

Request for Copy or Transcript of Tax Form

▶ Read instructions before completing this form.

▶ Type or print clearly. Request may be rejected if the form is incomplete or illegible.

Note: Do not use this form to get tax account information. Instead, see instructions below.

1a Name shown on tax form. If a joint return, enter the name shown first.	1b First social security number on tax form or employer identification number (see instructions)
2a If a joint return, spouse's name shown on tax form	2b Second social security number on tax form : : :
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code	
4 Address, (including apt., room, or suite no.), city, state, and ZIP code shown on the last return filed if different from line 3	
5 If copy of form or a tax return transcript is to be mailed to someone else, enter the third party's name and address	
6 If we cannot find a record of your tax form and you want the payment refunded to the third party, check here ▶ <input type="checkbox"/>	
7 If name in third party's records differs from line 1a above, enter that name here (see instructions) ▶	
8 Check only one box to show what you want. There is no charge for items 8a, b, and c: a <input type="checkbox"/> Tax return transcript of Form 1040 series filed during the current calendar year and the 3 prior calendar years (see instructions). b <input type="checkbox"/> Verification of nonfiling. c <input type="checkbox"/> Form(s) W-2 information (see instructions). d <input type="checkbox"/> Copy of tax form and all attachments (including Form(s) W-2, schedules, or other forms). The charge is \$23 for each period requested. Note: If these copies must be certified for court or administrative proceedings, see instructions and check here ▶ <input type="checkbox"/>	
9 If this request is to meet a requirement of one of the following, check all boxes that apply. <input type="checkbox"/> Small Business Administration <input type="checkbox"/> Department of Education <input type="checkbox"/> Department of Veterans Affairs <input type="checkbox"/> Financial institution	
10 Tax form number (Form 1040, 1040A, 941, etc.)	12 Complete only if line 8d is checked. Amount due: a Cost for each period \$ 23.00 b Number of tax periods requested on line 11 c Total cost. Multiply line 12a by line 12b. . . \$ Full payment must accompany your request. Make check or money order payable to "Internal Revenue Service."
11 Tax period(s) (year or period ended date). If more than four, see instructions.	

Caution: Before signing, make sure all items are complete and the form is dated.

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. I am aware that based upon this form, the IRS will release the tax information requested to any party shown on line 5. The IRS has no control over what that party does with the information.

Please Sign Here	Signature. See instructions. If other than taxpayer, attach authorization document.	Date	Telephone number of requester ()
	Title (if line 1a above is a corporation, partnership, estate, or trust)		Best time to call
	Spouse's signature	Date	TRY A TAX RETURN TRANSCRIPT (see line 8a instructions)

Instructions

Section references are to the Internal Revenue Code.

TIP: If you had your tax form filled in by a paid preparer, check first to see if you can get a copy from the preparer. This may save you both time and money.

Purpose of Form.—Use Form 4506 to get a tax return transcript, verification that you did not file a Federal tax return, Form W-2 information, or a copy of a tax form. Allow 6 weeks after you file a tax form before you request a copy of it or a transcript. For W-2

information, wait 13 months after the end of the year in which the wages were earned. For example, wait until Feb. 1999 to request W-2 information for wages earned in 1997.

Do not use this form to request Forms 1099 or tax account information. See this page for details on how to get these items.

Note: Form 4506 must be received by the IRS within 60 calendar days after the date you signed and dated the request.

How Long Will It Take?—You can get a tax return transcript or verification of nonfiling within 7 to 10 workdays after the IRS receives your request. It can take up to 60 calendar

days to get a copy of a tax form or W-2 information. To avoid any delay, be sure to furnish all the information asked for on Form 4506.

Forms 1099.—If you need a copy of a Form 1099, contact the payer. If the payer cannot help you, call or visit the IRS to get Form 1099 information.

Tax Account Information.—If you need a statement of your tax account showing any later changes that you or the IRS made to the original return, request tax account information. Tax account information lists

(Continued on back)

certain items from your return, including any later changes.

To request tax account information, write or visit an IRS office or call the IRS at the number listed in your telephone directory.

If you want your tax account information sent to a third party, complete **Form 8821**, Tax Information Authorization. You may get this form by phone (call 1-800-829-3676) or on the Internet (at <http://www.irs.ustreas.gov>).

Line 1b.—Enter your employer identification number (EIN) **only** if you are requesting a copy of a **business** tax form. Otherwise, enter the first social security number (SSN) shown on the tax form.

Line 2b.—If requesting a copy or transcript of a joint tax form, enter the second SSN shown on the tax form.

Note: *If you do not complete line 1b and, if applicable, line 2b, there may be a delay in processing your request.*

Line 5.—If you want someone else to receive the tax form or tax return transcript (such as a CPA, an enrolled agent, a scholarship board, or a mortgage lender), enter the name and address of the individual. If we cannot find a record of your tax form, we will notify the third party directly that we cannot fill the request.

Line 7.—Enter the name of the client, student, or applicant if it is different from the name shown on line 1a. For example, the name on line 1a may be the parent of a student applying for financial aid. In this case, you would enter the student's name on line 7 so the scholarship board can associate the tax form or tax return transcript with their file.

Line 8a.—If you want a tax return transcript, check this box. Also, on line 10 enter the tax form number and on line 11 enter the tax period for which you want the transcript.

A tax return transcript is available only for returns in the 1040 series (Form 1040, Form 1040A, 1040EZ, etc.). It shows most line items from the original return, including accompanying forms and schedules. In many cases, a transcript will meet the requirement of any lending institution such as a financial institution, the Department of Education, or the Small Business Administration. It may also be used to verify that you did not claim any itemized deductions for a residence.

Note: *A tax return transcript does not reflect any changes you or the IRS made to the original return. If you want a statement of your tax account with the changes, see **Tax Account Information** on page 1.*

Line 8b.—Check this box only if you want proof from the IRS that you did not file a return for the year. Also, on line 11 enter the tax period for which you want verification of nonfiling.

Line 8c.—If you want only Form(s) W-2 information, check this box. Also, on line 10 enter "Form(s) W-2 only" and on line 11 enter the tax period for which you want the information.

You may receive a copy of your actual Form W-2 or a transcript of the information, depending on how your employer filed the form. However, state withholding information is not shown on a transcript. If you have filed your tax return for the year the wages were earned, you can get a copy of the actual Form W-2 by requesting a complete copy of your return and paying the required fee.

Contact your employer if you have lost your current year's Form W-2 or have not received it by the time you are ready to prepare your tax return.

Note: *If you are requesting information about your spouse's Form W-2, your spouse must sign Form 4506.*

Line 8d.—If you want a certified copy of a tax form for court or administrative proceedings, check the box to the right of line 8d. It will take at least 60 days to process your request.

Line 11.—Enter the year(s) of the tax form or tax return transcript you want. For fiscal-year filers or requests for quarterly tax forms, enter the date the period ended; for example, 3/31/96, 6/30/96, etc. If you need more than four different tax periods, use additional Forms 4506. Tax forms filed 6 or more years ago may not be available for making copies. However, tax account information is generally still available for these periods.

Line 12c.—Write your SSN or EIN and "Form 4506 Request" on your check or money order. If we cannot fill your request, we will refund your payment.

Signature.—Requests for copies of tax forms or tax return transcripts to be sent to a third party must be signed by the person whose name is shown on line 1a or by a person authorized to receive the requested information.

Copies of tax forms or tax return transcripts for a jointly filed return may be furnished to either the husband or the wife. Only one signature is required. However, see the line 8c instructions. Sign Form 4506 exactly as your name appeared on the original tax form. If you changed your name, **also** sign your current name.

For a corporation, the signature of the president of the corporation, or any principal officer and the secretary, or the principal officer and another officer are generally required. For more details on who may obtain tax information on corporations, partnerships, estates, and trusts, see section 6103.

If you are **not** the taxpayer shown on line 1a, you must attach your authorization to receive a copy of the requested tax form or tax return transcript. You may **attach a copy of the authorization document** if the original has already been filed with the IRS. This will generally be a **power of attorney** (Form 2848), or **other authorization**, such as Form 8821, or evidence of entitlement (for Title 11 Bankruptcy or Receivership Proceedings). If the taxpayer is deceased, you must send Letters Testamentary or other evidence to establish that you are authorized to act for the taxpayer's estate.

Where To File.—Mail Form 4506 with the correct total payment attached, if required, to the **Internal Revenue Service Center** for the place where you lived when the requested tax form was filed.

Note: *You must use a separate form for each service center from which you are requesting a copy of your tax form or tax return transcript.*

If you lived in: Use this address:

New Jersey, New York (New York City and counties of Nassau, Rockland, Suffolk, and Westchester)	1040 Waverly Ave. Photocopy Unit Stop 532 Holtsville, NY 11742
New York (all other counties), Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont	310 Lowell St. Photocopy Unit Stop 679 Andover, MA 01810
Florida, Georgia, South Carolina	4800 Buford Hwy. Photocopy Unit Stop 91 Doraville, GA 30362

Indiana, Kentucky, Michigan, Ohio, West Virginia	P.O. Box 145500 Photocopy Unit Stop 521 Cincinnati, OH 45250
Kansas, New Mexico, Oklahoma, Texas	3651 South Interregional Hwy. Photocopy Unit Stop 6716 Austin, TX 73301
Alaska, Arizona, California (counties of Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Glenn, Humboldt, Lake, Lassen, Marin, Mendocino, Modoc, Napa, Nevada, Placer, Plumas, Sacramento, San Joaquin, Shasta, Sierra, Siskiyou, Solano, Sonoma, Sutter, Tehama, Trinity, Yolo, and Yuba), Colorado, Idaho, Montana, Nebraska, Nevada, North Dakota, Oregon, South Dakota, Utah, Washington, Wyoming	P.O. Box 9941 Photocopy Unit Stop 6734 Ogden, UT 84409
California (all other counties), Hawaii	5045 E. Butler Avenue Photocopy Unit Stop 52180 Fresno, CA 93888
Illinois, Iowa, Minnesota, Missouri, Wisconsin	2306 E. Bannister Road Photocopy Unit Stop 6700, Annex 1 Kansas City, MO 64999
Alabama, Arkansas, Louisiana, Mississippi, North Carolina, Tennessee	P.O. Box 30309 Photocopy Unit Stop 46 Memphis, TN 38130
Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, a foreign country, or A.P.O. or F.P.O. address	11601 Roosevelt Blvd. Photocopy Unit DP 536 Philadelphia, PA 19255

Privacy Act and Paperwork Reduction Act Notice.—We ask for the information on this form to establish your right to gain access to your tax form or transcript under the Internal Revenue Code, including sections 6103 and 6109. We need it to gain access to your tax form or transcript in our files and properly respond to your request. If you do not furnish the information, we will not be able to fill your request. We may give the information to the Department of Justice or other appropriate law enforcement official, as provided by law.

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 this form will vary depending on individual circumstances. The estimated average time is: **Recordkeeping**, 13 min.; **Learning about the law or the form**, 7 min.; **Preparing the form**, 26 min.; and **Copying, assembling, and sending the form to the IRS**, 17 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. You can write to the Tax Forms Committee, Western Area Distribution Center, Rancho Cordova, CA 95743-0001. **DO NOT** send the form to this address. Instead, see **Where To File** on this page.



MORTGAGE LOAN ORIGINATION AGREEMENT

You, the applicant(s) agree to enter into this Mortgage Loan Origination Agreement with DREW MORTGAGE ASSOCIATES as an independent contractor to apply for a residential mortgage loan from a participating lender with which we from time to time contract upon such terms and conditions as you may request or a lender may require. You inquired into mortgage financing with DREW MORTGAGE ASSOCIATES on _____ (date). We are licensed as a Mortgage Broker or Mortgage Lender in the state of

Massachusetts New Hampshire Connecticut Florida (check the appropriate box in which the subject property is located)

SECTION 1. NATURE OF RELATIONSHIP.

In connection with this mortgage loan we are acting as an independent contractor and not as your agent. We will enter into separate independent contractor agreements with various lenders. While we seek to assist you in meeting your financial needs, we do not distribute the products of all lenders or investors in the market and cannot guarantee the lowest price or best terms available in the market.

SECTION 2. OUR COMPENSATION.

The lenders whose loan products we distribute generally provide their loan products to us at a wholesale rate. The retail price we offer you – your interest rate, total points and fees – will include our compensation. In some cases, we may be paid all of our compensation by either you or the lender. Alternatively, we may be paid a portion of our compensation by both you and the lender. For example, in some cases, if you would rather pay a lower interest rate, you may pay higher up-front points and fees. Also, in some cases, if you would rather pay less up-front, you may be able to pay some or all of our compensation indirectly through a higher interest rate in which case we will be paid directly by the lender. We also may be paid by the lender based on (I) the value of the Mortgage Loan or related servicing rights in the market place or (II) other services, goods or facilities performed or provided by us to the lender.

By signing below, applicant(s) acknowledge receipt of a copy of this signed Agreement.

MORTGAGE LOAN BORROWER APPLICANT(S)

By: _____ By: _____

Name: _____ Name: _____

Date: _____ Date: _____

Address: _____ Address: _____



Mass Lender ML0020
Mass Broker MB0050

HOMEBUYER'S SETTLEMENT COST
GUIDE BOOKLET

By signing below, borrower acknowledges receipt of the Homebuyer's Settlement Cost Guide Booklet.

Date

Borrower

Borrower



Mass Lender ML0020
Mass Broker MB0050

HOMEBUYER'S CONSUMER HANDBOOK ON
ADJUSTABLE RATE MORTGAGES

By signing below, borrower acknowledges receipt of the Homebuyer's Handbook on Adjustable Rate Mortgages.

Date

Borrower

Borrower



Mass Lender ML0020
Mass Broker MB0050

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

1. I/We have applied for a mortgage loan through DREW MORTGAGE ASSOCIATES, INC., a Massachusetts Mortgage Lender/Broker. As part of the application process, DREW MORTGAGE ASSOCIATES, INC. may verify information contained in my/our loan application and in any other documents required in connection with the loan, either before the loan is closed or as part of the quality control program.
2. I/We authorize you to provide to DREW MORTGAGE ASSOCIATES, INC., and to any investor with whom DREW MORTGAGE ASSOCIATES, INC. may place my mortgage, and 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. DREW MORTGAGE ASSOCIATES, INC. or the mortgage lender may address this authorization to any party named in the loan application.
4. A copy of this authorization may be accepted as an original.
5. Your prompt reply to DREW MORTGAGE ASSOCIATES, INC. or the mortgage lender is appreciated.

Borrower's Signature

Borrower's Signature

Social Security Number

Social Security Number



Mass Lender ML0020
Mass Broker MB0050

AUTHORIZATION FOR REIMBURSEMENT

I/We have applied for a mortgage loan from DREW MORTGAGE ASSOCIATES, INC. In applying for this loan, I/We have deposited \$ _____ with DREW MORTGAGE ASSOCIATES, INC. which will be held in its trust account and used to reimburse the cost for my/our appraisal.

Drew Mortgage Associates, Inc. is specifically authorized to reimburse itself from my/our funds for monies paid to the credit bureau and the appraiser in connection with my/our mortgage loan application. These funds are non-refundable.

Borrower's Signature

Borrower's Signature



Mass Lender ML0020
Mass Broker MB0050

NOTICE OF RIGHT TO RECEIVE A COPY OF YOUR APPRAISAL

You have the right to a copy of the appraisal report, if any used in connection with your application for credit. If you wish a copy, please write to us at the Shrewsbury office listed below. Please type or print, sign and date your request, and include the following information: Your full name and mailing address; account number; property address (if different); telephone number with area code; and a statement that this is a request for a copy of your home mortgage loan or consumer loan appraisal report. We must hear from you no later than 90 days after we notify you about the action taken on your loan application or you withdraw your application.

Please include \$ _____ with your letter to cover the photocopying, postage and handling charges.

I/We acknowledge receipt of a copy of this notice.

Borrower's Signature

Borrower's Signature



Mass Lender ML0020
Mass Broker MB0050

TAX AND INSURANCE ESCROWS

By signing below, I/We acknowledge that I/We have chosen to:

- Include Tax and insurance escrows in my/our mortgage payment (mandatory on all FHA/VA loans and LTV > 80%).

- Waive Tax and Insurance escrows.

Please note that I/We are aware of a one time charge to waive tax and insurance escrows. This charge will vary and is based on the investor's discretion.

Borrower's Signature

Borrower's Signature



Mass Lender ML0020
Mass Broker MB0050

NOTICE TO MASSACHUSETTS PROPERTY APPLICANTS

1. The responsibility of the attorney for the mortgagee is to protect the interest of the mortgagee.
2. The mortgagor may, at his or her own expense, engage an attorney of his/her own selection to represent his/her own interest in the transaction
3. The approximate expiration date of the loan will be 10, 15, 20, 25 or 30 years from the date of the note and will be established by the mortgagee prior to the closing. Monthly payments will be structured so as to provide for repayment of the loan and all interest by the expiration date.
4. The interest rate to be charged will be set by the mortgagee at the time of application, when the mortgage commitment is issued, or may be established 14 business days prior to closing.
5. As of the expiration date of the loan, the mortgagee may demand payment of it, may rewrite it by agreement at a greater or lesser rate of interest, or may by agreement allow payments to be made on it at the same, or a lesser, or a greater rate of interest.

APPLICANTS ACKNOWLEDGE

6. That if the property is newly constructed or a dwelling of more than one unit, the Lender will require a Certificate of Occupancy at settlement indicating compliance with state building code, sanitary code and local ordinances
7. That the lead paint requirements of the mortgage are; Owner-Occupied Single Units; The Lender will require a lead paint waiver indemnifying it for any judgments, costs or liability that may result from lead paint in the property. All dwellings with more than One Unit; The Lender will require at closing certification that the property is free of lead paint in compliance with Massachusetts General Laws, Chapter 111, Sections 190-199.
8. That the mortgagee's policy regarding smoke detectors is satisfactory proof of compliance with Massachusetts General Laws Chapter 148, Section 26F must be provided to the Lender at closing.
9. The Federal Equal Credit Opportunity Act and comparable provisions of Massachusetts law prohibit creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract), or because all or part of the applicant's income derives from any public assistance program. The Federal Equal Opportunity Act also prohibits creditors from discriminating against credit applications because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with the Federal law concerning this credit is the Federal Trade Commission, Washington, D.C. 20580. The State agency that administers compliance with the state law is the Massachusetts Commission Against Discrimination, 1 Ashburton Place, Boston, Massachusetts 02108.

Applicant's Signature

Applicant's Signature

Date

Date



Mass Lender ML0020
Mass Broker MB0050

Date

To Whom It May Concern:

I/We are refinancing our real estate located at

for the following reason(s):

1

2

3

Borrower's Signature

Borrower's Signature



Mass Lender ML0020
Mass Broker MB0050

NOTICE
SEPTIC SYSTEM INSPECTION REQUIREMENT

For any sale of a home served by a septic system closing on or after March 31, 1995, Title V of the State Environmental Code requires a septic system inspection to be performed in compliance with the rules of the Department of Environmental Protection.

The Satisfactory completion of this inspection must be done in order to close your home loan.

The responsibility to conduct the inspection and the payment of the cost are negotiable between Buyers and Sellers. If you have any questions, you should contact your own attorney as soon as possible.

Receipt acknowledged:

Borrower's Signature

Borrower's Signature

Date

Date



Mass Lender ML0020
Mass Broker MB0050

To Whom it May Concern:

This is to certify that the undersigned is making a gift of \$ _____

to _____

relationship _____

to be used for the purchase of _____

This is an outright gift _____ I/We have given _____ I/We will be giving to the applicant(s)

There is no repayment expected or implied, either in the form of cash or by future services.

Additionally, the homebuyer and donor certify that the funds given to the homebuyer were not made available to the donor from any person or entity with an interest in the sale of the property or mortgage transaction.

Donor (Print Name) Donor's Signature

Donor (Print Name) Donor's Signature

Donor's Address City, State, Zip Code

Donor's Phone Number

Borrower (Print Name) Borrower's Signature

Borrower (Print Name) Borrower's Signature

.....
Verification of Gift Source (to be completed by Donor's depository)

The above named individual(s) (Donor) has sufficient assets deposited with this institution to honor the amount of the gift stated above.

Depository Name and Address

Account Number

Signature Title Date



Mass Lender ML0020
Mass Broker MB0050