



Member FDIC  Equal Housing Lender

Thank you for considering Union Bank for your mortgage financing.

Please complete and sign the application, disclosures and required forms and return them to us. Once received, we will begin processing your request.

Although not required at the time of application, providing the following information with the completed application will expedite processing your loan request:

Identification:

- Copy of valid photo I.D., such as a driver's license or passport

Income Information:

- Most recent pay stubs for 1 month showing year to date earnings
- W-2's for most recent 2 years
- Bank statements for the most recent 2 months
- Investment account statements for the most recent 2 months
- Retirement account statements for the most recent 2 months
- Pension/Retirement, Social Security/Disability or other types of income; provide copies of the Award Letter, Pension Statement, 1099 and/or other appropriate documentation
- **If self-employed or have rental income**, signed copies of last 2 years personal and business federal tax returns with supporting schedules
- **If self-employed**, a year to date profit and loss statement and balance sheet, signed and dated

Property Information:

- If **purchasing a property**, copy of Purchase and Sale Agreement and a copy of the earnest deposit check
- If **building a home**, copy of the building plans and copy of the construction contract or written cost estimates
- If **refinancing a home**, copy of your most recent property tax bill and homeowner's insurance declaration page

We look forward to serving your lending needs.



Universal Credit Application

(Consumer Residential Real Estate)

1. Type of Application

(Check only one of the four checkboxes; and sign, if joint credit)

☐ Individual Credit. If checked, this is an *Application for Individual Credit* - relying solely on my income and assets.

☐ Individual Credit with Another. If checked, this is an *Application for Individual Credit* - relying on my income and assets and on income and/or assets of another as a basis for loan qualification. *(Complete Applicant and Co-Applicant sections.)*

☐ Individual Credit (Community Property State). If checked, this is an *Application for Individual Credit* - relying on my income or assets. The income or assets of my spouse (or other person), who has community property rights pursuant to state law, will not be used as a basis for loan qualification. However, his or her liabilities must be considered because my spouse (or other person) has community property rights pursuant to applicable law, and, as Applicant, I reside in a community property state, the property that will secure the loan is located in a community property state, or I am relying on other property located in a community property state as a basis for repayment of the loan. *(Complete Applicant and Co-Applicant sections.)*

☐ Joint Credit. If checked, this is an *Application for Joint Credit*. By signing below, the Applicant and Co-Applicant agree that each of us intend to apply for joint credit. *(Complete Applicant and Co-Applicant sections.)*

Applicant for Joint Credit

Co-Applicant for Joint Credit

2. Type of Mortgage and Terms of Credit

Mortgage Applied For

☐ Home Purchase or Refinancing ☐ Home Equity Loan ☐ Home Equity Line of Credit

Lender's Case No.

Amount/Credit Limit

Interest Rate

No. of Months

Amortization Type

\$

%

☐ Fixed ☐ ARM ☐

3. Property Information and Purpose of Credit

Subject Property Address (street, city, state & ZIP)

No. of Units

Legal Description of Subject Property (attach description if necessary)

Year Built

Purpose of Loan

Property will be:

☐ Purchase ☐ Construction ☐ Other:

☐ Primary ☐ Secondary ☐ Investment

☐ Refinance ☐ Construction-Permanent

Residence Residence

Complete this line if construction or construction-permanent loan.

Year Lot

Original Cost

Amount Existing

(a) Present Value of

(b) Cost of

Total (a + b)

Acquired

\$

\$

Lot

Improvements

\$

Complete this line if this is a refinance loan.

Describe Improvements

Year

Original Cost

Amount Existing

Purpose of Refinance

☐ made ☐ to be made

Acquired

\$

\$

Cost: \$

Title will be held in what Name(s)

Manner in which Title will be held

Estate will be held in:

Source of Down Payment, Settlement Charges, and/or Subordinate Financing (explain)

☐ Fee Simple ☐ Leasehold (show expiration date)

Applicant

4. Applicant Information

Co-Applicant

Applicant's Name

Co-Applicant's Name

Social Security No.

Primary Phone

Date of Birth

Social Security No.

Primary Phone

Date of Birth

ID Type & No.

Issued By

Issue Date

Exp. Date

ID Type & No.

Issued By

Issue Date

Exp. Date

E-mail Address

E-mail Address

☐ Married ☐ Separated Dependents

☐ Married ☐ Separated Dependents

(including registered domestic partner or civil union)

(including registered domestic partner or civil union)

☐ Unmarried No. Ages

☐ Unmarried No. Ages

(including single, divorced, widowed)

(including single, divorced, widowed)

Present Address ☐ Own ☐ Rent ☐ ____ No. Yrs. ____

Present Address ☐ Own ☐ Rent ☐ ____ No. Yrs. ____

Mailing Address, if different from Present Address

Mailing Address, if different from Present Address

Former Address ☐ Own ☐ Rent ☐ ____ No. Yrs. ____

Former Address ☐ Own ☐ Rent ☐ ____ No. Yrs. ____

(Complete if less than 2 years ago)

(Complete if less than 2 years ago)

Applicant		5. Employment Information		Co-Applicant	
Name & Address of Employer <input type="checkbox"/> Self Employed	Yrs. on this job	Name & Address of Employer <input type="checkbox"/> Self Employed	Yrs. on this job		
	Yrs. employed in this line of work/profession		Yrs. employed in this line of work/profession		
Position/Title/Type of Business	Business Phone	Position/Title/Type of Business	Business Phone		
If employed in current position for less than two years or if currently employed in more than one position, complete the following:					
Name & Address of Employer <input type="checkbox"/> Self Employed	Dates (from - to)	Name & Address of Employer <input type="checkbox"/> Self Employed	Dates (from - to)		
	Business Phone		Business Phone		
Position/Title/Type of Business	Gross Monthly Income \$	Position/Title/Type of Business	Gross Monthly Income \$		
Name & Address of Employer <input type="checkbox"/> Self Employed	Dates (from - to)	Name & Address of Employer <input type="checkbox"/> Self Employed	Dates (from - to)		
	Business Phone		Business Phone		
Position/Title/Type of Business	Gross Monthly Income \$	Position/Title/Type of Business	Gross Monthly Income \$		

6. Monthly Income and Combined Housing Expense Information						
Gross Monthly Income	Applicant	Co-Applicant	Total	Combined Monthly Housing Expense	Present	Proposed
Base Empl. Income *	\$	\$	\$	Rent	\$	
Overtime				First Mortgage (P&I)		\$
Bonuses				Other Financing (P&I)		
Commissions				Hazard Insurance		
Dividends/Interest				Real Estate Taxes		
Net Rental Income				Mortgage Insurance		
Other (before completing, see the notice in "Describe Other Income," below)				Homeowner Assn. Dues		
				Other		
Total	\$	\$	\$	Total	\$	\$

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

A/C	Describe Other Income	Notice: Alimony, child support, or separate maintenance income need not be revealed if the Applicant (A) or Co-Applicant (C) does not choose to have it considered for repaying this loan.	Monthly Amount
			\$

7. Assets and Liabilities								
This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Co-Applicants if their assets and liabilities are sufficiently joined so that the Statement can be meaningfully and fairly presented on a combined basis; otherwise, separate Statements and Schedules are required. If the <i>Co-Applicant</i> section was completed about a non-applicant spouse or other person, this Statement and supporting schedules must also be completed about that spouse or other person.								
Completed <input type="checkbox"/> Jointly <input type="checkbox"/> Not Jointly								
Schedule of Real Estate Owned. (If additional properties are owned, use continuation sheet.)								
Property Address (enter S if sold, PS if pending sale, R if rental for income or O for other) ▼	Type of Property	Present Market Value	Amount of Mortgages & Liens	Gross Rental Income	Mortgage Payments	Insurance, Maintenance, Taxes & Misc.	Net Rental Income	
		\$	\$	\$	\$	\$	\$	
	Totals	\$	\$	\$	\$	\$	\$	
List any additional names under which credit has previously been received and indicate appropriate creditor name(s) and account number(s):								
Alternate Name			Creditor Name			Account Number		

7. Assets and Liabilities (Continued)

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

8. Declarations

	Applicant		Co-Applicant			Applicant		Co-Applicant	
	Yes	No	Yes	No		Yes	No	Yes	No
a. Are there any outstanding judgments against you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	e. Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Have you been declared bankrupt within the past 7 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	f. Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
d. Are you a party to a lawsuit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

12. Acknowledgment and Agreement (Continued)

(4) all statements made in this application are made for the purpose of obtaining a residential mortgage loan; (5) the property will be occupied as indicated in this application; (6) the Lender, its servicers, successors or assigns may retain the original and/or an electronic record of this application, whether or not the Loan is approved; (7) the Lender and its agents, brokers, insurers, servicers, successors and assigns may continuously rely on the information contained in the application, and I am obligated to amend and/or supplement the information provided in this application if any of the material facts that I have represented herein should change prior to closing of the Loan; (8) in the event that my payments on the Loan become delinquent, the Lender, its servicers, successors or assigns may, in addition to any other rights and remedies that it may have relating to such delinquency, report my name and account information to one or more consumer reporting agencies; (9) ownership of the Loan and/or administration of the Loan account may be transferred with such notice as may be required by law; (10) neither Lender nor its agents, brokers, insurers, servicers, successors or assigns has made any representation or warranty, express or implied, to me regarding the property or the condition or value of the property; and (11) my transmission of this application as an "electronic record" containing my "electronic signature," as those terms are defined in applicable federal and/or state laws (excluding audio and video recordings), or my facsimile transmission of this application containing a facsimile of my signature, shall be as effective, enforceable and valid as if a paper version of this application were delivered containing my original written signature.

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

X

Applicant's Signature

Date

X

Co-Applicant's Signature

Date

13. Information for Government Monitoring Purposes

Instruction to Lender: Cross out this entire section (or instruct the applicant to do so), if this information is not required by law for this type of credit.

The following information is requested by the Federal Government for certain types of loans related to a dwelling in order to monitor the Lender's compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. The law provides that a lender may not discriminate neither on the basis of this information, nor on whether you choose to furnish it. If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, under Federal regulations, the Lender is required to note the information on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box below.

Applicant	<input type="checkbox"/> I do not wish to furnish this information	Co-Applicant	<input type="checkbox"/> I do not wish to furnish this information
Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race:	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	Race:	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male	Sex:	<input type="checkbox"/> Female <input type="checkbox"/> Male

For Mortgage Loan Originator

This information was provided: <input type="checkbox"/> In a face-to-face interview <input type="checkbox"/> In a telephone interview <input type="checkbox"/> By the applicant and submitted by fax or mail <input type="checkbox"/> By the applicant and submitted via e-mail or the Internet		
Loan Originator's Signature		Loan Originator's Phone Number
X		(802)888-6600
Loan Originator's Name	Loan Originator Identifier	Loan Origination Company's Address
Loan Origination Company's Name	Loan Origination Company Identifier	20 Lower Main Street Morrisville, VT 05661-0667
Union Bank	402933	

Transaction Worksheet - Optional

a. Purchase price	\$	k. Applicant's closing costs paid by Seller	\$
b. Alterations, improvements, repairs		l. Other Credits (explain)	
c. Land (if acquired separately)			
d. Refinance (include debts to be paid off)		m. Loan amount (exclude PMI, MIP, Funding Fee financed)	
e. Estimated prepaid items			
f. Estimated closing costs		n. PMI, MIP, Funding Fee financed	
g. PMI, MIP, Funding Fee		o. Loan amount (add m & n)	
h. Discount (if Applicant will pay)		p. Cash from/to Applicant (subtract j, k, l & o from i)	
i. Total costs (add items a through h)			
j. Subordinate financing			

For Lender's Use

Lender's Initial Lien Position <input type="checkbox"/> First Lien <input type="checkbox"/> Second Lien <input type="checkbox"/> Subordinate Lien	First Lien Holder's Name & Address (if any)		Second Lien Holder's Name & Address (if any)	
	Loan No.		Loan No.	
Date Application Received	Received By		Amount Requested	
Decision <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Decision Date		Decision By	
HMDA Reportable <input type="checkbox"/> Yes	Amount Approved	Initial Advance (if applicable)	Funding Date	
Refinancing <input type="checkbox"/> Yes <input type="checkbox"/> Cash Out	Rescindable <input type="checkbox"/> Yes	Early Disclosures Given <input type="checkbox"/> Yes, on	High Cost Mortgage <input type="checkbox"/> Yes High Priced Mortgage <input type="checkbox"/> Yes	

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 Return or Account 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.	

Caution. If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

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

a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 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 10 business days ☐

c Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days ☐

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

8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days ☐

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

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

Check this box if you have notified the IRS or the IRS has notified you that one of the years for which you are requesting a transcript involved **identity theft** on your federal tax return ☐

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

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 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 the signature date.

Sign Here		Phone number of taxpayer on line 1a or 2a
	Signature (see instructions)	Date
	Title (if line 1a above is a corporation, partnership, estate, or trust)	
	Spouse's signature	Date

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

Future Developments

For the latest information about Form 4506-T and its instructions, go to www.irs.gov/form4506t. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

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.

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 Return or Account Transcript" or call 1-800-908-9946.

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart below shows two different addresses, send your request to the address based on the address of your most recent return.

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

If you filed an individual return and lived in:

Mail or fax to:

Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301
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	512-460-2272
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	Internal Revenue Service RAIVS Team Stop 37106 Fresno, CA 93888
	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	Internal Revenue Service 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:

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	Internal Revenue Service 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, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service 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 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. For a business address, file Form 8822-B, Change of Address or Responsible Party—Business.

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. 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 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 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.

Signature by a representative. A representative can sign Form 4506-T for a taxpayer only if the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

Privacy Act and Paperwork Reduction Act

Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

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

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

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

Internal Revenue Service
Tax Forms and Publications Division
1111 Constitution Ave. NW, IR-6526
Washington, DC 20224

Do not send the form to this address. Instead, see *Where to file* on this page.



Member FDIC Equal Housing Lender

CONSENT

I (We) hereby give my (our) consent to have the Union Bank obtain any and all information regarding my (our) employment, checking and/or savings accounts, credit obligations and all other credit matters which they may require in connection with my (our) application for a loan.

I (We) understand that a consumer report prepared by a consumer reporting agency may be obtained at the time I apply for my account and, if my account is approved, at any time after that. I (We) have the right at any time to ask the Union Bank whether a report was obtained and, if so, to have the Union Bank furnish me (us) with the name and address of the consumer reporting agency that prepared the report.

THIS FORM MAY BE REPRODUCED AND THAT COPY SHALL BE AS EFFECTIVE AS THE ORIGINAL CONSENT WHICH I (WE) HAVE SIGNED.

This consent form is signed for the purpose of applying for

☐ Individual or ☐ joint credit (check one)

Signature

Signature

I am (We are) aware that the assigned Credit Bureau may call me (us) to clarify information obtained in my (our) application or credit history (ies) in order to expedite the processing of the loan application. I (We) can be reached at the following telephone number(s) during the day.

Name: _____ (_____) from _____ to _____

Name: _____ (_____) from _____ to _____



FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I (We) have applied for an extension of credit with you. You are soliciting offering or selling me an insurance product or annuity in connection with this extension of credit.

FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:

1. My purchase of an insurance product or annuity from you or from any of your affiliates or
2. My agreement not to obtain, or a prohibition on me from obtaining an insurance product or annuity from an unaffiliated entity.

By signing, I (we) acknowledge that I (we) have received a copy of this form on today's date. Unless this disclosure is provided electronically or I (we) have applied for credit by mail, I also acknowledge that you have provided this disclosure to me (us) orally.

Signature

Date

Signature

Date





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ADDENDUM TO RESIDENTIAL MORTGAGE LOAN APPLICATION

Can anyone, other than you, claim a homestead interest* in the property that will secure repayment of the loan?

☐

No

☐

Yes

If yes, who may be able to claim a homestead interest?

Name

Dated this _____ day of _____, 20____

Borrower

Co-Borrower

*Vermont law recognizes a homestead right in the spouse or civil union partner of the legal owner of real estate, which is used or kept as their primary home, even if the spouse or civil union partner is not a co-owner of that home. This homestead interest prevents creditors from attaching the entire homestead property without the written consent of both spouses or partners. Therefore, the lender will require that both spouses or civil union partners sign the mortgage deed, or otherwise waive their homestead interest in the property, in order to insure that it is fully enforceable.

This Addendum has been prepared in response to Act 91 of the 2000 Legislative Session, effective July 1, 2000, which provides that parties to a civil union shall have all the same benefits, protections, and responsibilities afforded under Vermont law to spouses in a marriage.

You should consult an attorney for specific legal advice regarding homestead rights and for specific legal advice regarding benefits, protections, and responsibilities under Act 91.



Facts

WHAT DOES UNION BANK DO WITH YOUR PERSONAL INFORMATION?

Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.
What?	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> • Social Security Number • Account balances • Transaction or loss history • Credit History • Credit scores • Account transactions <p>When you are <i>no longer</i> our customer, we continue to share your information as described in this notice</p>
How?	All financial companies need to share customers' personal information to run their everyday business. In this section below, we list the reasons financial companies can share their customers' personal information; the reasons Union Bank chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Union Bank Share?	Can you limit this sharing?
For our everyday business purposes – such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes – to offer our products and services to you	Yes	No
For joint marketing with other financial companies	Yes	No
For our affiliates' everyday business purposes – information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes – information about your credit worthiness	No	We don't share
For our affiliates to market to you	No	We don't share
For non-affiliates to market to you	No	We don't share

Questions?

Call 802-888-6600 or Toll-free at 866-862-1891 or go to www.unionbankvt.com

What We Do	
How does Union Bank protect my personal information?	<p>To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.</p> <p>We also maintain other physical, electronic and procedural safeguards to protect this information and we limit access to information to those employees for whom access is appropriate.</p>
How does Union Bank collect my personal information?	<p>We collect your personal information, for example when you</p> <ul style="list-style-type: none"> • Open an account • Apply for a loan • Make deposits or withdrawals from your account • Pay us by check • Make a wire transfer <p>We also collect your personal information from others, such as credit bureaus, affiliates, or other companies.</p>
Why can't I limit all sharing?	<p>Federal law gives you the right to limit only</p> <ul style="list-style-type: none"> • sharing for affiliates' everyday business purposes – information about your creditworthiness • affiliates from using your information to market to you • sharing for non-affiliates to market to you <p>State laws and individual companies may give you additional rights to limit sharing.</p> <p>See below for more on your rights under state law.</p>

Definitions	
Affiliates	<p>Companies related by common ownership or control. They can be financial and non-financial companies.</p> <ul style="list-style-type: none"> • <i>Our affiliates include our parent holding company Union Bankshares, Inc.</i>
Non-affiliates	<p>Companies not related by common ownership or control. They can be financial and non-financial companies.</p> <ul style="list-style-type: none"> • <i>Union Bank does not share with non-affiliates so they can market to you</i>
Joint Marketing	<p>A formal agreement between non-affiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> • <i>Our joint marketing partners include credit card, insurance, and leasing companies as well as securities brokers, financial planners, investment advisors, trust and investment management companies, mortgage banking and similar services.</i>

Other Important Information	
<p>As required by Vermont law –</p> <ul style="list-style-type: none"> • We obtain your consent before accessing your credit report and use it only for the purpose for which you consented. • We do not share your health and medical information, except to process transactions or to provide services you have initiated. 	



Member FDIC  Equal Housing Lender

USA Patriot Act



IMPORTANT INFORMATION ABOUT OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each person who opens an account.

WHAT THIS MEANS FOR YOU

When you open an account we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see and copy your driver's license or other identifying documents.

