



Thank you for your interest in our Home Preservation Program!

By expressing your interest to work with us, you have taken the first step in resolving your current situation. Some of the options that may be available to you include:

- **Repayment Plan** – We can consider a payment plan that will fit your budget and possibly bring your account current by the end of the plan.
- **Loan Modification** – This program may allow the terms of your loan to be adjusted and brought current.
- **Home Sales Program** – If your home is currently listed for sale or you are thinking about listing your home with a realtor, Wells Fargo Financial Cards has a team of sales specialists that will work with you and your agent. This team will make the sale process flow as smoothly as possible. If the home's market value is less than the total amount owed, the sales specialist will work closely with you and the realtor to help you resolve this issue in the best way possible.

To see if you qualify for assistance, please complete and return this packet with all required documents. To ensure timely review, please submit all documents together as soon as possible. Listed below are the required¹ documents:

For each borrower or non-borrower who is a wage earner (salary or hourly):

- Copy of the two most recent paystubs (within last 30 days); and
- Copy of the prior year W-2; and
- 4506T-EZ or 4506-T
- Most Recent 1040 Federal Tax Return
- Home Owners Insurance Declaration Page

For each borrower or non-borrower who is self employed:

- Copy of previous two years tax returns with all schedules; and
- Copy of year to date profit/loss statement
- Copy of last 3 months business bank statements showing the deposit amount
- 4506T-EZ or 4506-T
- Most Recent 1040 Federal Tax Return
- Home Owners Insurance Declaration Page

For each borrower or non-borrower who has income such as social security, disability or death benefits, pension, public assistance, or unemployment:

- Copy of benefits statement or letter from the provider; and
- Copy of last 3 months business bank statements showing the benefit deposit amount
- 4506T-EZ or 4506-T
- Most Recent 1040 Federal Tax Return
- Home Owners Insurance Declaration Page

For each borrower or non-borrower who is relying on alimony or child support as income:

- Copy of divorce decree, court order or other written agreement that states the amount of child support or alimony including the period of time over which it will be received; proof of child(s) age(s); and
- Copy of last two months bank statements showing alimony or child support deposit amount
- 4506T-EZ or 4506-T
- Most Recent 1040 Federal Tax Return
- Home Owners Insurance Declaration Page

For each borrower or non-borrower who has rental income:

- Copy of current lease/rental agreement; and
- Copy of last 3 months business bank statements showing rental income deposit
- 4506T-EZ or 4506-T
- Most Recent 1040 Federal Tax Return
- Home Owners Insurance Declaration Page



Wells Fargo Financial Cards
3201 North 4th Avenue
Sioux Falls, South Dakota 57104-0700

If you are in a position to bring your account current without our assistance, please call us at 1 -866-223-1851 during the Central Time Zone hours of 7 a.m. – 9 p.m. Monday – Friday, 7 a.m. – 5 p.m. Saturday and Sunday.

Please fax² or mail your completed package to:

Wells Fargo Financial Cards
Attention: Home Preservation Department
3201 North 4th Avenue
Sioux Falls, SD 57104-0700
Fax: 1-800-851-7519

Please note that it may take up to 30 days for us to review your documents, after we receive all required documentations. We will process your request as quickly as possible. While we consider your request, any scheduled foreclosure sale will not occur pending our determination. If you qualify, any foreclosure sale will not occur pending your timely return of the Substitution of Terms Agreement and first payment. However, if you fail to comply with the terms of the Trial Period Plan and do not make other arrangements with us, your loan will be enforced according to its original terms. This could include foreclosure.

¹**Additional documents may be requested.**

²**Once received by Wells Fargo Financial Cards your faxed information will be kept strictly confidential and secure.**



Detailed Hardship Letter

Account number:

Customer(s) name(s):

Best contact phone number:

Best time and day to be reached:

Please explain to us in writing your reason for delinquency. Please be very specific in the events that have happened as this will be included in the decision of the hardship program.

1. Why are you seeking payment relief on your NowLine account?

2. Approximately, when did this hardship occur?

3. Approximately, how much do you think you can afford for your monthly NowLine payment?

4. Approximately, when will you be able to resume your regular monthly payment?

5. Is the property listed for sale? If yes, please list realtor name and phone number.



6. Are your property taxes and homeowner's insurance paid through an escrow account with your mortgage payment? Yes No

If **no**, please list separately the yearly amount you pay for homeowner's insurance and the yearly amount of your property taxes.

_____ Homeowners Insurance \$ _____ Property Taxes \$

7. Are your property taxes paid up to date? If not, please list amount past due and your plans to resolve the past due amount.

8. Is your homeowners insurance current or expired?

9. How many people including yourself live in your household? List how many dependants you claim.

10. Have you sought help regarding your other mortgages? If **yes**, please explain.

11. Have you sought help regarding your other credit cards? If **yes**, please explain.

I/We understand that the servicer will collect and record personal information, including, but not limited to, my/our name(s), address, telephone number, Social Security number(s), credit score, income, payment history, government monitoring information, and information about account balances and activity. I/We understand and consent to the disclosure of my/ our personal information to (a) the U.S. Department of the Treasury or its agents, (b) any investor, insurer, guarantor or servicer that owns, insures, guarantees or services my/our first lien or subordinate lien (if applicable) mortgage loans(s); (c) companies and or individuals that perform support services in conjunction with home preservation mortgage assistance efforts; (d) auditors, including but not limited to independent auditors, regulators and agencies and (e) any HUD- certified housing counselor.

Borrower Signature Date

Co-Borrower Signature Date



BORROWER		CO-BORROWER	
Borrower's name		Co-borrower's name	
Social security number		Social security number	
Home phone number with area code		Home phone number with area code	
Work number with area code		Work number with area code	
Cell number with area code <input type="checkbox"/> Check here if you consent for us to call your cell phone number using an auto dialer system		Cell number with area code <input type="checkbox"/> Check here if you consent for us to call your cell phone number using an auto dialer system	
Present employer status:	Employment <input type="checkbox"/> Part time <input type="checkbox"/> Full time	Present employer status:	Employment <input type="checkbox"/> Part time <input type="checkbox"/> Full time
Employment start date Month Day Year		Employment start date Month Day Year	
Gross monthly salary	Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly	Gross monthly salary	Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly
Gross commission / bonuses	Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly	Gross commission / bonuses	Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly
Additional income Amount of additional income: \$ Explain source of income:		Additional income Amount of additional income: \$ Explain source of income:	

PROPERTY INFORMATION			
Mailing address			
Property address (if same as mailing address, please note 'same')			
I want to:	<input type="checkbox"/> Keep the property	<input type="checkbox"/> Sell the property	
The property is my:	<input type="checkbox"/> Primary residence	<input type="checkbox"/> Second home	<input type="checkbox"/> Investment
The property is:	<input type="checkbox"/> Owner occupied	<input type="checkbox"/> Renter occupied	<input type="checkbox"/> Vacant



ASSETS	ESTIMATED VALUE	ADDITIONAL INFORMATION
Wells Fargo Financial Secured Property		
Other real estate		Explain real estate asset:
Automobile		Make and model:
Automobile		Make and model:
Checking accounts		
Savings and/or money market accounts		
IRA/Keogh accounts		
401K/ESOP accounts		
Stocks, bonds, CD's		
Life insurance		Cash value:
Other		Explain:

LIABILITIES	MONTHLY PAYMENT	ADDITIONAL INFORMATION
First mortgage payment		Name of Lender:
Second mortgage payment		Name of Lender:
Other mortgage payment		Name of Lender:
Rent payment		
Automobile payment		
Automobile payment		
Auto insurance payment		
Credit card payments		
Personal loan payments		
Utilities		
Health insurance		
Child care expenses		
Alimony payments		
Child support payments		
Student loan payments		
Medical expenses		Remaining balance:
Transportation expenses		
Miscellaneous expenses		Explain:



FAX

TO: Wells Fargo Financial Cards FROM: _____

ATTN: Home Preservation Department NUMBER OF PAGES: _____

FAX: 1-800-851-7519 DATE: _____

PHONE: 1-866-223-1851 _____

Within this fax, I have included:

Pages 3-10 of the Home Preservation Packet and have filled them out to the best of my knowledge

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- Copy of the prior year W-2; and
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Wells Fargo Financial Cards
3201 North 4th Avenue
Sioux Falls, South Dakota 57104-0700

Once received by Wells Fargo Financial Cards your faxed information will be kept strictly confidential and secure.

Additional comments:



Form 4506-T
(Rev. January 2011)
Department of the Treasury
Internal Revenue Service

Request for Transcript of Tax Return

OMB No. 1545-1872

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

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 on tax return. If a joint return, enter the name shown first.
1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.
2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (See instructions)
4 Previous address shown on the last return filed if different from line 3 (See instructions)
5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. 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

For Privacy Act and Paperwork Reduction Act Notice, see page 2.

Cat. No. 37667N

Form 4506-T (Rev. 1-2011)

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 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)

If you filed an individual return and lived in:

Florida, Georgia (After June 30, 2011, send your transcript requests to Kansas City, MO)	RAIVS Team P.O. Box 47-421 Stop 91 Doraville, GA 30362 770-455-2335
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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 AU5C Austin, TX 73301 512-460-2272
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Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	RAIVS Team Stop 37106 Fresno, CA 93888 559-456-5876
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Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	RAIVS Team Stop 6705 P-6 Kansas City, MO 64999 816-292-6102
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Chart for all other transcripts

If you lived in or your business was in:

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 F.P.O. address	RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409 801-620-6922
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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
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Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

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

Line 4. Enter the address shown on the last return filed if different from the address entered on line 3.

Note. If the 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 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, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

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

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

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to 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.