for assistance with retrieving these forms. Additional documentation may be required by the lender(s) as the short sale process moves forward. The ATG Short Sale Coordination Department will notify you if that occurs. Please make every effort to respond to all documentation requests in a timely manner and within the time frame requested by ATG.

We look forward to working with you. If you have any questions, please contact us at shortsales@atgf.com, 312.752.1190 (phone), or 312.224.0233 (fax).

Karen G. Courtney Managing Attorney

Short Sale Coordination Department



SHORT SALES: TEN IMPORTANT TIPS FOR REAL ESTATE PROFESSIONALS

by Karen Courtney, Managing Attorney, ATG Short Sale Coordination Department

Short sales are most successful when a team effort is made by real estate professionals (including attorneys, real estate agents, coordinators, and title company professionals) and the parties to collect legible and error-free documentation and respond to the short sale lender's documentation requests in a timely way. Help improve this team effort and increase your clients' chances of obtaining short sale approval by considering the following tips.

1. Be sure the Seller's hardship reason is viable.

The Seller must generally be able to demonstrate financial hardship and an inability to pay his or her mortgage. Some examples of "acceptable" causes of financial hardship include unemployment, excessive use of credit, illness of borrower, illness in family, death in family, and marital difficulties. The lender is more likely to approve a short sale request if the Seller is able to demonstrate that the financial hardship was caused by an event that was out of the Seller's control, such as unemployment, death of a spouse, or high medical bills due to a serious illness. The lender's evaluation of the hardship claimed by the Seller will be made on a case-by-case basis, and some lenders may be willing to make exceptions to the hardship requirement if it would be in the lender's best interest to approve the short sale.

2. Highlight the importance of securing a qualified, motivated and flexible Buyer.

Short sales often fail because the Buyer is unable to obtain mortgage financing once the Seller finally obtains short sale approval. Require the Buyer to produce written Proof of Funds on bank letterhead, or written Mortgage Pre-approval Letter from a reputable lender.

Short sales also sometimes fail because the Buyer is not motivated or flexible enough to wait for the Seller to obtain short sale approval. When selecting an offer to accept, the Seller and the Seller's attorney should carefully review the offer for any contract contingencies that would permit the Buyer to cancel the contract before short sale approval can be obtained, such as a mortgage contingency provision or short sale payoff contingency, and consider any other information that has been disclosed by the Buyer or the Buyer's real estate agent that might give insight on the motivation and flexibility of the Buyer.

3. Set expectations with Seller.

Help clients set realistic expectations regarding the viability of the short sale at the beginning of the process. Advise them that each investor controls its own policies for approving short sales and must approve the short sale payoff request. For this reason, not all short sale requests will be approved. Prepare your clients to consider alternatives and possibly the loss of their property in the event that the short sale is not approved.

- 4. Take steps to accurately identify outstanding liens/judgments recorded against the property and the name of the Seller.
 All lien holders must agree to the Seller's short sale request.
 The best practice to accurately identify outstanding liens/judgments is to do the following:
 - a. Ask short sale clients to complete a basic financial information questionnaire, which should list all known mortgages, liens and other debts, in order to have a complete picture of the client's financial situation.
 - b. Title Search Review a current title search from a reputable title insurance company or search provider, which will show the recorded liens/judgments against the property. Later date searches should also be conducted periodically during the short sale approval process to update the status of real estate taxes and identify any liens or encumbrances recorded in the "gap" period.
 - c. Compare financial information questionnaire and title search to identify any discrepancies or differences in lien holder(s) and/or servicer(s).
- 5. Review documentation received from Seller, Buyer, or their respective agents for consistency, legibility, errors, and completeness.

Pay special attention to contract dates and signatures. Obtain necessary corrections before submitting documentation to the short sale lender.

6. Use full name(s) of Seller(s) in the Contract, Riders, Short Sale Addendum, and Disclosures.

- a. Lenders usually require the name(s) of the Seller(s) to match the name(s) of debtor(s) on the promissory note and may ask for corrections if the contract documents contain discrepancies.
- b. Avoid using the term "Owner of Record" or its abbreviation "OOR" in lieu of the name(s) of the Seller(s) in the contract documents; many lenders will not permit use of this term or its abbreviation. If the contract contains this term or its abbreviation, the lender will require the documents to be corrected to show the full name(s) of the Seller(s) and initialed by both parties.

c. Ensure that the Buyer will take title to the property in the same name as used in the contract that was submitted to the short sale lender. If the name of the Buyer changes for any reason, the lender will likely require re-approval of the short sale, which will delay the closing.

7. Obtain the most recent financial information possible from the Seller.

- a. Most lenders require financial information submitted by the Seller to be less than sixty (60) days old.
- b. Once financial information becomes stale, lenders require updated financials, which will delay the short sale approval process.

8. Respond to the short sale lender's documentation requests as quickly as possible.

Short sales fail for many reasons, but often it is because the short sale lender's requests for documentation are not addressed in a timely manner. Treat each request as though it is an emergency. By doing so, the short sale lender will realize that you are committed to compliance, plus you will help the Seller avoid unnecessary delays or other problems.

9. Ensure Seller will be able to comply with the terms of all payoff letters.

Obtain payoff letters that are current as of the date of the closing. Short sale payoff letters are often very detailed. Review all payoff letters and the HUD-1 in concert to ensure that the Seller is in compliance with the terms of all letters, including payoff amounts required by/allowed to each lien holder in the event that there are subordinate liens. Resolve any inconsistencies in the payoff letters prior to disbursement.

Short sale approval letters and short sale closing instructions also often contain other conditions that must be addressed prior to disbursement, such a restrictions on the transfer of the property by the Buyer after closing, a cap on the real estate tax proration figure, or required Affidavit of Arm's Length Transaction. Be sure the Seller will be able to comply with all payoff conditions.

10. Obtain written approval of the HUD-1 Settlement Statement from all Lenders in advance of closing.

To ensure compliance with the terms of the short sale payoff letters, and to avoid delays at closing, submit the HUD-1 to all lenders in advance of closing and obtain written approval of the HUD-1 from all lenders, either by obtaining the HUD-1 signed by the lender, or by e-mail confirming that the HUD-1 as submitted is approved. If the lender later claims that the money was disbursed to the wrong party, the Seller's attorney and settlement agent can then produce the signed HUD-1 to show that the lender signed off on the disbursement.



Karen Courtney
Managing Attorney
ATG Short Sale
Coordination Department



Betsy Green Short Sale Coordinator ATG Short Sale Coordination Department

USE ATG FOR YOUR SHORT SALES

Short sales are difficult to complete, the process is inefficient and labor intensive. Let us take care of the administrative tasks involved in obtaining short sale approvals so you can focus on doing what you do best — representing your client. Our experienced Short Sale Coordination professionals perform the following tasks:

- » Work directly with attorneys, real estate agents and their clients to assemble and submit documentation in an efficient and timely manner to persuade the lender to agree to the short sale.
- » Partner with the Seller's attorney to prepare and submit the HUD-1 Settlement Statement.
- » Communicate with lenders and servicers throughout the short sale process saving the attorney valuable time.

If the short sale is not approved, we charge no fee! Interested? Have questions?

Contact us at shortsales@atgf.com or 312.752.1190.

EDITOR'S NOTE: In the event that this communication is disseminated to the consumer in connection with ATG's Short Sale Coordination Services, the consumer is hereby provided with the following disclosures in compliance with the Mortgage Assistance Relief Services Rule (16 C.F.R. Part 322) promulgated by the Federal Trade Commission:

IMPORTANT NOTICE

You may stop doing business with us at any time. You may accept or reject the offer of mortgage assistance we obtain from your lender [or servicer]. If you reject the offer, you do not have to pay us. If you accept the offer, you will have to pay us an amount equal to one percent (1%) of the purchase price, or a minimum of \$2,000.00, whichever is greater, for our services. ATG is not associated with the government, and our service is not approved by the government or your lender. Even if you accept this offer and use our service, your lender may not agree to change your loan. If you stop paying your mortgage, you could lose your home and damage your credit rating.

SHORT SALE COORDINATION AGREEMENT

This Short Sale Coordin	the d	ay of			
			Day	<u></u>	Month
, by and bet	tween	, of	,		
Year	Name of Seller		City	State	Zip
("Seller"),		, of	,		
	Name of Seller's Attorney		City	State	Zip
("Seller's Attorney"), ar	nd Attorneys' Title Guaranty Fund, Inc. ("ATC	G [®] ") regarding the	Property common	ly known as:	
-		,	,		("Property")
	Street Address	City	State	Zip	_

In consideration of the mutual covenants and agreements hereinafter set forth and for other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties agree as follows:

- 1. Seller is the Owner of Record of the Property and has authority to contract for its sale.
- 2. Seller has read and understands every document that Seller has signed pertaining to the short sale process.
- 3. Seller understands and agrees that ATG will be Seller's exclusive short sale coordinator with respect to the Property and hereby appoints ATG as Seller's short sale coordinator for purposes of coordinating a short sale with any and all lien holders with respect to the Property, and ATG hereby accepts this appointment and agrees to act as such coordinator in accordance with the terms and conditions of this Agreement.
- 4. This Agreement shall be in effect as of the day and year first above written and shall be effective for a period of twelve (12) months after said date, subject to any written extensions as mutually agreed upon by the parties and further subject to termination provisions as otherwise referenced in this Agreement. In the event that the lien holder(s) reject(s) Seller's request for a short sale for any reason, ATG, in its sole discretion, reserves the right to unilaterally terminate this Agreement by written Notice to Seller's Attorney within five (5) business days after receipt from the lien holder(s) of evidence of rejection of the Seller's short sale request. In the event that Notice is not served within the time so specified, this Agreement shall remain in full force and effect.
- 5. ATG shall, on Seller's behalf, pursuant to its appointment as short sale coordinator under the terms of this Agreement, contact each holder of a lien against the Property and attempt to obtain short sale approval authority from each lien holder, authorizing Seller to convey the Property on terms consistent with the offers provided by Seller to ATG.
- 6. Seller and Seller's Attorney agree to return to ATG the ATG Short Sale Coordination Package ("Package"), fully executed and completed by Seller and any other parties listed therein, within five (5) business days after the date of this Agreement. Seller and Seller's attorney shall be responsible for obtaining and furnishing to ATG any and all documentation requested in the Package or required by the lien holder(s) as part of the short sale approval process, including the preliminary Seller's Settlement Statement, which shall be prepared by Seller's Attorney and submitted to ATG as part of the Package. ATG shall be responsible for preparing the preliminary and any amended HUD-1 Settlement Statement(s) that will be needed by the lien holder(s) as part of the short sale approval process.
- 7. ATG reserves the right to review the information submitted by Seller and ascertain the viability of Seller's ability to obtain short sale approval of the Property from the lien holder(s). In the event that ATG determines, in its sole discretion, that Seller would not be likely to obtain short sale approval from the lien holder(s), ATG reserves the right, in its sole discretion, to unilaterally terminate this Agreement by written Notice to Seller's Attorney within five (5) business days after its receipt of the **completed** Package from Seller. In the event that Notice is not served within the time so specified, this Agreement shall remain in full force and effect.
- 8. ATG further reserves the right, at its sole option, to unilaterally terminate this Agreement at any time as a result of information not disclosed to ATG in the Package or as a result of any change in circumstances outside of ATG's control, which may lessen ATG's ability to obtain short sale approval authority from the lien holder(s), including, **but not limited to**, changes in Seller's financial information, property condition, market factors, discovery of fraud, discovery of hidden terms or hidden agreements between Seller and Buyer, including hidden post-closing rent-back agreements, etc., which would lessen ATG's ability to coordinate short sale approval authority from the lien holder(s) regarding the Property. In the event that ATG chooses to terminate this Agreement under the terms of this provision, ATG shall serve written Notice to Seller's Attorney of said termination.
- 9. Seller and Seller's Attorney agree to cooperate with any and all written and verbal documentation requests submitted to Seller and Seller's Attorney by ATG and shall respond to each documentation request within two (2) business days after receipt of each documentation request from ATG.

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- 10. Fee: Seller shall ensure that ATG receives at the closing of the sale of the Property an amount equal to one percent (1%) of the purchase price, or a minimum of \$2,000.00, whichever is greater, as compensation for the services described herein ("Seller Closing Fee," "Short Sale Coordination Fee," or "Fee"). This Fee shall be shown on the HUD-1 Settlement Statement as a "Seller Closing Fee" or "Short Sale Coordination Fee" and shall be paid by Seller from the closing proceeds. In the event that the lien holders deny Seller's request for a short sale, no fee will be due and owing to ATG.
- 11. Seller understands and agrees that ATG will be serving only as coordinator of the short sale approval of the Property with existing lien holder(s) and will not be rendering any legal advice or legal services or financial advice to Seller or any other party in connection with its service as short sale coordinator for the short sale of the Property.
- 12. Seller understands that a short sale transaction may have implications that would require the legal advice and counsel of a lawyer and that Seller should consult a lawyer for legal advice and counsel regarding same.
- 13. Seller understands that a short sale transaction may have implications on Seller's federal and/or state tax liability and that Seller should consult the IRS or tax accountant of Seller's choosing for additional information and counsel regarding same.
- 14. Seller understands that ATG is not a "Foreclosure Consultant," "Distressed Property Consultant," or real estate agent. Seller further understands that ATG is not attempting to "save" the Property from foreclosure. Seller understands and acknowledges that ATG is attempting to facilitate the sale of the Property at a price below the full balance of the liens against the Property.
- 15. Seller understands and acknowledges that the short sale coordination process can be a long and drawn-out process (sometimes several months or more) and that there is **NO** guarantee that the lien holders will cooperate with the short sale process before the lien holders complete the foreclosure process.
- 16. Seller agrees NOT to hold ATG, or any of its affiliates, partners, and/or associates, legally, financially, or in any other way responsible if the short sale process for any reason does not result in Seller's ability to sell the Property and/or stop the foreclosure, if any, from taking place.
- 17. Seller agrees to hold ATG, and its successors and assigns, harmless and blameless from any debt, action, suit, payment, or any liability whatsoever that may be associated in any way with this Agreement or of notes, deeds, or trust or other liens on the Property.
- 18. This Agreement shall, in all respects, be interpreted, construed, and governed under and in accordance with the laws of the State of Illinois.
- 19. This Agreement constitutes the sole agreement of the parties hereto and supersedes any prior understandings or written or oral agreements between the parties respecting the subject matter within it, and no amendment, modification, or alteration of the terms hereof shall be binding unless the same be in writing, dated subsequent to the date hereof, and duly executed by the parties hereto.
- 20. This Agreement shall extend to and shall, as the case may require, inure to the benefit of and be binding upon the respective successors, heirs, executors, administrators, legal representatives, and assigns of each of the parties hereto.
- 21. If any clause, phrase, provision, or portion of this Agreement or the application thereof to any person or circumstance shall be invalid, illegal, or unenforceable under applicable law, such event shall not affect, impair, or render invalid or unenforceable the remainder of this Agreement nor any other clause, phrase, provision, or portion hereof, nor shall it affect the application of any clause, phrase, provision, or portion hereof to the other persons or circumstances.
- 22. Time is of the essence of this Agreement and of each and every provision thereof.
- 23. Facsimile or digital signatures shall be sufficient for purposes of executing, negotiating, and finalizing this Agreement.
- 24. Counterparts. This Agreement may be executed in multiple counterparts, each one of which shall be deemed an original but all of which, taken collectively, shall be deemed a single instrument; provided, that this Agreement shall not be enforceable against any party hereto unless all parties hereto have executed at least one (1) counterpart.
- 25. Business Days/Hours: Business Days are defined as Monday through Friday, excluding Federal holidays. Business Hours are defined as 8:00 A.M. to 6:00 P.M. Chicago time.
- 26. Notice to Parties: Any and all Notice required or permitted to be given hereunder may be given by one party or its attorney to the other party or its attorney. Notice to any one of a multiple party shall be sufficient Notice to all. Notice shall be given in the following manner:
 - a. By personal delivery. Notice shall be effective as of the date of receipt by the addressee thereof; or
 - b. By mailing to the addresses recited below by regular mail and by certified mail, return receipt requested. Notice served by certified mail shall be effective on the date of mailing; or

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- c. By facsimile transmission if a facsimile number has been furnished by the recipient party or the recipient party's attorney to the sending party or is shown on this Agreement. Notice shall be effective as of the date and time of transmission, provided that Notice is transmitted during non-business hours, the effective date and time of Notice is the first hour of the next Business Day after transmission; or
- d. By e-mail transmission if an e-mail address has been furnished by the recipient party or the recipient party's attorney to the sending party or is shown on this Agreement. Notice shall be effective as of the date and time of e-mail transmission, provided that, in the event e-mail Notice is transmitted during non-business hours, the effective date and time of Notice is the first hour of the next Business Day after transmission.
- e. By commercial overnight delivery (e.g., UPS, FedEx). Such Notice shall be effective on the next Business Day following deposit with the overnight delivery company.

If to Seller or Seller's Attorney:	If to ATG:
	Short Sale Coordination Department
	Attorneys' Title Guaranty Fund, Inc.
	One South Wacker Drive, 24 th Floor
	Chicago, IL 60606-4650
Fax:	Fax: 312.224.0233
E-mail:	E-mail: shortsales@atgf.com

- 27. ATG shall treat all information obtained under this Agreement in accordance with the terms and conditions of ATG's Privacy Policy Notice, which is attached hereto as "Exhibit A" and incorporated by reference as though fully set forth herein.
- 28. The following notice is hereby provided to Seller in compliance with the Mortgage Assistance Relief Services Rule (16 C.F.R. Part 322) promulgated by the Federal Trade Commission, which implements the 2009 Omnibus Appropriations Act, Public Law 111-8, section 626, 123 Sta. 524 (March 11, 2009), as clarified by the Credit Card Accountability Responsibility and Disclosure Act of 2009, Public Law 111-24, section 511, 123 Stat. 1734 (May 22, 2009):

IMPORTANT NOTICE

- 1. You may stop doing business with us at any time. You may accept or reject the offer of mortgage assistance we obtain from your lender [or servicer]. If you reject the offer, you do not have to pay us. If you accept the offer, you will have to pay us an amount equal to one percent (1%) of the purchase price, or a minimum of \$2,000.00, whichever is greater (as described in Paragraph 10 of this Agreement), for our services.
- 2. ATG is not associated with the government, and our service is not approved by the government or your lender.
- 3. Even if you accept this offer and use our service, your lender may not agree to change your loan.
- 4. If you stop paying your mortgage, you could lose your home and damage your credit rating.

ATG FORM 4164 FOR USE IN: ALL STATES © ATG (REV. 10/11) Page 3 of 5

IN WITNESS WHEREOF, the parties hereto have executed this Agree	ement as of the day and year first above written.
Signature of Seller	Name of Seller (Print)
Signature of Seller	Name of Seller (Print)
Signature of Seller's Attorney	Name of Seller's Attorney (Print)
ATTORNEYS' TITLE GUARANTY FUND, INC.	
By:	
Its Authorized Signatory	

EXHIBIT A

ATTORNEYS' TITLE GUARANTY FUND. INC.

and Affiliated Companies

PRIVACY POLICY NOTICE

This Notice sets forth the privacy policies and practices of Attorneys' Title Guaranty Fund, Inc. (ATG®) and its affiliated companies, Auctions by ATG, ATG Trust Company, NLT Title, L.L.C., and The Judicial Sales Corporation. This Notice identifies the sources of nonpublic, personal information we collect regarding our customers, and specifies what measures we take to secure that information.

The words "you" and "your" mean all of our consumer customers who have a business relationship with us, such as:

- Insureds under ATG title insurance policies;
- § Parties to real estate transactions;
- Persons with a trust account; and
- δ Borrowers who have a loan account or who have applied for a loan.
- "We," "our," and "us" mean ATG and its affiliated companies listed above.

"Nonpublic personal information" means information about you that we collect in connection with providing a financial product or service to you. Non-public personal information does not include information that is available from public sources, such as telephone directories or government records.

An "affiliate" is a company we own or control, a company that owns or controls us, or a company that is owned or controlled by the same company that owns or controls us. Ownership does not mean complete ownership, but means owning a sufficient share to have

A "nonaffiliated third party" is a company that is not an affiliate of ours.

THE INFORMATION WE COLLECT

We collect nonpublic, personal information about you from the following sources:

- Information we receive from you on title insurance applications or other forms associated with your transaction with us;
- § Information from a consumer reporting agency;
- § Miscellaneous information about your transaction that becomes part of our file on your transaction with us; and
- § Information about your transactions with nonaffiliated third parties.

We do not disclose any nonpublic, personal information about you to anyone, except as authorized by law.

THE CONFIDENTIALITY, SECURITY, AND INTEGRITY OF YOUR NONPUBLIC PERSONAL INFORMATION

We restrict access to nonpublic, personal information about you to only those employees who need to know that information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to protect your nonpublic personal information from unauthorized use.

NONPUBLIC PERSONAL INFORMATION AND NONAFFILIATED THIRD PARTIES

You have entrusted us with important personal information about you, and we will not disclose your nonpublic, personal information to nonaffiliated third parties, except as permitted by law.

NONPUBLIC PERSONAL INFORMATION AND FORMER CUSTOMERS

We do not disclose nonpublic, personal information about former customers, except as permitted by law.

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REQUIRED DOCUMENTATION CHECKLIST

Sell	ler(s):			
Pro	Name of Seller perty Address:		Name of Seller	
110	Street Address	City	State	Zip
ina pre the PL	APPORTANT INSTRUCTIONS: ALL of the documentation listed ability to produce the required documents in a timely manner will be deferred and must be legible. All documents listed below must be deleted as Short Sale Coordination Agreement. All documents must have current LEASE NOTE: Once ATG has made contact with the lien holder (not sale request. If additional documentation is required, we will contact the contact with the lien holder (not sale request.)	adversely affect the sho ivered to ATG [®] within five ent dates. s), additional documentat	rt sale process. E-m ve (5) business days	nailed PDFs are after the date of
	REQUIRED DOC (PLEASE CHECKMARK ITEMS		.)	
S	ELLER'S ATTORNEY			
	Signed ATG Short Sale Coordination Agreement (ATG Form 416-	4).		
	Title Commitment. The effective date of the Title Commitment r Coordination Agreement. If ATG will not be conducting the Sear provider to be used.			
	NOTE: The short sale process cannot begin until ATG acknow	ledges receipt of the type	ed title commitmen	t.
	Please enter ATG Commitment number here:			
	Preliminary Seller's Closing Statement, estimating closing costs a use the Seller's Closing Statement to generate the preliminary HUI review the Seller's short sale request.			
	Attorney approval/modification correspondence pertaining to any	contract modifications agr	eed upon by the part	ies.
SE	CLLER(S)			
	Signed ATG Short Sale Coordination Agreement (ATG Form 416	4).		
	Authorization to Release Information (ATG Form 4166) (Provide	a separate authorization fo	or each and every mo	ortgage.)
	Request for Consideration of Short Sale (ATG Form 4167)			
	Hardship Letter (ATG Form 4170).			
	Financial Information Form (ATG Form 4168).			
	Completed Mortgage/Lien Information Form (ATG Form 4169).			
	Mortgage statement for each outstanding mortgage.			
	Bank statements from the most recent two (2) months (must provide	de all pages).		
	Copies of two (2) most recent pay stubs (must include year-to-date	e amount). Submit two (2)	pay stubs for each S	eller.
	Copies of Income Tax Returns (Federal and State) for previous two	o years (signed, with all pa	ages).	
	Request for Individual Tax Return Transcript (IRS Form 4506-T).	(signed, dated, and fully o	completed)	

- If loan is non-escrowed, provide the following:
 - § Copy of most recent property tax bill(s) with a copy of the canceled check showing payment;
 - § Copy of current insurance declaration page for all applicable coverage types (must show premium amount for homeowner's, flood, and wind);
 - Proof of payment of Homeowner's Association Fees (if applicable).
- If non-owner occupied, provide the following:
 - Lease(s) if tenant(s) reside in the property;
 - § Rent receipt;
 - Profit and loss statement.

SELLER'S REAL ESTATE BROKER

Copy of valid, fully-executed Contract (with proposed closing date), including full name(s) of Seller(s) and Buyer(s), and any Riders and Disclosures (Signed Offer).

NOTE: Do not use the term "Owner of Record" in lieu of the name(s) of Sellers in the Contract, Riders, or Short Sale Addendum. Correct Contract documents before submitting them to ATG.

- Short Sale Addendum to Contract (now required by most lenders to approve a short sale)
- Broker's Commission Statement.
- Listing Agreement.

NOTE: Must not expire before 6-12 mos. from submission

BUYER

Buyer's mortgage pre-approval letter (or proof of funds (bank statement) if cash transaction).

NOTE: Mortgage pre-approval letter must be on letterhead of the lender/mortgage broker, must be signed and dated, and must state the pre-approved loan amount.

Signed and completed Buyer Information Form (ATG Form 4172)

SELLER, BUYER, AND THEIR RESPECTIVE REAL ESTATE BROKERS

Signed Affidavit of Arm's Length Transaction (ATG Form 4173): Must be signed by Seller(s) and Buyer(s) and their respective Real Estate Brokers.

> Please return all information required in this checklist to ATG by E-mail: shortsales@atgf.com or Fax: 312.224.0233.

ATG FORM 4165 © ATG (REV. 8/12)

AUTHORIZATION TO RELEASE INFORMATION

Lender:			
Loan/Account No.:			
Property Address:			
Street Address	City	State	Zip
I/We, the undersigned, currently residing at			
hereby authorize you to release to <u>Betsy Green and Karen Co</u> of ATG any and all information concerning my/our mortgage obtain an approval of the short sale payoff regarding my/our leads to the short sale payoff regarding	s, financial obligations, and all other	credit matters as ma	y be required to
It is my/our desire for ATG to facilitate a short sale of m necessary correspondence (written or verbal) must be made electronic, facsimile, or carbon copy of this authorization shall	and forwarded to ATG for processing	ng of this request.	
The information released to ATG shall only be used in the lender(s), judgment creditor(s), lienor(s), homeowners' associ		ayoff request with	my/our current
This Authorization to Release Information shall remain in effe	ect until revoked by the undersigned in	n writing.	
Signature of Borrower	Social Security Number		Date
Name of Borrower (Print)	Daytime Phone		
Signature of Co-Borrower	Social Security Number		Date
Name of Co-Borrower (Print)	Daytime Phone		

(Submit separate Authorization for each mortgage.)

NOTE: For loans serviced by Bank of America, please use the current Bank of America Short Sale Third-Party Authorization Form, available at www.bankofamerica.com, or contact the ATG Short Sale Coordination Department at 312.752.1190 (phone) or shortsales@atgf.com to obtain the correct form.

ATG SHORT SALE COORDINATION DEPARTMENT One South Wacker Drive | 24th Floor | Chicago, Illinois 60606-4654 Telephone 312.752.1190 | Facsimile 312.224.0233 | E-mail shortsales@atgf.com

REQUEST FOR CONSIDERATION OF SHORT SALE FORM

Servicer:				Loan Numbe	r:
Borrower's name	BORROWER		Co-borrower's	CO-BORROWER	
Social Security Date number of birth			Social Security number		Date of birth
Home phone number with area code			Home phone number with area code	8	
Cell or work number with area code			Cell or work number with area code		
I want to:	☐ Keep th	ne Property	☐ Sell the Property		
The property is my:	☐ Primary	/ Residence	☐ Second Home	☐ Inv	restment
The property is:	☐ Owner	Occupied	☐ Renter Occupied	□ Vac	cant
Mailing address					
Property address (if same a	s mailing address, ju	st write same)		E-mail address	
Is the property listed for sall Have you received an offer Date of offer Agent's Name: Agent's Phone Number: For Sale by Owner? □ Yes	on the property? mount of offer \$		If yes, please complete Counselor's Name: Agency Name: Counselor's Phone Nu	the following:	
Who pays the real estate tax bill on your property? □ I do □ Lender does □ Paid by condo or HOA Are the taxes current? □ Yes □ No Condominium or HOA Fees □ Yes □ No \$ Paid to:			☐ I do ☐ Lender do Is the policy current? Name of Insurance Co.	insurance premium for y bes □ Paid by Condo o □ Yes □ No ::	r HOA
Have you filed for bankrup Has your bankruptcy been	4. [1. [1] [1] - 1 [1		Chapter 13 Filing C		
Additional Liens/Mortgage	es or Judgments on th	nis property:			
Lien Holder's Name/Service	er	Balance	Conta	ct Number	Loan Number
			j.		
		HARDSHIF	AFFIDAVIT		
I am having		e requesting review under by monthly payment becau			that apply):
☐ My household income has been reduced. For example: underemployment, reduced pay or hours, decline in business earnings, death, disability or divorce of a borrower or co-borrower.				맛이 빠른 하는 것이 아니는 얼마가 어떻게 하면 아니는 아니는 아니는 아니는 아니는 아니는 아니다.	nd I am overextended with me equity or other debt.
☐ My expenses have increased. For example: monthly mortgage payment reset, high medical or health care costs, uninsured losses, increased utilities or property taxes.			☐ My cash reserves, including all liquid assets, are insufficient to maintain my current mortgage payment and cover basic living expenses at the same time.		
☐ My household income ha	as been reduced due	to unemployment.	□ Other:		
Explanation (continue on b	oack of page 3 if nece	essary):			
a-	M SCI	~0.			

Loan Number:	

INCOME/EXPENSES FOR HOUSEHOLD

Number of People in Household:

Monthly Household	Income	Monthly Household Ex	penses/Debt	Househol	d Assets
Monthly Gross Wages	\$	First Mortgage Payment	\$	Checking Account(s)	\$
Overtime	\$	Second Mortgage Payment	\$	Checking Account(s)	\$
Child Support / Alimony / Separation ²	\$	Insurance	\$	Savings/ Money Market	\$
Social Security/SSDI	\$	Property Taxes	\$	CDs	\$
Other monthly income from pensions, annuities or retirement plans	\$	Credit Cards / Installment Loan(s) (total minimum payment per month)	\$	Stocks / Bonds	\$
Tips, commissions, bonus and self-employed income	\$	Alimony, child support payments	\$	Other Cash on Hand	\$
Rents Received	\$	Net Rental Expenses	\$	Other Real Estate (estimated value)	\$
Unemployment Income	\$	HOA/Condo Fees/Property Maintenance	\$	Other	\$
Food Stamps/Welfare	\$	Car Payments	\$	Other	\$
Other (investment income, royalties, interest, dividends etc.)	\$	Other	\$	Do not include the value retirement plans when copension funds, annuities,	alculating assets (401k,
Total (Gross Income)	\$	Total Debt/Expenses	\$	Total Assets	\$

INCOME MUST BE DOCUMENTED

¹Include combined income and expenses from the borrower and co-borrower (if any). If you include income and expenses from a household member who is not a borrower, please specify using the back of this form if necessary.

²You are not required to disclose Child Support, Alimony or Separation Maintenance income, unless you choose to have it considered by your servicer.

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer 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, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan modification in person. If you do not wish to furnish the information, please check the box below.

BORROWER	$\ \square$ I do not wish to furnish this information		CO-BORROWER	\square I do not wish to furnish this information
Ethnicity:	☐ Hispanic o☐ Not Hispar		Ethnicity:	☐ Hispanic or Latino ☐ Not Hispanic or Latino
Race:	☐ Asian ☐ Black or Af	ndian or Alaska Native rican American vaiian or Other Pacific Islander	Race:	☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White
Sex:	☐ Female ☐ Male		Sex:	□ Female □ Male
		To be compl	eted by interviewer	
This request was taken by: Interviewer's Name (print or type)		e) & ID Number	Name/Address of Interviewer's Employer	
☐ Face-to-face interview☐ Mail☐ Telephone☐ Internet		Interviewer's Signature	Date	
		Interviewer's Phone Number (in	clude area code)	

Loan Number:	

ACKNOWLEDGEMENT AND AGREEMENT

In making this request for consideration under the Making Home Affordable Program I certify under penalty of perjury:

- 1. That all of the information in this document is truthful and the event(s) identified on page 1 is/are the reason that I need to request a modification of the terms of my mortgage loan, short sale or deed-in-lieu of foreclosure.
- 2. I understand that the Servicer, the U.S. Department of Treasury, or their agents may investigate the accuracy of my statements and may require me to provide supporting documentation. I also understand that knowingly submitting false information may violate Federal law.
- 3. I understand the Servicer will pull a current credit report on all borrowers obligated on the Note.
- 4. I understand that if I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this document, the Servicer may cancel any Agreement under Making Home Affordable and may pursue foreclosure on my home.
- 5. That my property is owner-occupied; I have not received a condemnation notice; and there has been no change in the ownership of the Property since I signed the documents for my existing mortgage.
- 6. I am willing to provide all requested documents and to respond to all Servicer questions in a timely manner.
- 7. I understand that the Servicer will use the information in this document to evaluate my eligibility for a loan modification or short sale or deed-in-lieu of foreclosure, but the Servicer is not obligated to offer me assistance based solely on the statements in this document.
- 8. I am willing to commit to credit counseling if it is determined that my financial hardship is related to excessive debt.
- 9. If I was discharged in a Chapter 7 bankruptcy proceeding subsequent to the execution of the Loan Documents, or am currently entitled to the protections of any automatic stay in bankruptcy, I acknowledge that Servicer is providing the information about the Making Home Affordable program at my request and for informational purposes, and not as an attempt to impose personal liability for the debt evidenced by the Note.
- 10. I understand that the Servicer will collect and record personal information, including, but not limited to, my name, address, telephone number, social security number, credit score, income, payment history, government monitoring information, and information about account balances and activity. I understand and consent to the disclosure of my personal information and the terms of Making Home Affordable Agreement by Servicer to (a) the U.S. Department of the Treasury; (b) Fannie Mae and Freddie Mac in connection with their responsibilities under the Homeowner Affordability and Stability Plan; (c) any investor, insurer, guarantor or servicer that owns, insures, guarantees or services my first lien or subordinate lien (if applicable) mortgage loan(s); (d) companies that perform support services in conjunction with Making Home Affordable; and (e) any HUD certified housing counselor.
- 11. I understand that if Servicer offers me a trial period plan under the Making Home Affordable Program, and I fail to accept or complete the trial plan for any reason, including, for example, declining the trial plan offer, failing to accept the trial plan offer, failing to make trial plan payments in a timely manner, or failing to accept a final modification at the end of the trial period, I may permanently lose eligibility for a modification under the Making Home Affordable Program and any other modification program offered by Servicer.

REQUEST FOR CONSIDERATION OF SHORT SALE FORM

	Loan Number:			
BORROWER SIGNATURE	 Date:	/	/	
CO-BORROWER SIGNATURE	 Date:	/	/	

HOMEOWNER'S HOTLINE

If you have questions about this document or the modification process, please call your Servicer.

If you have questions about the program that your Servicer cannot answer or need further counseling,
you can call the Homeowner's HOPE™ Hotline at 1-888-995-HOPE (4763). The Hotline can help answer questions
about the program and offers free HUD-certified counseling services in English and Spanish.



NOTICE TO BORROWERS

Be advised that by signing this document you understand that any documents and information you submit to your Servicer in connection with the Making Home Affordable Program are under penalty of perjury. Any misstatement of material fact made in the completion of these documents including by not limited to misstatement regarding the occupancy in your home, hardship circumstances, and/or income, expenses, or assets will subject you to potential criminal investigation and prosecution for the following crimes: perjury, false statements, mail fraud, and wire fraud. The information contained in these documents is subject to examination and verification. Any potential misrepresentation will be referred to the appropriate law enforcement authority for investigation and prosecution. By signing this document, you certify, represent and agree that: "Under penalty of perjury, all documents and information I have provided to Lender in connection with the Making Home Affordable Program, including the documents and information regarding my eligibility for the program, are true and correct."

If you are aware of fraud, waste, abuse mismanagement or misrepresentation affiliated with the Troubled Asset Relief Program, please contact the SIGTARP Hotline by calling 1-877-SIG-2009 (toll-free), 202-622-4559 (fax), or www.sigtarp.gov. Mail can be sent to Hotline Office of the Special Inspector General for Troubled Asset Relief Program, 1801 L St. NW, Washington, DC 20220.

Servicer:	Loan Number:
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HELP FOR AMERICA'S HOMEOWNERS.



Dodd-Frank Certification

The following information is requested by the federal government in accordance with the Dodd-Frank Wall Street Reform and Consumer Protection Act (Pub. L. 111-203). You are required to furnish this information. The law provides that no person shall be eligible to receive assistance from the Making Home Affordable Program, authorized under the Emergency Economic Stabilization Act of 2008 (12 U.S.C. 5201 et seq.), or any other mortgage assistance program authorized or funded by that Act, if such person, in connection with a mortgage or real estate transaction, has been convicted, within the last 10 years, of any one of the following: (A) felony larceny, theft, fraud or forgery, (B) money laundering or (C) tax evasion.

☐ I have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real	I have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real estate transaction:
connection with a mortgage or real estate transaction:	
(a) felony larceny, theft, fraud or forgery,(b) money laundering or(c) tax evasion	(a) felony larceny, theft, fraud or forgery,(b) money laundering or(c) tax evasion
In making this certification, I/we certify under penalty of p is truthful and that I/we understand that the Servicer, the may investigate the accuracy of my statements by pe automated searches of federal, state and county databas of such crimes. I/we also understand that knowingly sub-	e U.S. Department of the Treasury, or their agents erforming routine background checks, including ses, to confirm that I/we have not been convicted

FINANCIAL INFORMATION

BORROWER				CO-BORROWER			
Borrower's Name:				Co-Borrower's Name:			
Social Security No.:	Home Phone	:	Cell/Work Phone:	Social Security No.:	Home Phone:	Cell/Work Phone:	
Property Address:	I.						
EMPLOYMENT							
Borrower's Employer:		How Long?		Co-Borrower's Employer:	How Long?		
Position:	Gross pay/pe \$	riod:	How often paid?	Position:	Gross pay/period: \$	How often paid?	
No. of Dependents:	Net pay/perions	od:	Commission/Bonus:	No. of Dependents:	Net pay/period: \$	Commission/Bonus: \$	
Other monthly income – Do	escription:		Amount: \$	Other monthly income – Do	escription:	Amount: \$	
Other monthly income – Do	escription:		Amount: \$	Other monthly income – Do	escription:	Amount: \$	
MONTHLY EXPENS	SES						
HOUSING			MISCELLANEOUS		OTHER		
Hazard Insurance	\$		Health Insurance	\$	Bank/Finance	\$	
Electric/Gas			Medical Bills		Credit Card (1)		
Phone			Food		Credit Card (2)		
Water & Sewer			Auto Payment (1)		Credit Card (3)		
Property Maintenance			Auto Payment (2)		Personal/Life Insurance		
First Mortgage			Auto Insurance		Club/Union Dues		
Second Mortgage			Auto Gas		Cable TV		
H.O.A./Condo			Auto Maintenance		Religious Contributions		
Property Taxes			Child Care		Dry Cleaning		
Other Liens			Child Support		Clothing		
Other		Alimony		Entertainment			
Other			Other		School Tuition		
ACCOUNT BALANC	CES AND A	SSETS	1	L	1		
Checking Account Balance	\$		Savings Account Balance	\$	CDs, Stocks, 401K, IRA, Et		
Approximate Value of Home	\$		Other Assets – Description:	\$	Other Assets – Description	n:	
The Property is my/our The Property is Owner					If Renter Occupied, what for the Property? \$	is the monthly rental income	
ADDITIONAL FINA	NCIAL IN	FORMATI	ON				
Have you ever filed for ban	kruptcy? \	∕es No If y	ves: "Chapter 7" Chapte	er 13			
Bankruptcy Case No.:			Filing Date:	Has you	r bankruptcy been dischar	ged? " Yes " No	
HAZARD INSURAN	CE INFOR	MATION					
Have any hazard insurance claim payments been paid to you by any property hazard insurance companies within the last five (5) years of the date of completion of this form as provided by you below? "Yes "No If the answer is "Yes," were the repairs completed? "Yes "No							
Please describe the nature of the claim(s), including the date(s) of the occurrence(s), and provide the amount of the insurance payment(s) issued to you. Attach additional sheets to explain, if necessary.							
ACKNOWLEDGEM	ENT AND	AGREEM	ENT				
Certification: I/We certify that the information provided in this Financial Information form is true and correct as of the date set forth opposite my/our signature(s) on the form and acknowledge my/our understanding that any intentional or negligent misrepresentation(s) of the information contained on the form may result in a civil liability and/or criminal penalties. I/We authorize the lending institution to verify this information, including verification of employment and account balances.							
Borrower's Signature			Date	Co-Borrower's Signature		Date	

MORTGAGE/LIEN INFORMATION

Seller(s):				
Name of Seller	Name of Seller			
roperty Address:Street Addre	Address: Street Address City State			
	MORTGAGES/LIENS	}		
List <u>ALL</u> known mortgages.	, liens, or potential liens that	could be attache	d to the property.	
Mortgage/Lien Holder's Name (Name of company to which you make payments)	Loan/Account Number	Current Balance	Date of Last Payment	Phone
1.				
2.				
3.				
4.				
5.				
OTI	HER FINANCIAL OBLIGA	ATIONS		
List A Please include property taxes, IRS liens,	ALL other known financial of homeowners' association fee		utomobile loans, utili	ties, etc.
Creditor's Name	Account Number	Current Balance	Date of Last Payment	Phone
1.				
2.				
3.				

NOTE: Many lenders and investors require their own forms/short sale applications. Please contact your lender(s) to retrieve their forms or request them from ATG.

4.

5.

6.

7.

8.

9.

10.

HARDSHIP LETTER

orrower(s):	Name of Borrower		Name of Co-Borrower	
perty Address:	Name of Borrower Street Address	City	State	Zip
tgage Company:	Succe Address		oan No.:	
	Please type or neatly write a bric to financial hardship and reasons fo	ef statement of events	that led	
s	ignature of Borrower		Date	
Sig	nature of Co-Borrower		Date	



Department of the Treasury Internal Revenue Service **Request for Transcript of Tax Return**

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

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 "Order a Transcript" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return.** There is a fee to get a copy of your return.

	,	,				
1a	Name : shown	shown on tax return. If a joint return, enter the name first.		cial security number on tax r, or employer identification	return, individual taxpayer identificati number (see instructions)	ion
2a	If a joir	nt return, enter spouse's name shown on tax return.	2b Secon identif	d social security numbe ication number if joint to	r or individual taxpayer ax return	
3	Current	name, address (including apt., room, or suite no.), city, state,	and ZIP cod	le (see instructions)		
4	Previou	s address shown on the last return filed if different from line 3	(see instruc	tions)		
		anscript or tax information is to be mailed to a third party (suce	h as a mortg	age company), enter the t	hird party's name, address,	
you ha on line	eve filled 5, the	e tax transcript is being mailed to a third party, ensure that yo d in these lines. Completing these steps helps to protect your IRS has no control over what the third party does with the info prmation, you can specify this limitation in your written agreem	privacy. Onc ormation. If y	e the IRS discloses your II ou would like to limit the ti	RS transcript to the third party liste	ed
6		script requested. Enter the tax form number here (1040, 106 per per request. ►	5, 1120, etc.) and check the appropria	te box below. Enter only one tax t	form
а	chang Form	rn Transcript, which includes most of the line items of a tages made to the account after the return is processed. Tran 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, eturns processed during the prior 3 processing years. Most re	scripts are o and Form 1	only available for the follo 20S. Return transcripts a	wing returns: Form 1040 series, are available for the current year	
b	asses	unt Transcript, which contains information on the financial sisments, and adjustments made by you or the IRS after the restimated tax payments. Account transcripts are available for more	turn was filed	d. Return information is lim	nited to items such as tax liability	
С		ord of Account, which provides the most detailed informat script. Available for current year and 3 prior tax years. Most re				
7		cation of Nonfiling, which is proof from the IRS that you did June 15th. There are no availability restrictions on prior year r				
	these transo For ex purpo on. If ye	W-2, Form 1099 series, Form 1098 series, or Form 5498 series information returns. State or local information is not included cript information for up to 10 years. Information for the current example, W-2 information for 2010, filed in 2011, will not be avaisses, you should contact the Social Security Administration at 1 ou need a copy of Form W-2 or Form 1099, you should first courn, you must use Form 4506 and request a copy of your return.	d with the Forman year is generally generally with year is generally with the second with the part of	orm W-2 information. The rally not available until the e IRS until 2012. If you need 13. Most requests will be payer. To get a copy of the I	IRS may be able to provide this year after it is filed with the IRS. ed W-2 information for retirement rocessed within 45 days	
9	years	or period requested. Enter the ending date of the year or or periods, you must attach another Form 4506-T. For requarter or tax period separately.				
		k this box if you have notified the IRS or the IRS has notified red identity theft on your federal tax return				
Cautio	n. Do no	ot sign this form unless all applicable lines have been completed.				
inform matte	ation re rs partn	taxpayer(s). I declare that I am either the taxpayer whose equested. If the request applies to a joint return, either husbaer, executor, receiver, administrator, trustee, or party other that taxpayer. Note. For transcripts being sent to a third party, this	and or wife n an the taxpa	nust sign. If signed by a c yer, I certify that I have the	orporate officer, partner, guardian e authority to execute Form 4506-	, tax
	.		I		Phone number of taxpayer on lin 1a or 2a	ne
Sign		Signature (see instructions)		Date	l	
Here	,)	Title (if line 1a above is a corporation, partnership, estate, or trust)				
		Spouse's signature		Date	.====	

Page 2 Form 4506-T (Rev. 1-2012)

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

What's New

The IRS has created a page on IRS.gov for information about Form 4506-T at www.irs.gov/form4506. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

General Instructions

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

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

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

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

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

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

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

If you filed an individual return and lived in:

Mail or fax to the "Internal Revenue Service" at:

Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address

RAIVS Team Stop 6716 AUSC Austin, TX 73301

512-460-2272

Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota,

RAIVS Team Stop 37106 Fresno, CA 93888

Utah, Washington, Wisconsin, Wyoming

559-456-5876

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

Stop 6705 P-6 Kansas City, MO 64999

RAIVS Team

816-292-6102

Chart for all other transcripts

If you lived in or your business was in:

Mail or fax to the "Internal Revenue Service" at:

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or

RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409

801-620-6922 F.P.O. address

Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin

RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250

859-669-3592

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

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

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

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

Line 6. Enter only one tax form number per

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

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

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

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

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

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

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,

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 Products Coordinating Committee SE:W:CAR:MP:T:M:S 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.

BUYER INFORMATION

Snort Sale Pro	perty Address:					
		Street Addı	ess	City	State	Zip
Buyer:						
	Nam	ne of Buyer		_		
	Current	Street Address			Phone	
	City	State	Zip		Date of Birth	
	Signat	ture of Buyer		First Five Digits of Social Sect	urity No.	Date
Buyer:						
	Nan	ne of Buyer		_		
	Current	Street Address		_	Phone	
	City	State	Zip		Date of Birth	
	Signat	ture of Buyer		First Five Digits of Social Secu	urity No.	Date
	Signa	are or Buyer		That I ive Digita of Boelal Beel	uiity 140.	Daic

AFFIDAVIT OF ARM'S LENGTH TRANSACTION

Pro	perty Address ("Property"):	Street Address		City	State	Zip	
1.	That the undersigned are all of the Seller(s) and Buyer(s) with respect to that certain contract for the sale and purchase of the above-referenced Property dated ("Contract").						
2.	That this transaction is an "Arm's Lee each of whom is acting in his or her With respect to those persons signing interests of the respective principal(s).	own self-interest, and t this affidavit as Agen	hat the sale price is based of	on the fair ma	rket value o	f the Property.	
3.	That no party to this Contract is a family member or business associate of or shares a business interest with the Seller(s), Mortgagor(s) or Mortgagee(s).						
4.	That there are no hidden terms or hidden agreements or special understandings between the undersigned Seller(s) or Buyer(s) or among their respective Agent(s) as listed below in order to entice, induce or otherwise defraud the Seller's Mortgagee in this transaction.						
5.	That this Contract is not assignable by	either party.					
6.	implied, that will allow the Seller(s) t	That neither the Seller(s) and Buyer(s) nor their respective Agent(s) as listed below have any agreements, whether oral, written, or implied, that will allow the Seller(s) to remain in the Property as tenants or to regain ownership of the Property at any time after the successful completion of this short sale transaction.					
7.	That neither the Seller nor the Buyer Property.	r nor any other parties	to this transaction shall rec	eive any pro	ceeds from t	he sale of the	
8.	That no Agent of either the Seller(s) of in the final estimated HUD-1 Settlem the closing escrow.						
9.	Each signatory to this affidavit expressions consideration for discounting the pay Property.						
10.	Certifications made herein are to the b	est knowledge and belie	ef of the undersigned.				
	Signature of Seller	Date	Signature of Bu	ıyer		Date	
	Name of Seller (Print)		Name of Buyer (Print)			
	Signature of Seller	Date	Signature of Bu	ıyer		Date	
	Name of Seller (Print)		Name of Buyer (Print)			
Sub	oscribed and sworn to before me this		Subscribed and sworn to	before me thi	s		
	day of Day Month	Year	day of	Month	1	,, Year	
	Notary Public			Notary Public			

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Signature of Seller's Agent			Signature of Buyer's Agent			
Name as	nd Company of Seller's Agent (Pri	nt)	Name and Company of Buyer's Agent (Print)			
Subscribed and sworn to before me this			Subscribed and swor	n to before me this		
day of		,	day of		,	
Day	Month	Year	Day	Month	Year	
	Notary Public			Notary Public		

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