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General Customer / Realtor Information Worksheet

Please provide the information below for the customer/account requesting a short sale:

Name: ______________________________

Account #: ______________________________

Address of mortgaged property: ______________________________

____

Current address: ______________________________

____

Home phone: ______________________________

Work phone: ______________________________

Current employer: ______________________________

Employer address: ______________________________

____

Tenure with employer: ______________________________

Is the property to be short sold owner-occupied (circle one): Yes No

Realtor name: ______________________________

Address: ______________________________

____

Work phone: ______________________________

Cell phone: ______________________________

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Customer Financial Worksheet (Page 1 of 3)

All information **must be completed** for your Short Sale Application to be considered.

Name:______________________________ **Account #:**______________________________

How were the Mortgage Loan Proceeds used?

Uses		**Amount**		
To purchase this property:		$ ______________		
Payoff other Debt:				
Credit Cards:	$	______________		
Mortgages:	$	______________		
Vehicle (e.g., car, boat):	$	______________		
Living Expenses:	$	______________		
Make Payments on 1st Mortgage:	$	______________		
Home Repairs:	$	______________		
Repairs on other real estate:		$______________	Address:	________________ ________________
Home Upgrades:	$	______________		
Upgrades on other real estate:		$ ______________	Address:	________________ ________________
Purchase other real estate:		$ ______________	Address:	________________ ________________
Down payment on other real estate:		$ ______________	Address:	________________ ________________

Purchase other assets (e.g., car, boat, RV):

$ ________________ Type: ________________
$ ________________ Type: ________________
$ ________________ Type: ________________

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Customer Financial Worksheet (Page 2 of 3)

All information **must be completed** for your Short Sale Application to be considered.

Name:_________________________ **Account #:**_________________________

Other Real Estate Owned:

1. Address: ____________________________________
____

1st Mortgage: Lender: _____________ Balance: $ ____________
2nd Mortgage: Lender: _____________ Balance: $ ____________

2. Address: ____________________________________
____

1st Mortgage: Lender: _____________ Balance: $ ____________
2nd Mortgage: Lender: _____________ Balance: $ ____________

3. Address: ____________________________________
____

1st Mortgage: Lender: _____________ Balance: $ ____________
2nd Mortgage: Lender: _____________ Balance: $ ____________

Other Assets (All assets must be disclosed): Statements for all asset accounts MUST be included.

Automobile/Truck/Motorcycle: Year: __________ Make: _____ Model: _____
Amount Owed: $_____ Lien Holder: _____

Automobile/Truck/Motorcycle: Year: __________ Make: _____ Model: _____
Amount Owed: $_____ Lien Holder: _____

Automobile/Truck/Motorcycle: Year: __________ Make: _____ Model: _____
Amount Owed: $_____ Lien Holder: _____

Retirement Account: Type:____________ Value: __________

Investment Account: Type: ____________ Value: __________

Bank Account: Type:________ Value: _______

Bank Account: Type:________ Value: _______

Savings Account: Type: _________ Value: _________

Other: Description: _________ Value: _______

All assets should be listed. Additional assets not included above may be listed on a separate sheet.

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Customer Financial Worksheet (Page 3 of 3)

All information **must be completed** for your Short Sale Application to be considered.

Name: ____________________ **Account #:**____________________

Monthly Income:

Source Name: ________________ Monthly Gross/Net: $ ________ / _____

Source Name: ________________ Monthly Gross/Net: $ ________ / _____

Source Name: ________________ Monthly Gross/Net: $ ________ / _____

Source Name: ________________ Monthly Gross/Net: $ ________ / _____

Monthly Expenses:

Transportation (gas, maintenance, insurance, etc.): $ __________

Household (food, maintenance, taxes, insurance etc.): $ __________

Utilities: $ __________

HOA: $ __________

Medical: $ __________

Insurance: $ __________

Automobiles/Other: $ __________

Credit Cards: $ __________

Are there any other changes to your financial situation since loan origination that we should be aware of that are not already incorporated into your hardship letter? Please explain fully.

____

____

____

____

____

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1st Mortgage Information Worksheet

Name of first mortgage holder: ______________________________

Address: ______________________________

Phone Number: ______________________________

Fax Number: ______________________________

Name of Account Holder: ______________________________

Account Number: ______________________________

Payment Due: ______________________________

Foreclosure date if applicable: ______________________________

Payoff amount $ ______________________________

Please indicate if accepting (circle one): Settlement Short Sale

Amount of settlement / short sale (if applicable): $ ______________________________

Authorization for First Mortgage Holder to Release Information and Authorization for Green Tree Servicing LLC to Obtain an Updated Credit Report

I (We), ______________________________ hereby gives ________ ______________________ authorization to release any and all information concerning the above-referenced account to Green Tree Servicing LLC ("Green Tree"). I (We) also give authorization for Green Tree to obtain an updated credit report.

Dated this the ___ day of_______ 201___

____
Borrower

____
Co-Borrower

AUTHORIZATION TO RELEASE INFORMATION

I/We hereby authorize you to release any and all information to:
Company: Short Sale Success (Including any of its agents and/or assigns)
Individuals: Deborah Priebe or Randy Asbell

regarding the loan for the below referenced property. This authorization shall remain in effect until I specifically notify my mortgage company either verbally or in writing that this authorization is no longer in effect.

Date of last payment made on loan: ____________________ (if applicable)

Borrower Name/Address: 1st Mortgage Company

________________________________ ________________________________
Print Name

________________________________ 1st Mortgage Account Number
Street Address

________________________________ ________________________________
City, State, Zip

________________________________ ________________________________
Signed Social Security Number

________________________________ __________
Print Name Date

________________________________ ________________________________
Signed Social Security Number

________________________________ __________
Print Name Date

Form **4506-T**

(Rev. January 2010)

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 also call 1-800-829-1040 to order a transcript. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return.** There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.

1b First social security number on tax return or employer identification number (see instructions)

2a If a joint return, enter spouse's name shown on tax return.

2b Second social security number if joint tax return

3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code

4 Previous address shown on the last return filed if different from line 3

5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.

Caution. *If the transcript is being mailed to a third party, ensure that you have filled in line 6 and line 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy.*

6 **Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ ____________

a **Return Transcript,** which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days . . . . ☐

b **Account Transcript,** which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days. . ☐

c **Record of Account,** which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days . . . . ☐

7 **Verification of Nonfiling,** which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days . . ☐

8 **Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2007, filed in 2008, will not be available from the IRS until 2009. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days . . . ☐

Caution. *If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.*

9 **Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

____________ ____________ ____________ ____________

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** *For transcripts being sent to a third party, this form must be received within 120 days of signature date.*

Telephone number of taxpayer on line 1a or 2a

Sign Here

▶ **Signature** (see instructions) Date

▶ **Title** (if line 1a above is a corporation, partnership, estate, or trust)

▶ **Spouse's signature** Date

General Instructions

Purpose of form. Use Form 4506-T to request tax return information. You can also designate a third party to receive the information. See line 5.

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 RAIVS teams, send your request to the team based on the address of your most recent return.

Automated transcript request. You can call 1-800-829-1040 to order a transcript through the automated self-help system. Follow prompts for "questions about your tax account" to order a tax return transcript.

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

If you filed an individual return and lived in:	Mail or fax to the "Internal Revenue Service" at:
Florida, Georgia, North Carolina, South Carolina	RAIVS Team P.O. Box 47-421 Stop 91 Doraville, GA 30362 770-455-2335
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team Stop 6716 AUSC Austin, TX 73301 512-460-2272
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	RAIVS Team Stop 37106 Fresno, CA 93888 559-456-5876
Arkansas, Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, Ohio, Pennsylvania, Rhode Island, Vermont, Virginia, West Virginia	RAIVS Team Stop 6705 P-6 Kansas City, MO 64999 816-292-6102

Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to 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, Tennessee, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409 801-620-6922
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, 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) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Line 6. Enter only one tax form number per request.

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

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

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

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

All others. See Internal Revenue Code 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, and the District of Columbia for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form,** 10 min.; **Preparing the form,** 12 min.; and **Copying, assembling, and sending the form to the IRS,** 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 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.