UNIFORM BORROWER ASSISTANCE FORM

If you are experiencing a temporary or long-term hardship and need help, you must complete and submit this form along with other required documentation to be considered for available solutions. On this page, you must disclose information about (1) you and your intentions to either keep or transition out of your home; (2) the property's status; (3) bankruptcy; and (4) your credit counseling agency.

On Page 2, you must disclose information about <u>all</u> of your income, expenses and assets. Page 2 also lists the required income documentation that you must submit in support of your request for assistance. Then on Page 3, you must complete the Hardship Affidavit in which you disclose the nature of your hardship. The Hardship Affidavit informs you of the required documentation that you must submit in support of your hardship claim.

NOTICE: In addition, when you sign and date this form, you will make important certifications, representations and agreements, including certifying that all of the information in this Borrower Assistance Form is accurate and truthful and any identified hardship has contributed to your submission of this request for mortgage relief.

REMINDER: The Borrower Response Package you need to return consists of: (1) this completed, signed and dated Borrower Assistance Form; (2) completed and signed IRS Form 4506T-EZ (4506T for self-employed borrowers or borrowers with rental income); (3) required income documentation; and (4) required hardship documentation.

Loan Number Servicer's Name					usually found on yo	our monthly m	ortgage statement)
l want to:	Keep the Property		☐ Vacate the P	roperty	Sell the Prop	perty	Undecided
The property is currently:	My Primary Residence A Second Ho			ome	🗌 An Investme	ent Property	
The property is currently:	Owner Occupied Renter Occu			pied	Vacant		
	BORROWER	R			CO-BORROWER		
BORROWER'S NAME				CO-BORROWER'S NAME			
SOCIAL SECURITY NUMBER	DA	TE OF BIRTH		SOCIAL SEC	URITY NUMBER	DATE OF BIRTH	
HOME PHONE NUMBER WITH ARI	EA CODE			HOME PHO	NE NUMBER WITH ARE	A CODE	
CELL OR WORK NUMBER WITH AF	EA CODE			CELL OR WO	CELL OR WORK NUMBER WITH AREA CODE		
MAILING ADDRESS							
PROPERTY ADDRESS (IF SAME AS MAILING ADDRESS, JUST WRITE SAME)					EMAIL ADDRESS		
Is the property listed for sale? Yes No If yes, what was the listing date? If property has been listed for sale, have you received an offer on the property? Yes No Date of offer:Amount of Offer: \$ Agent's Name: Agent's Phone Number: For Sale by Owner? Yes No			Have you contacted a credit counseling agency for help? Yes No If yes, please complete the counselor contact information below: Counselor's Name: Agency's Name: Counselor's Phone Number: Counselor's Email Address:				
Do you have condominium or homeowner association (HOA) fees? Yes No							
Total monthly amount: \$ Name and address that fees are paid to:							
Have you filed for bankruptcy? Yes No If yes: Chapter 7 Chapter 11 Chapter 12 Chapter 13 If yes, what is the filing Date: Has your bankruptcy been discharged? Yes No Bankruptcy case number:							
Has any Borrower been deployed away from his/her primary residence or received a Permanent Change of Station order? Yes No Is any Borrower the surviving spouse of a deceased service member who was on active duty at the time of death? Yes No							

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Monthly Household Income		Debt Household Assets associated with the property and/or b rrower(s)excluding retirem int funds)				
Gross wages	\$	First Mortgage Payment	\$	Checking Account(s)	\$	
Overtime	\$	Second Mortgage Payment	\$	Checking Account(s)	\$	
Child Support / Alimony*	\$	Homeowner's Insurance	\$	Savings / Money Market	\$	
Non-taxable social security/SSDI	\$	Property Taxes	\$	CDs	\$	
Taxable SS benefits or other monthly income from annuities or retirement plans	\$	Credit Cards / Installment Loan(s) (total minimum payment per month)	\$	Stocks / Bonds	\$	
Tips, commissions, bonus and self- employed income	\$	Alimony, child support payments	\$	Other Cash on Hand	\$	
Rents Received	\$	Car Lease Payments	\$	Other Real Estate (estimatec value)	\$	
Unemployment Income	\$	HOA/Condo Fees/Property Maintenance	e \$	Other	\$	
Food Stamps/Welfare	\$	Mortgage Payments on other properties	s \$		\$	
Other	\$	Other	\$		\$	
Total (Gross income)	\$ 0	Total Household Expenses and Debt Payments	\$ 0	Total Assets	\$ 0	
Lien Holder's Name Balance and Interest Rate Loan Number Lien Holder's Phone Number						
		Required Income Docum	nentation			
Do you earn a salary or hourly	/ wage?	Are you self-employed?				
For each borrower who is a sa paid by the hour, include pays most recent 30 days' or four w documentation reflecting year not reported on the paystubs printout from employer).	tub(s) reflectir veeks' earnings -to-date earni	ng theindividual federal incoms andeither the most recent sngs, ifthat reflects activity for the	e tax return a igned and dat the most rece	employed income, include a complete nd, as applicable, the business tax rei ed quarterly or year-to-date profit/lo int three months; OR copies of bank s months evidencing continuation of b	turn; AND oss statement statements for	
"Other Earned Income" such Reliable third-party doc	n as bonuses, d umentation de	n e? Provide for each borrower as ap commissions, housing allowance, tip es cribing the amount and nature of the commentation of the amount and nature of the commentation of the amount and nature of the commentation of the	s, or overtime		or intouts	
documenting tip income). Social Security, disability or death benefits , pension, public assistance, or adoption assistance: Documentation showing the amount and frequency of the benefits, such as letters, exhibits, disability policy or benefits statement from the						
provider, and Documentation showing	the receint o	f payment such as conies of the two	most recent h	nank statements showing deposit am	o unts	
Documentation showing the receipt of payment, such as copies of the two most recent bank statements showing deposit amo unts. Rental income: Copy of the most recent filed federal tax return with all schedules, including Schedule E—Supplement Income and Loss. Renta I income for						
qualifying purposes will b e 75% of the gross rent you reported reduced by the monthly debt service on the property, if applicable; or If rental income is not reported on Sche dule E – Supplemental Income and Loss, provide a copy of the current lease agreement with either						
Investment income:		_{IC} ks demonstrating receipt of rent. nent statements or bank statements s	upporting rec	eipt of this income.		
Alimony, child support, or se paration maintenance payments as qualifying income:* Copy of divorce decree, s eparation agreement, or other written legal agreement filed with a court, or court decree that states the amount						
of the alimony, child support, or separa tion maintenance payments and the period of time over which the payments will be received, and Copies of your two most recent bank statements or other third-party documents showing receipt of payment.						
*Notice: Alimony, child support, this loan.	o r separate m	na intenance income need not be reve	ealed if you d	o not choose to have it considered fo	or repaying	

UNIFORM BORROWER ASSISTANCE FORM				
HARDSHIP AFFIDAVIT				
I am requesting review of my current financial situation to determine whether I qualify for temporary or permanent mortgage loan relief				
options. Date Hardship Began is:				
I believe that my situation is:				
Short-term (under 6 months) Medium-term (6 – 12 months) Long-term or Permanent Hardship (greater than 12 months)				
I am having difficulty making my monthly payment because of reason set forth below:				
(Please check the primary reason and submit required documentation demonstrating your primary hardship)				
If Your Hardship is: Then the Required Hardship Documentation is:				
Unemployment	No hardship documentation required			
Reduction in Income: a hardship that	No hardship documentation required			
has caused a decrease in your income				
due to circumstances outside your				
control (e.g., elimination of overtime,				
reduction in regular working hours, a				
reduction in base pay)				
Increase in Housing Expenses: a	No hardship documentation required			
hardship that has caused an increase in				
your housing expenses due to				
circumstances outside your control	Diverse degree signed by the court OD			
Divorce or legal separation; Separation	Divorce decree signed by the court; OR Separation agreement signed by the court; OR			
of Borrowers unrelated by marriage,	 Separation agreement signed by the court; OR Current credit report evidencing divorce, separation, or non-occupying 			
civil union or similar domestic	borrower has a different address; OR			
partnership under applicable law	Recorded quitclaim deed evidencing that the non-occupying Borrower or co-			
	Borrower has relinquished all rights to the property			
Death of a borrower or death of either	Death certificate; OR			
the primary or secondary wage earner	Obituary or newspaper article reporting the death			
in the household				
Long-term or permanent disability;	Proof of monthly insurance benefits or government assistance (if applicable); OR			
Serious illness of a borrower/co-	Written statement or other documentation verifying disability or illness; OR			
borrower or dependent family member	Doctor's certificate of illness or disability; OR			
	Medical bills			
	None of the above shall require providing detailed medical information.			
Disaster (natural or man-made)	Insurance claim; OR			
adversely impacting the property or	Federal Emergency Management Agency grant or Small Business Administration			
Borrower's place of employment	loan; OR Borrower or Employer property located in a federally declared disaster area			
Distant angleum ant transfan / Dalaastian				
Distant employment transfer / Relocation	For active duty service members: Notice of Permanent Change of Station (PCS) or actual PCS orders.			
	For employment transfers/new employment:			
	Copy of signed offer letter or notice from employer showing transfer to a new			
	employment location; OR			
	Paystub from new employer			
	In addition to the above, documentation that reflects the amount of any relocation			
	assistance provided, if applicable (not required for those with PCS orders).			
Business Failure	Tax return from the previous year (including all schedules) AND			
	Proof of business failure supported by one of the following:			
	 Bankruptcy filing for the business; OR Two months recent bank statements for the business account evidencing 			
	Two months recent bank statements for the business account evidencing cessation of business activity; OR			
	Most recent signed and dated quarterly or year-to-date profit and loss			
	statement			
Other: a hardship that is not covered	Written explanation describing the details of the hardship and relevant			
above	documentation			

Borrower/Co-Borrower Acknowledgement and Agreement

I certify, acknowledge, and agree to the following:

- 1. All of the information in this Borrower Assistance Form is truthful and the hardship that I have identified contributed to my need for mortgage relief.
- The accuracy of my statements may be reviewed by the Servicer, owner or guarantor of my mortgage, their agent(s), or an authorized third party*, and I may be required to provide additional supporting documentation. I will provide all requested documents and will respond timely to all Servicer, or authorized third party*, communications.
- 3. Knowingly submitting false information may violate Federal and other applicable law.
- 4. If I have intentionally defaulted on my existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this request for mortgage relief or if I do not provide all required documentation, the Servicer may cancel any mortgage relief granted and may pursue foreclosure on my home and/or pursue any available legal remedies.
- 5. The Servicer is not obligated to offer me assistance based solely on the representations in this document or other documentation submitted in connection with my request.
- 6. I may be eligible for a trial period plan, repayment plan, or forbearance plan. If I am eligible for one of these plans, I agree that:
 - a. All the terms of this Acknowledgment and Agreement are incorporated into such plan by reference as if set forth in such plan in full.
 - b. My first timely payment under the plan will serve as acceptance of the terms set forth in the notice of the plan sent by the Servicer.
 - c. The Servicer's acceptance of any payments under the plan will not be a waiver of any acceleration of my loan or foreclosure action that has occurred and will not cure my default unless such payments are sufficient to completely cure my entire default under my loan.
 - d. Payments due under a trial period plan for a modification will contain escrow amounts. If I was not previously required to pay escrow amounts, and my trial period plan contains escrow amounts, I agree to the establishment of an escrow account and agree that any prior waiver is revoked. Payments due under a repayment plan or forbearance plan may or may not contain escrow amounts. If I was not previously required to pay escrow amounts and my repayment plan or forbearance plan contains escrow amounts, I agree to the establishment of an escrow account and agree that any prior escrow amounts, I agree to the establishment of an escrow account and agree that any prior escrow waiver is revoked.
- 7. A condemnation notice has not been issued for the property.
- 8. The Servicer or authorized third party* will obtain a current credit report on all borrowers obligated on the Note.
- 9. The Servicer or authorized third party* will collect and record personal information that I submit in this Borrower Response Package and during the evaluation process. This personal information may include, but is not limited to: (a) my name, address, telephone number, (b) my social security number, (c) my credit score, (d) my income, and (e) my payment history and information about my account balances and activity. I understand and consent to the Servicer or authorized third party*, as well as any investor or guarantor (such as Fannie Mae or Freddie Mac), disclosing my personal information and the terms of any relief or foreclosure alternative that I receive to the following:
 - a. Any investor, insurer, guarantor, or servicer that owns, insures, guarantees, or services my first lien or subordinate lien (if applicable) mortgage loan(s) or any companies that perform support services to them; and
 - b. The U.S. Department of Treasury, Fannie Mae and Freddie Mac, in conjunction with their responsibilities under the Making Home Affordable program, or any companies that perform support services to them.
- 10. I consent to being contacted concerning this request for mortgage assistance at any telephone number, including mobile telephone number, or email address I have provided to the Lender/Servicer/ or authorized third party*. By checking this box, I also consent to being contacted by _____text messaging.

Borrower Signature	Date	Co-Borrower Signature	Date

*An authorized third party may include, but is not limited to, a counseling agency, Housing Finance Agency (HFA) or other similar entity that is assisting me in obtaining a foreclosure prevention alternative.

Form **4506T-EZ**

(Rev. August 2014)

Department of the Treasury

Internal Revenue Service

Short Form Request for Individual Tax Return Transcript

Request may not be processed if the form is incomplete or illegible.
 For more information about Form 4506T-EZ, visit www.irs.gov/form4506tez.

Tip. Use Form 4506T-EZ to or	ler a 1040 series tax return transcript free of charge, or you can quickly request transcripts by using our automated	i self-help
service tools. Please visit us at I	RS.gov and click on "Get Transcript of Your Tax Records" under "Tools" or call 1-800-908-9946.	

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number or individual taxpayer identification number on tax return
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return

3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)

4 Previous address shown on the last return filed if different from line 3 (see instructions)

5 If the transcript is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.

Third party name

M&T Bank c/o DataVerify

Address (including apt., room, or suite no.), city, state, and ZIP code

875 G reentree Rd., 8 Parkway Center, Pittsburgh, PA 15220

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

6 Year(s) requested. Enter the year(s) of the return transcript you are requesting (for example, "2008"). Most requests will be processed within 10 business days.

2013

2014

Note. If the IRS is unable to locate a return that matches the taxpayer identity information provided above, or if IRS records indicate that the return has not been filed, the IRS will notify you or the third party that it was unable to locate a return, or that a return was not filed, whichever is applicable.

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

Signature of taxpayer(s). I declare that I am the taxpayer whose name is shown on either line 1a or 2a. If the request applies to a joint return, either spouse must sign. Note. For transcripts being sent to a third party, this form must be received within 120 days of the signature date.
Phone number of taxpayer on line 1a or 2a

			011 1110 14 01 24
Sign			
Sign Here	Signature (see instructions)	Date	
		1	
	Spouse's signature	Date	

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

Cat. No. 54185S

Telephone number

1-800-724-1633

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

Future Developments

For the latest information about developments related to Form 4506T-EZ, such as legislation enacted after it was published, go to *www.irs.gov/form4506tez*.

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

Purpose of form. Individuals can use Form 4506T-EZ to request a tax return transcript for the current and the prior three years that includes most lines of the original tax return. The tax return transcript will not show payments, penalty assessments, or adjustments made to the originally filed return. You can also designate (on line 5) a third party (such as a mortgage company) to receive a transcript. Form 4506T-EZ cannot be used by taxpayers who file Form 1040 based on a tax year beginning in one calendar year and ending in the following year (fiscal tax year). Taxpayers using a fiscal tax year must file Form 4506-T, Request for Transcript of Tax Return, to request a return transcript.

Use Form 4506-T to request tax return transcripts, tax account information, W-2 information, 1099 information, verification of non-filing, and record of account.

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 Transcript of Your Tax Records" under "Tools" or call 1-800-908-9946.

Where to file. Mail or fax Form 4506T-EZ to the address below for the state you lived in when the return was filed.

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

If you filed an individual return and lived in:	Mail or fax to the "Internal Revenue Service" at:
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	RAIVS Team Stop 6716 AUSC Austin, TX 73301 512-460-2272
Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	RAIVS Team Stop 37106 Fresno, CA 93888 559-456-7227
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	RAIVS Team Stop 6705 P-6 Kansas City, MO 64999 816-292-6102

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) or your individual taxpayer identification number (ITIN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

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

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

Note. If the address on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address.

Signature and date. Form 4506T-EZ 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 4506T-EZ within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.

Transcripts of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506T-EZ exactly as your name appeared on the original return. If you changed your name, also sign your current name.

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. If you request a transcript, sections 6103 and 6109 require you to provide this information, including your SSN. 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 4506T-EZ will vary depending on individual circumstances. The estimated average time is: Learning about the law or the form, 9 min.; Preparing the form, 18 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 4506T-EZ 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.