



HAB BANK

Commercial Mortgage Loan Application

SECTION 1

Loan Amount Requested and Terms of Loan

Amount of Loan: \$ _____ Term: _____ Yrs. Amortization Requested: _____ Yrs.

Type of Loan: ☐ Term ☐ Line of Credit

SECTION 2

Borrower Information

Borrower Name (show exactly how title presently held or will be held upon acquisition)

Borrowing Entity Type ☐ Individual ☐ Partnership ☐ Limited Liability Company
☐ "S" Corporation ☐ Sole Proprietorship ☐ Corporation
☐ Other: _____

Date & State of Incorporation: _____

List Names of all Principals:

Name	Title	Ownership (%)	Active In Management

SECTION 3

Property Information and Purpose of Loan

Property Type: ☐ Multit-Family ☐ Retail Unit ☐ Office Building
☐ Hotel / Motel ☐ Shopping Center ☐ Warehouse / Office
☐ Mixed Use ☐ Industrial ☐ 1-4 Family
☐ Other

Appraised Value \$ _____ Appraisal Date _____ Estimated Mkt. Value \$ _____

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

County

Block and Lot#

Site Sq. Ft.

Rentable Sq. Ft.

of Stores / Units

of Parking

Year Built

Purpose of Loan: ☐ Purchase

☐ Refinance:

For refinance briefly explain use of funds:

For Purchase

Purchase Price: \$	Down Payment: \$	Present Owner's Name
Source of Down Payment:	Bank or Savings A/C #	If Other, Please Explain

For Refinance

Name of Lender:			
Original Loan Amount:	Present Balance \$	Monthly Payment: \$	Next Payment Due: \$
If any improvements - Describe:			

SECTION 4

Supporting Documents

Along with this loan application please also submit the following;

- ☐ Three years of most recent Tax Returns / Financials of the Borrower (Signed Copy)
- ☐ Three years of most recent Tax Returns of each principal (Signed Copy)
- ☐ Personal Financial Statements of each principal (On HAB's format)
- ☐ Copies of Leases (If property is rented)
- ☐ Signed Copy of the Sales Contract (For purchase transactions only)
- ☐ Please provide copies of six months of bank statements and/or Rent Checks / Evidence of Rents Collected
- ☐ Entity Documents (i.e.: Operating Agreement/By-Laws, Certificate of Formation, Statement of Information, etc.) as applicable
- ☐ Real Estate Debt Schedule, Current Balance, Monthly payment, Interest Rate, debtor/due to whom and maturity date.
- ☐ Rent Roll (On HAB's Format)
- ☐ Income and Expense Statement (On HAB's Format)

This loan application, which has been fully executed by the Borrower, and all documents, financial statements and any other information submitted in support hereof constitute a full, correct, and complete loan application and financial statement of the Borrower and have been prepared prior to and submitted for the purpose of obtaining a Loan from Habib American Bank and are certified to be true and correct by the Borrower under penalty of perjury. 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 facts as applicable under the provisions of Title 18, United States Code, Section 1014.

Name of Applicant

Signature of Applicant and Title

Date: _____



150 E. 45th Street, New York, NY 10017 - Tel: 212-532-4444

PERSONAL FINANCIAL STATEMENT AS OF: _____

Personal Information					
Applicant (Name)			Co-Applicant (Name)		
Employer			Employer		
Address of Employer			Address of Employer		
Business Phone No.	No. of Years with Employer	Title/Position	Business Phone No.	No. of Years with Employer	Title/Position
Home Address			Home Address		
Home Phone No.	Social Security No.	Date of Birth	Home Phone No.	Social Security No.	Date of Birth
Cell Phone No.	Email		Cell Phone No.	Email	
Name, Phone No. of your Accountant			Name, Phone No. of your Accountant		
Name, Phone No. of your Attorney			Name, Phone No. of your Attorney		
Name, Phone No. of your Investment Advisor/Broker			Name, Phone No. of your Investment Advisor/Broker		
Name, Phone No. of your Insurance Advisor			Name, Phone No. of your Insurance Advisor		

Cash Income & Expenditures Statement for Year Ended _____ (Omit Cents)

Annual Income	Amount (\$)	Annual Expenditures	Amount (\$)
Salary (Applicant)		Federal Income and Other Taxes	
Salary (Co-Applicant)		State Income and Other Taxes	
Bonuses & Commissions (Applicant)		Rental Payments, Co-op, or Condo Maintenance	
Bonuses & Commissions (Co-Applicant)		Mortgage Payments Residential Investment	
Rental Income		Property Taxes Residential Investment	
Interest Income		Interest & Principal Payments on Loans	
Dividend Income		Insurance	
Capital Gains		Investments (including tax shelters)	
Partnership Income		Alimony/ Child Support	
Other Investment Income		Tuition	
Other Income (List)**		Other Living Expense	
		Medical Expenses	
		Other Expenses (List)	
Total Income →		Total Expenditures →	

Any significant changes expected in the next 12 months? ☐ Yes ☐ No (If yes, attach information).

** Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation.

Balance Sheet as of _____

Assets	Amount (\$)	Liabilities	Amount (\$)
Cash in this Bank (including money market accounts, CD's)		Notes Payable to this Bank	X X X
		Secured	
Cash in Other Financial Institutions (List) (including money market accounts, CD's)		Unsecured	
		Notes Payable to Others (Schedule E)	X X X
		Secured	
		Unsecured	
		Accounts Payable (including credit cards)	
		Margin Accounts	
Readily Marketable Securities (Schedule A)		Notes Due: Partnership (Schedule D)	
Non-Readily Marketable Securities (Schedule A)		Taxes Payable	
Accounts and Notes Receivable		Mortgage Debt (Schedule C)	
Net Cash Surrender Value of Life Insurance (Schedule B)		Life Insurance Loans (Schedule B)	
Residential Real Estate (Schedule C)		Other Liabilities (List):	
Real Estate Investments (Schedule C)			
Partnerships/PC Interests (Schedule D)			
IRA, Keogh, Profit-Sharing & Other Vested Retirement Accts.			
Deferred Income (no. of yrs. deferred _____)			
Personal Property (including automobiles)			
Other Assets (List):			
Total Assets		Total Liabilities	
		Net Worth	

Contingent Liabilities	Yes	No	Amount
Are you the guarantor, co-maker, or endorser for any debt of an individual, corporation, or partnership?			\$ _____
Do you have any outstanding letters of credit or surety bonds?			_____
Are there any suits or legal actions pending against you?			_____
Are you contingently liable on any lease or contract?			_____
Are any of your tax obligations due?			_____
What would be your total estimated tax liability if you were to sell your major assets?			_____
If yes to any of the above, please give details:			_____

Schedule A – All Securities (including non-money market mutual funds)							
No. of Shares (Stock) or Face Value (Bonds)	Description	Owner(s)	Where Held	Cost	Current Market Value	Pledged	
						Yes	No
Ready Marketable Securities (including U.S. Governments and Municipals)*							
Non-Marketable Securities (closely held, thinly traded, or restricted stock)							

*If there is not enough space, attach a separate schedule or brokerage statement and enter totals only.

Life Insurance (use an additional sheet if necessary)

Insurance Company	Face Amount of Policy	Type of Policy	Beneficiary	Cash Surrender Value	Amount Borrowed	Ownership

Disability Insurance	Applicant	Co-Applicant
Monthly Distribution if Disabled		
Number of Years Covered		

Personal Residence		Purchase	Market	Present Loan	Interest	Loan	Monthly
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[illegible]

			Percent	Current
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[illegible]

***Note:** For investments which represent a material portion of your total assets, please include the relevant financial statement or tax returns, or in the case of partnership investments or S-corporations, schedule K-1s.

Due to	Type of Error
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[illegible]

Please Answer the Following Questions:

1. Income tax returns filed through (date): _____ Are any returns currently audited or contested? ☐ Yes ☐ No
If yes, what year(s)? _____
2. Have (either of) you or any firm in which you were a major owner ever declared bankruptcy? ☐ Yes ☐ No
If yes, please provide details: _____
3. Have you drawn a will? ☐ Yes ☐ No
If yes, please furnish the name of the executor(s) and year will was drawn: _____
4. Number of dependents (excluding self) and relationship to applicant: _____
5. Have you ever had a financial plan prepared for you? ☐ Yes ☐ No
6. Did you include two years of federal and state tax returns? ☐ Yes ☐ No
7. Do (either of) you have a line of credit or unused credit facility at any other institution(s)? ☐ Yes ☐ No
If so, please indicate where, how much, and name of banker: _____

8. Do you anticipate any substantial inheritances? ☐ Yes ☐ No
If yes, please explain: _____

To: Habib American Bank, New York, NY ("You")

Date:

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guarantee thereof. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any information contained in this statement or (2) in the financial condition of any of the undersigned, or (3) in the ability of any of the undersigned to its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein and to determine the credit-worthiness of the undersigned. The undersigned authorize any person or consumer reporting agency to give you any information it may have on the undersigned. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned. As long as any obligation or guarantee of the undersigned to you is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give you shall be your property. Each of the undersigned understands that if he has made any false statements herein which he knows to be untrue, that such false statements may subject him to, among other things, criminal sanction under Section 210.45 of the Penal Law of New York State.

"Security Interest" is a term defined in Section 1-202 (37) of the Uniform Commercial Code of the State of New York as "an interest in personal property which secures payment or performance of an obligation."

Date

Your Signature

Date

Co-applicant's Signature (if you are requesting the financial accommodation jointly)



HAB BANK

INCOME & EXPENSE STATEMENT FOR THE YEAR

PROPERTY ADDRESS: _____

Last Year Tax
Returns: _____ Yr.

Current Rent
Roll: _____ Yr.

INCOME:

Gross Rents
Other _____
Other _____

TOTAL INCOME:

EXPENSES:

Real Estate Taxes
Water/Sewer/Meter Charges
Heating Fuel
Managing fee
Fire/Liability/Equip. Insurance
Common Area Electricity/Gas
Payroll/Wages/Super
Maintenance/Repairs
Painting
Supplies
Legal Fees
Bookkeeping/Accounting
Permits/Fees/Misc.
Exterminator Services
Cleaning Services
Other _____

TOTAL EXPENSES:

NET INCOME:

I Certify that the above income and expense information is true, correct and complete as of the date hereof.

Signature and Title

Date



CURRENT RENT ROLL

Borrower Name: _____

Property Address: _____

Residential

UNIT#	TENANT NAME	BD	BA	SQ. FT.	CURRENT RENT	LEASE PERIOD		DATE OF LAST RENT INCREASE	TYPE OF RENT (NNN etc.)
						BEGIN	END		

Commercial

UNIT#	TENANT NAME	SQ. FT.	CURRENT RENT	LEASE PERIOD		DATE OF LAST RENT INCREASE	TYPE OF RENT (NNN etc.)
				BEGIN	END		

Total Units

Vacant Units

Total Sq. Ft.: Total Rents:

I hereby certify to Habib American Bank, and its successors and assigns, that I have personally prepared and/or reviewed the information herein and on the attached documents, if any, and that to the best of my knowledge it is true and correct.

Applicant's Signature

Date

X _____



Environmental Questionnaire

Property Address: _____

Borrower: _____

The following questionnaire must be completed by the applicant prior to approval of any loan application for commercial real estate. This questionnaire pertains to the property being mortgaged. All questions which have been answered "Yes" will require a separate written explanation.

1. To the best of your knowledge, has the subject property been exposed to environmental hazards in the past?

Yes No

2. Does the subject property presently contain any environmentally hazardous material or condition?

Yes No

3. Do you anticipate that the subject property might be exposed to environmentally hazardous material or conditions?

Yes No

4. To the best of your knowledge, has the property ever been denied insurance coverage due to environmental factors?

Yes No

5. To the best of your knowledge, has there been contact by any federal, state or local government agencies concerning environmental matters that must be resolved in order to obtain business and/or environmental permits?

Yes No

6. Has the property or any adjoining property been used, or is currently being used for an industrial purpose?

Yes No

7. Are there currently, or to the best of your knowledge have there been previously, any registered or unregistered storage tanks (above or underground) located on the property?

Yes No

8. To the best of your knowledge has there been any environmental assessment of the property that indicated the presence of hazard substances or contamination of the property or recommended further assessment of the property?

Yes No

9. What steps have been taken to investigate the environmental condition of this property?

10. Please describe what prior involvement you have had with the property and current owner.

Please supply copies of all previous reports, notices and documents related to the environmental condition of the property.

Date _____ Signature _____ Title _____

APPRAISAL/ENVIRONMENTAL AUTHORIZATION

Dear Sir,

Re: Loan Request on subject property

It is understood and acknowledged by the undersigned that accepting payment for the Appraisal Fee and or Environmental Fee does not in any way constitute or should be construed as a commitment on the part of HAB Bank to provide financing on the transaction. Such commitment can only be issued in writing after receipt and review of all data required by the Bank to be pertinent to this transaction, and upon final approval pursuant to the Bank's loan policy.

AGREED & ACKNOWLEDGED by:

Name

Date



Centralized Credit Services
150 E. 45th Street, New York, NY 10017

Listing of Principals

The following is a listing of the: ☐ Partners ☐ Corporate Shareholders (check one)
☐ LLC Members

Name of Borrowing Entity

<i>Name</i>	<i>Social Security No.</i>	<i>% Owned</i>	<i>Date Interest Acquired</i>	<i>Corporate Title</i>	<i>Any loans with HAB?</i>
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
	<i>Must be 100%= 0</i>				

** This includes all loans made to entities in which the principle owns 10% or more interest. If “Yes” is indicated, kindly provide details, including the loan number, borrowers name and property address.

I certify that the above names represent a complete list of ALL the principals of the above entity as of the date hereof. Further, any additions or deletions will be promptly forwarded in writing to HAB Bank.

Signature: _____ Date: _____

Title: _____

Make copies as necessary.

My Attorney’s Name, Address and Telephone Number : _____

Request for Transcript of Tax Return

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

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

► For more information about Form 4506-T, visit www.irs.gov/form4506t.

OMB No. 1545-1872

Tip: Get faster service: Online at www.irs.gov, **Get Your Tax Record** (Get Transcript) or by calling **1-800-908-9946** for specialized assistance. We have teams available to assist. **Note:** Taxpayers may register to use [Get Transcript](#) to view, print, or download the following transcript types: **Tax Return Transcript** (shows most line items including Adjusted Gross Income (AGI) from your original Form 1040-series tax return as filed, along with any forms and schedules), **Tax Account Transcript** (shows basic data such as return type, marital status, AGI, taxable income and all payment types), **Record of Account Transcript** (combines the tax return and tax account transcripts into one complete transcript), **Wage and Income Transcript** (shows data from information returns we receive such as Forms W-2, 1099, 1098 and Form 5498), and **Verification of Non-filing Letter** (provides proof that the IRS has no record of a filed Form 1040-series tax return for the year you request).

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 Customer file number (if applicable) (see instructions)	

Note: Effective July 2019, the IRS will mail tax transcript requests only to your address of record. See **What's New** under **Future Developments** on Page 2 for additional information.

6 Tax 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 1120-A, Form 1120-H, Form 1120-L, 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 2016, filed in 2017, will likely not be available from the IRS until 2018. 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 end date of the tax year or period requested in mm/dd/yyyy format. This may be a calendar year, fiscal year or quarter. Enter each quarter requested for quarterly returns. Example: Enter 12/31/2018 for a calendar year 2018 Form 1040 transcript.

/	/	/	/	/	/	/	/
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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, 1 percent or more shareholder, partner, managing member, 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:** This form must be received by IRS within 120 days of the signature date.

<input type="checkbox"/> Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T. See instructions.	Phone number of taxpayer on line 1a or 2a
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Signature (see instructions) </div> <div style="width: 40%;"> Date </div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Title (if line 1a above is a corporation, partnership, estate, or trust) </div> <div style="width: 40%;"></div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> Spouse's signature </div> <div style="width: 40%;"> Date </div> </div>	

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.

The filing location for the Form 4506-T has changed. **Please see Chart for individual transcripts or Chart for all other transcripts** for the correct mailing location.

What's New. As part of its ongoing efforts to protect taxpayer data, the Internal Revenue Service announced that in July 2019, it will stop all third-party mailings of requested transcripts. After this date masked Tax Transcripts will only be mailed to the taxpayer's address of record.

If a third-party is unable to accept a Tax Transcript mailed to the taxpayer, they may either contract with an existing IVES participant or become an IVES participant themselves. For additional information about the IVES program, go to www.irs.gov and search IVES.

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. 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.

Customer File Number. The transcripts provided by the IRS have been modified to protect taxpayers' privacy. Transcripts only display partial personal information, such as the last four digits of the taxpayer's Social Security Number. Full financial and tax information, such as wages and taxable income, are shown on the transcript.

An optional Customer File Number field is available to use when requesting a transcript. This number will print on the transcript. See Line 5 instructions for specific requirements. The customer file number is an optional field and not required.

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 "Get a Tax Transcript..." under "Tools" 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 shows two different addresses, send your request to the address based on the address of your most recent return.

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 addresses 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 5. Enter up to 10 numeric characters to create a unique customer file number that will appear on the transcript. The customer file number **should not** contain an SSN. Completion of this line is not required.

Note. If you use an SSN, name or combination of both, we will not input the information and the customer file number will reflect a generic entry of "9999999999" on the transcript.

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. 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. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-T but must provide documentation to support the requester's right to receive the information.

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.

Note: If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or trust.

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.

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, Arkansas, Florida, Georgia, Louisiana, Mississippi, North Carolina, Oklahoma, South Carolina, 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 855-587-9604
Delaware, Illinois, Indiana, Iowa, Kentucky, Maine, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, Vermont, Virginia, Wisconsin	Internal Revenue Service RAIVS Team Stop 6705 S-2 Kansas City, MO 64999 855-821-0094
Alaska, Arizona, California, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Kansas, Maryland, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, South Dakota, Utah, Washington, West Virginia, Wyoming	Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409 855-298-1145

Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to:
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