Thank you for your interest in assuming a Bank of America home loan.

To apply for a Qualified Assumption, please complete the included documents and provide the additional documents described below.

Please note, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens a home loan account. As part of this process, we'll ask for your name, address, birth date, and other information that will allow us to identify you. We may also ask to see your driver's license or other identification.

If you have any questions about your Qualified Assumption application, please call us at 800.293.8157, Monday through Friday from 9 a.m. to 6 p.m. Eastern.

What you need to do

1. Complete and return the following included documents:

- Uniform Residential Loan Application
 - Be sure to complete the entire application; we cannot consider the application unless it is filled out completely. Please include your mailing address, email address and the loan number. **Unmarried co-applicants must each complete an application**.
- Borrower's Certification & Authorization
- IRS Form 4506-T Request for Transcript of Tax Return
- Identity Affidavit
- Relationship Letter
- 2. Submit the following additional items:
 - A check for \$15 payable to Bank of America N.A. for the non-refundable credit report fee.
 - Paystubs for the most recent 30 days of earnings
 - W-2 Forms for the most recent two years
 - If you're self-employed, personal and business tax returns for the most recent two years
 - Bank statements for the most recent 60 days for asset accounts to be considered in the application
 - Property tax statement from the most recent year for the subject property
 - Current homeowner's insurance declaration page for the subject property

<u>Please mail all documents to:</u> Qualified Assumptions TX2-981-03-25 7105 Corporate Drive Plano, TX 75024

Please note: If the property transfer occurred due to the death or divorce of a borrower on this loan, we will require additional documents. Please contact us at 800.293.8157 for a list of those requirements.

What you can expect and additional steps to take

After we receive the above documents:

- 1. Your credit report will be pulled within three to five business days, and federal Real Estate Settlement Procedures Act (RESPA) loan disclosures will be mailed to you.
 - $\circ~$ Once you receive the documents, review, sign, and return them to the address provided above.

- 2. A Senior Loan Processor assigned to your file will call you to answer any questions you may have, and walk you through any additional documentation requirements specific to your assumption request.
- 3. Once your application has been fully processed, your file will be submitted for review and assessed based on your income, assets and credit. Your Senior Loan Processor will contact you to inform you of the loan decision and if any additional items are required. Please note, your file may need to go through more than one round of review.
 - **Please note:** Some borrowers may be required to make a 5% down payment.
- 4. If your loan application is approved, the file will go to a Closing Associate who will assist in completing the Assumption.
 - You will have to obtain a deed transferring ownership of the property as part of this process, and closing documents will need to be executed and recorded.

The application process generally takes **90 days** from the date we receive your initial completed Qualified Assumption package.

Questions?

We appreciate the opportunity to serve your home loan needs. If you have any questions, please call us at 800.293.8157, Monday through Friday from 9 a.m. to 6 p.m. Eastern.

Uniform Residential Loan Application

This application is designed to be completed by the applicant(s) with the Lender's assistance. Applicants should complete this form as "Borrower" or "Co-Borrower," as applicable. Co-Borrower information must also be provided (and the appropriate box checked) when \Box the income or assets of a person other than the Borrower (including the Borrower's spouse) will be used as a basis for loan qualification or \Box the income or assets of the Borrower's spouse or other person who has community property rights pursuant to state law will not be used as a basis for loan qualification, but his or her liabilities must be considered because the spouse or other person has community property rights pursuant to applicable law and Borrower resides in a community property state, or the Borrower is relying on other property located in a community property state as a basis for repayment of the loan.

If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below):

Borrower			Co-Borr		IORTGAG	FAND	TFRM	SOFIO	AN						
Mortgage Applied for:	□ VA □ FHA	□ US		Other (expl				Agency Case		ber		Lender (Case Num	ıber	
Amount \$		Interest Rate	% No. of 1	Months	Amortizat	ion Typ		□ Fixed Rat □ GPM	te	□ Other (explain □ ARM (type):	n):				
			II. PRO	PERTY IN	NFORMAT	ION A	ND PUI	RPOSE O	F LOA	AN					
Subject Property	Address (street,	city, state & ZIP))												No. of Units
Legal Description	on of Subject Prop	perty (attach desc	ription if necessary)												Year Built
Purpose of Loan □ Purchase □ Construction □ Other (explain): □ Refinance □ Construction-Permanent □								oerty will be rimary Resi		□ Secor	ndary F	Residence	e		Investment
Complete this li	ne if construction	1 or construction	-permanent loan.												
Year Lot Acquired	Original Cost		Amount Existing L	iens	(a) Present V	alue of	Lot		(b) (Cost of Improvem	ients		Total (a	+ b)	
	\$		\$		\$				\$				\$		
Complete this li	ne if this is a refi	nance loan.													
Year Acquired	Original Cost		Amount Existing L	iens	Purpose of	Refinan	ce		Descr	tibe Improvements	8		made		to be made
	\$		\$						Cost:	\$					
Title will be held	d in what Name(s))			•			Manner in	n which	n Title will be held	ł			Estat	e will be held in:
														□ Le	e Simple easehold (show
Source of Down	Payment, Settlen	nent Charges, and	l/or Subordinate Finar	cing (explai	n)									exj	piration date)
	Borrov	wer		III. I	BORROWE	R INF	ORMA'	ΓΙΟΝ				Co-B	orrowe	r	
Borrower's Nam	e (include Jr. or S	Sr. if applicable)				Co-Bo	orrower's	Name (incl	ude Jr.	or Sr. if applicabl	e)				
Social Security 1	Number	Home Phone (incl. area code	DOB (mm/d	d/yyyy)	Yrs. School	Social	l Security	Number		Home Phone (incl. area code)		DOB	(mm/dd/y	уууу)	Yrs. School
□ Married	Unmarried (ind	clude	Dependents (not liste	d by Co-Boi	rrower)	D Ma	arried	🗆 Unmarri	ed (incl	lude	Dep	endents	(not listed	l by Bo	rrower)
□ Separated	single, divorce	ed, widowed)	no.	ages	,	□ Se	parated			l, widowed)	no.			ages	
Present Address	(street, city, state	, ZIP)	Own D	tentNo	o. Yrs.	Present Address (street, city, state, ZIP)									
Mailing Address, if different from Present Address Mailing Address, if different from Present Address															
If residing at present address for less than two years, complete the following:															
Former Address (street, city, state, ZIP) □ Own □ Rent No. Yrs. Former Address (street, city, state, ZIP) □ Own □ Rent No. Yrs.															
	Borr	ower		IV	. EMPLOY	MENI	INFO	RMATIO	N			Co	-Borrov	ver	
Name & Addres	s of Employer		□ Self Employed	Yrs. on th			Name &	Address of	Employ	yer [Self	Employe		on this	
					loyed in this ork/profession										yed in this c/profession
Position/Title/Type of Business Business Phone (incl. area code)							Position/	Title/Type	of Busin	ness		Busines	s Phone (incl. are	ea code)

If employed in current position for less than two years or if currently employed in more than one position, complete the following:

Borrower				IV. EMPLOYMENT INFORM			ORMATION (cont'd)	ower		
Name & Address of Emplo	yer	□ Self E	Employed	Dates (f	from – to)	Name	& Address of Employer	□ Self	Employed	Dates (from – to)
				Monthly	y Income					Monthly Income
				\$						\$
Position/Title/Type of Busi	ness		Business I	Phone		Positi	on/Title/Type of Business		Business I	Phone
			(incl. area	code)					(incl. area	code)
Name & Address of Emplo	yer	□ Self E	Employed	Dates (f	from – to)	Name	& Address of Employer	□ Self	Employed	Dates (from - to)
				Monthly	y Income					Monthly Income
				\$						\$
Position/Title/Type of Business Business			Business I	Phone		Positi	on/Title/Type of Business		Business I	Phone
			(incl. area	code)					(incl. area	code)
	V. I	MONTH	HLY INC	OME A	ND COMBINE	D HO	USING EXPENSE INFORMAT	ΓION		
Gross Monthly Income	Borrower		Co-Borrow	er	Total		Combined Monthly Housing Expense	Pres	ent	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							Homeowner Assn. Dues			
other income," below)							Other:			
Total	\$	\$			\$		Total	\$		\$

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

Describe Other Income

Notice: Alimony, child support, or separate maintenance income need not be revealed if the Borrower (B) or Co-Borrower (C) does not choose to have it considered for repaying this loan.

B/C	Monthly Amount
	\$

VI. ASSETS AND LIABILITIES

This Statement and any applicable supporting schedules may be completed jointly by both married and unmarried Co-Borrowers 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 Co-Borrower section was completed about a non-applicant spouse or other person, this Statement and supporting schedules must be completed about that spouse or other person also.

Completed D Jointly Not Jointly

ASSETS Description Cash deposit toward purchase held by:	Cash or Market Value	Liabilities and Pledged Assets. List the creditor's name, address, and account number for all outstanding debts, includ automobile loans, revolving charge accounts, real estate loans, alimony, child support, stock pledges, etc. U continuation sheet, if necessary. Indicate by (*) those liabilities, which will be satisfied upon sale of real estate owned upon refinancing of the subject property.					
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.					
Name and address of Bank, S&L, or Credit	Union	Name and address of Company	\$ Payment/Months	\$			
Acct. no.	\$	Acct. no.					
Name and address of Bank, S&L, or Credit Union		Name and address of Company	\$ Payment/Months	\$			
Acct. no.	\$	Acct no					

Name and address of Bank, S&L, or Credit Union Name and address of Company Payment/Months S Acct. no. S Acct. no. S Stocks & Bonds (Company name/ number & description) S Acct. no. S It is insurance net cash value S Acct. no. S Face anount: S S Acct. no. S Subtotal Liquid Assets S Acct. no. S Vested interest in retirement fund S Acct. no. S Vested interest in retirement fund S Acct. no. S Vested interest in retirement fund S Acct. no. S Other Assets (itemize) S Acct. no. S Other Assets (itemize) S Jol-Related Expense (child care, union dues, etc.) S Other Assets (itemize) S Jol-Related Expense (child care, union dues, etc.) S Total Assets a S Net Worth S S		V	I. ASSETS AND LIAH	BILITIES (cont'd)		
Stocks & Bonds (Company name/ number & description) \$ Name and address of Company \$ Payment/Months \$ Life insurance net cash value \$ Acct. no. Acct. no. \$ \$ Life insurance net cash value \$ Name and address of Company \$ Payment/Months \$ Face amount: \$ \$ Name and address of Company \$ Payment/Months \$ Subtotal Liquid Assets \$ \$ \$ \$ Real estate owned (enter market value from schedule of real estate owned) \$ \$ \$ Net worth of business(es) owned (attach financial statement) \$ \$ \$ Automobiles owned (make and year) \$ Acct. no. \$ \$ Other Assets (itemize) \$ Job-Related Expense (child care, union dues, etc.) \$ \$ Other Assets (itemize) \$ Job-Related Expense (child care, union dues, etc.) \$ \$ Total Monthly Payments \$ \$ \$ \$ \$	Name and address of Bank, S&L, or Cred	it Union	Name and address of Cor	npany	\$ Payment/Months	S
number & description) 3 Acct. no. 3 Acct. no. Life insurance net cash value \$ Name and address of Company \$ Payment/Months \$ Face amount: \$ \$ Name and address of Company \$ Payment/Months \$ Subtotal Liquid Assets \$ \$ \$ Real estate owned (enter market value \$ \$ \$ Yested interest in retirement fund \$ \$ \$ Net worth of business(es) owned \$ \$ \$ Automobiles owned (make and year) \$ \$ \$ Other Assets (itemize) \$ \$ \$ Other Assets (itemize) \$ \$ \$ Total MastUs Assets a. \$ \$ \$	Acct. no.	\$	Acct. no.			
Life insurance net cash value \$ Name and address of Company \$ Payment/Months \$ Face amount: \$ \$ \$ \$ \$ \$ \$ Subtoal Liquid Assets \$ \$ \$ \$ \$ \$ \$ Real estate owned (enter market value from schedule of real estate owned) \$ \$ \$ \$ \$ \$ \$ Vested interest in retirement fund \$ \$ Acct. no. Acct. no. Acct. no. \$ \$ \$ \$ \$ Automobiles owned (make and year) \$ \$ Alimony/Child Support/Separate Maintenance Payments Owed to: \$		\$	Name and address of Cor	npany	\$ Payment/Months	S
Face amount: \$ \$ Subtotal Liquid Assets \$ Real estate owned (enter market value from schedule of real estate owned) \$ Vested interest in retirement fund \$ Net worth of business(es) owned (attach financial statement) \$ Automobiles owned (make and year) \$ Other Assets (itemize) \$ Job-Related Expense (child care, union dues, etc.) \$ Total Assets a. \$ Net Worth \$						
Subtotal Liquid Assets \$ Real estate owned (enter market value from schedule of real estate owned) \$ Vested interest in retirement fund \$ Net worth of business(es) owned (attach financial statement) \$ Automobiles owned (make and year) \$ Other Assets (itemize) \$ Automobiles owned (make and year) \$ Job-Related Expense (child care, union dues, etc.) \$ Other Assets (itemize) \$ Job-Related Expense (child Payments Ower of the top of the top of top of the top of top of the top of top	Life insurance net cash value	\$	Name and address of Cor	npany	\$ Payment/Months	\$
Subular Equity Assets Image: Second seco	Face amount: \$					
from schedule of real estate owned) S Vested interest in retirement fund \$ Net worth of business(es) owned (attach financial statement) \$ Automobiles owned (make and year) \$ Other Assets (itemize) \$ S Job-Related Expense (child care, union dues, etc.) Total Assets a. \$ Total Assets a. \$	Subtotal Liquid Assets	\$				
Net worth of business(es) owned (attach financial statement) \$ Acct. no. Automobiles owned (make and year) \$ \$ Alimony/Child Support/Separate Maintenance Payments Owed to: \$ Other Assets (itemize) \$ Job-Related Expense (child care, union dues, etc.) \$ \$ Total Assets a. \$ Net Worth \$ Total Liabilities b. \$		\$				
(attach financial statement) Acct. no. Act. no. Automobiles owned (make and year) \$ Alimon/Child Support/Separate Maintenance Payments Owed to: \$ Other Assets (itemize) \$ Job-Related Expense (child care, union dues, etc.) \$ \$ Other Assets (itemize) \$ Iob-Related Expense (child care, union dues, etc.) \$ \$ Total Assets a. \$ Net Worth \$ Total Liabilities b. \$	Vested interest in retirement fund	\$				
Automobiles owned (make and year) \$ Maintenance Payments Owed to: \$ Other Assets (itemize) \$ Job-Related Expense (child care, union dues, etc.) \$ Total Monthly Payments \$ Total Assets a. \$ Net Worth \$ Total Liabilities b. \$		\$				
Total Assets a. \$ Net Worth \$ Total Liabilities b. \$		\$			S	
Total Assets a. \$ Net Worth \$ Total Liabilities b. \$	Other Assets (itemize)	\$	Job-Related Expense (child care, union dues, etc.)		S	
			Total Monthly Payment	s	\$	
	Total Assets a.	\$		\$	Total Liabilities b.	\$

Schedule of Real Estate Owned (If additional properties are owned, use continuation sheet.)

Property Address (enter S if sold, PS if pending sale or R if rental being held for income)		Type of Property	Present Market Value	Amount of Mortgages & Liens	Gross Rental Income	Mortgage Payments	Insurance, Maintenance, Taxes & Misc.	Net Rental Income
			\$	\$	\$	\$	\$	\$
List own additional names under which evadit has n		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

	VII. DETAILS OF TRANSAC	ΓΙΟΝ	VIII. DECLARATIONS				
a.	Purchase price	\$	If you answer "Yes" to any questions a through i,	Borr	ower	Co-Borrower	
			please use continuation sheet for explanation.		No	Yes	No
b.	Alterations, improvements, repairs		a. Are there any outstanding judgments against you?				
c.	Land (if acquired separately)		b. Have you been declared bankrupt within the past 7 years?				
d.	Refinance (incl. debts to be paid off)		c. Have you had property foreclosed upon or given title or deed in lieu thereof in the last 7 years?				
e.	Estimated prepaid items		d. Are you a party to a lawsuit?				
f.	Estimated closing costs		e. Have you directly or indirectly been obligated on any				
g.	PMI, MIP, Funding Fee		loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?				
h.	Discount (if Borrower will pay)		(This would include such loans as home mortgage loans, SBA loans, home improvement loans, educational loans, manufactured (mobile) home loans, any				
i.	Total costs (add items a through h)		mortgage, financial obligation, bond, or loan guarantee. If "Yes," provide details, including date, name, and address of Lender, FHA or VA case number, if any, and reasons for the action.)				

	VII. DETAILS OF TRANSACTION		VIII. DECLARATIONS							
		If	you answer "Yes" to any question a through I, please use -	Borro	wer	Co-Borrower				
j.	Subordinate financing		ntinuation sheet for explanation.	Yes	No	Yes	No			
k.	Borrower's closing costs paid by	f.	Are you presently delinquent or in default on any Federal debt or any other loan, mortgage, financial obligation, bond, or loan guarantee?							
	Seller	g.	Are you obligated to pay alimony, child support, or separate maintenance?							
1.	Other Credits (explain)	h.	Is any part of the down payment borrowed?							
1.	Other Creatis (explain)	i.	Are you a co-maker or endorser on a note?							
m.	Loan amount (exclude PMI, MIP, Funding Fee financed)									
		j.	Are you a U.S. citizen?							
n.	PMI, MIP, Funding Fee financed	k.	Are you a permanent resident alien?							
0.	Loan amount (add m & n)	l.	Do you intend to occupy the property as your primary residence?							
			If "Yes," complete question m below.							
p.	Cash from/to Borrower (subtract j, k, l & o from i)	m	. Have you had an ownership interest in a property in the last three years?							
			(1) What type of property did you own—principal residence (PR), second home (SH), or investment property (IP)?							
			(2) How did you hold title to the home— by yourself (S), jointly with your spouse or jointly with another person (O)?							
		IX	. ACKNOWLEDGEMENT AND AGREEMENT							

Each of the undersigned specifically represents to Lender and to Lender's actual or potential agents, brokers, processors, attorneys, insurers, servicers, successors and assigns and agrees and acknowledges that: (1) the information provided in this application is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this application may result in civil liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in "Loan") will be secured by a mortgage or deed of trust on the property described in this application; (3) the property will not be used for any illegal or prohibited purpose or use; (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, and assigns may continuously rely on the information contained in the application, and/or an obligated to amend and/or supplement the information provided in this application if any of the waterial facts that I have represented hereing of the Loan is approved; (7) the Lender and its agents; 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 and/or an arefered with such notice as may be required by law; (10) neither Lender not its agents, brokers, insurers, servicers, successors or assigns may in addition to any orther 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 is agents, brokers, insurers, servicers, successors or assigns h

Acknowledgement. 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.

Borrower's Signature	Date	Co-Borrower's Signature	Date		
Χ		X			
X. INFORMATION FOR GOVERNMENT MONITORING PURPOSES					

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 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, under Federal regulations, this lender is required to note the information on the basis of visual observation and surname if you have made this application in person. If you do not wish to furnish the information, please check the box below. (Lender must review the above material to assure that the disclosures satisfy all requirements to which the lender is subject under applicable state law for the particular type of loan applied for.)

BORROWER I do not wish to furnish this informat	CO-BORROWER I do not wish to furnish this information					
Ethnicity: Hispanic or Latino Not Hispanic or I	Latino	Ethnicity:	Hispanic or	Latino	Not Hispani	ic or Latino
Race: American Indian or Asian Alaska Native	Black or African American	Race:	American In Alaska Native Native Hawa Other Pacific	aiian or	Asian 🗋 White	Black or African American
Sex: Female Male		Sex:	Female	☐ Male		
To be Completed by Loan Originator: This information was provided: In a face-to-face interview By the applicant and submitted by fax or mail By the applicant and submitted via e-mail or the Internet Loan Originator's Signature						
X				Date		
Loan Originator's Name (print or type)	Loan Originator Identifier			Loan Orig	ginator's Pho	one Number (including area code)
Loan Origination Company's Name	Loan Origination Company Ic	lentifier		Loan Orig	gination Cor	npany's Address
Freddie Mac Form 65 6/09	Раде	1 of 5		•		Fannie Mae Form 1003 6/09

Use this continuation sheet if you need more space to complete the Residential Loan Application. Mark B f or Borrower or C for Co-Borrower.	Borrower:	Agency Case Number:			
	Co-Borrower:	Lender Case Number:			

I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements concerning any of the above facts as applicable under the provisions of Title 18, United States Code, Section 1001, et seq.

Borrower's Signature	Date	Co-Borrower's Signature	Date
Χ		X	

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.

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 F	Previous address shown on the last return filed if different from line 3				
	f the transcript or tax information is to be mailed to a third party (such as a mortgage and telephone number. The IRS has no control over what the third party does with th				
	on. If the transcript is being mailed to a third party, ensure that you have filled in line 6 lled in these lines. Completing these steps helps to protect your privacy.	and	line 9 before signing. Sign and date the form once you		
6	Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) ar	id ch	eck the appropriate box below. Enter only one tax form		
а	number per request. ► 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 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 assessments, and adjustments made by you or the IRS after the return was filed. R and estimated tax payments. Account transcripts are available for most returns. Most	eturn	n information is limited to items such as tax liability		

- 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.

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

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	RAIVS Team Stop 6716 AUSC Austin, TX 73301
A.P.O. or F.P.O. address	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
wisconsin, wyonning	559-456-5876
Arkansas, Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, Ohio, Pennsylvania,	RAIVS Team Stop 6705 P-6 Kansas City, MO 64999
Rhode Island, Vermont,	816-292-6102

Virginia. West Virginia

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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	RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409			
F.P.O. address	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,	RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250			
Wisconsin	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, quardian, 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.

Prepared by:

Borrower's Certification & Authorization

Certification

The undersigned certify the following:

1. I/We have applied for a mortgage loan from

Bank of America N.A.

("Lender"). In applying for the loan, I/we completed a loan application containing various information on the purpose of the loan, the amount and source of the down payment, employment and income information, and assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/we omit any pertinent information.

2. I/We understand and agree that Lender reserves the right to change the mortgage loan review process to a full

documentation program. This may include verifying the information provided on the application with the employer and/or the financial institution.

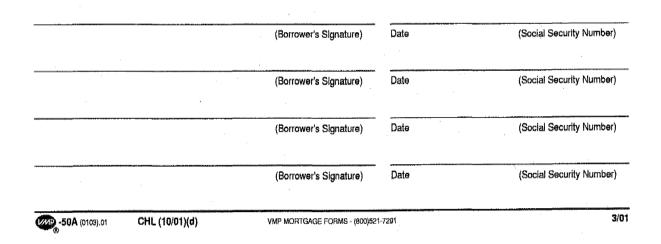
3. I/We fully understand that it is a Federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage, as applicable under the provisions of Title 18, United States Code, Section 1014.

Authorization to Release Information

To Whom It May Concern:

- 1. I/We have applied for a mortgage loan from Lender. As part of the application process, Lender may verify information contained in my/our loan application and in other documents required in connection with the loan, either before the loan is closed or as part of its quality control program.
- I/We authorize you to provide to Lender, and to any investor to whom Lender may sell my/our mortgage, any and all
 information and documentation that they request. Such information includes, but is not limited to, employment history
 and income; bank, money market, and similar account balances; credit history; and copies of income tax returns.
- 3. Lender, or any investor that purchases the mortgage may address this authorization to any party named in the loan application or disclosed by any consumer credit reporting agency or similar source.
- 4. A copy of this authorization may be accepted as an original.
- 5. Your prompt reply to Lender or the investor that purchased the mortgage is appreciated.
- 6. To make products and services available, often at a lower cost or with greater convenience, Lender may prudently share some customer and former customer nonpublic personal financial information within our family of companies and with well respected business partners. To obtain a copy of our privacy notice with information on our policies and practices, please call us at 888-341-5000 If you do not want us to share nonpublic personal information with these companies, other than sharing transactions and experience within our family of companies, please call us at 888-341-5000 By signing below, you authorize us to share this information unless you call to exercise your right to opt-out. Please be aware that even if you decide to opt-out, Lender will continue to share nonpublic personal information with companies that perform services on our behalf and with third parties as otherwise permitted by law.

NOTICE TO BORROWERS: This is notice to you as required by the Right to Financial Privacy Act of 1978 that HUD/FHA has a right of access to financial records held by financial institutions in connection with the consideration or administration of assistance to you. Financial records involving your transaction will be available to HUD/FHA without further notice or authorization but will not be disclosed or released by this institution to another Government Agency or Department without your consent except as required or permitted by law.





RELATIONSHIP LETTER

Loan Number:	
Borrower:	
Seller(s) Name(s):	 -
Seller(s) Phone Numbers:	
Seller(s) <u>Forwarding</u> Address:	

This letter is to verify that I am aware that a Qualifying Assumption to allow removal of my name from the above loan is in process.

I also state that (check the one that applies)

- □ I am currently married to the borrower.
- □ I have been married to the borrower.
- □ I have never been married to the borrower.
- □ I am a direct family member of the borrower child(ren),parent(s),brother(s),or sister(s), grandparent(s),or grandchild(ren).

My signature below acknowledges that I certify that the information given above is true and correct to the best of my knowledge.

Signature of Seller

Date

Signature of Seller

Date

IDENTITY AFFIDAVIT TO BE COMPLETED BY THE BORROWER

Before me, the undersigned Notary Public, personally came and appeared the undersigned Borrower, who being duly sworn did depose and state the following:

1.	My Full Legal Name Is						
		(First)	(Middle)	(Last)	(Jr., Sr., etc.)		
2.	The address of my prin	cipal residence is					
	(Street Address)						
	(City)	(State)		(Zip)			
3.	My Date of Birth is						
	,	(Month/Date/Year)					
4.	My taxpayer identification number is						
5.	The State and number of my driver's license or identification card are						
	(State)	(Number)	(D	ate Issued)	(Expiration Date)		
6.	Have you or any of you position in a national, s			••			

I swear under oath that the information provided in this Affidavit is true and correct to the best of my knowledge. I consent to the transfer of the information contained in this Affidavit for the sole purposes of verifying my identity and preventing fraud. I understand that this information will not be disclosed to any party for any purpose.

WITNESS THE HAND AND SEAL OF THE UNDERSIGNED.

Borrower Signature:		
State of		
County of		
Subscribed and sworn to (or affirmed) before me on th 20, by	nisday of,	
	, proved to me on the basis of satisfactory evid	ence
		ادم؟

Notary Signature