

INFORMATION PACKET

In order for us to evaluate your request, you must complete this packet, sign in all the required places and fax or mail it to us with the required documentation.

Please keep a copy of everything you send to us for your records.

This packet contains the following:

1. Required Documentation Checklist -
Detailed list of the documents you must send to us:
 - a. From You, the Borrower and Co-Borrower
2. Mortgage Worksheet –
Information about your property, loans, income, etc., as well as details on the circumstances that have made it difficult for you to stay up-to-date with your mortgage payments
3. Authorization to Release Information for both Lender, HOA and others (if applicable), and email (if applicable) – Allows us to verify mortgage and HOA information and email information if you wish.
4. IRS Form 4506-T Request for Transcript of Tax Return –
Allows us to receive a transcript of your tax return to verify income information
5. Appraisal Contact Information –
Provides us information as to who to contact in order to have an appraisal performed on the property

Please send the completed packet as well as all required documentation:

BY REGULAR MAIL:

Poser Investments, Inc.
P.O. Box 850
Sierra Madre, CA 91025

BY OVERNIGHT MAIL:

Poser Investments, Inc.
55 W. Sierra Madre Blvd., Suite 202
Sierra Madre, CA 91024

BY FAX:

1-626-355-7133

If you need any assistance completing this packet, your single point of contact is Elizabeth Haug at 1-800-333-1527 x101 or ElizabethH@PoserInvestments.com.

This paragraph is a special notice to our customers who have filed a petition for protection under the United States Bankruptcy Code. Unless you have signed a reaffirmation agreement, and that agreement has been filed with the bankruptcy court (and not subsequently rescinded or disallowed in accordance with the Bankruptcy Code), you should disregard all portions of this letter which state or suggest that you still have a personal liability to pay Poser Investments, Inc.. If you have obtained a discharge under the Bankruptcy Code this letter is for informational purposes or to protect our interests in any collateral.

THIS IS AN ATTEMPT TO COLLECT A DEBT BY A DEBT COLLECTOR. ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE.

IF YOU HAVE FILED BANKRUPTCY AND RECEIVED A DISCHARGE, THIS IS NOT AN ATTEMPT TO COLLECT A DEBT. IT IS AN ACTION TO ENFORCE A LIEN ON REAL ESTATE.

REQUIRED DOCUMENTATION CHECKLIST

1A. FROM YOU, THE BORROWER AND CO-BORROWER:

If you are a Wager Earner (you received a W-2 from your employer) please provide:

- ___ Four (4) most recent Pay Stubs (four for each borrower)
- ___ Length of service with Current Employer: Borrower Year(s)____ Month(s)____
Co-borrower Year(s)____ Month(s)____
- ___ Most recent six (6) month's complete Bank Statement for all accounts (must provide all pages, including blank pages)

If you are Self Employed, please provide:

- ___ P&L Statement / Audited or reviewed YTD Income Statement
- ___ Most recent two (2) years' Tax Returns completed (personal and business, signed with all pages or 1099s or most recent two (2) years filed and proof of extension
- ___ Last six (6) months complete Business and Personal Bank Statements for all accounts(must provide all pages, If a business account is not used, provide a written statement stating a business account is not used)

Everyone must provide the following:

- ___ Most recent two (2) statements for all mortgage loans (must provide all pages of statements)
- ___ Copy of two most recently filed Federal Tax Returns (signed with all pages)
- ___ Copy of all W2's filed with the above Federal Tax Returns
- ___ Proof of occupancy (if owner occupied) – a recent utility bill in your name at property address
- ___ Copy of most recent property tax bill
- ___ Copy of the current insurance declaration page for all applicable coverage types

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- ___ Proof of payment of Homeowner's Association Fees (if applicable)
- ___ If any portion of the property is rented, please provide proof of rental income for the last twelve (12) months and copies of all rental agreements in place during the last twelve (12) months.
- ___ Mortgage Worksheet (enclosed). **Be sure to sign and date this form.**
- ___ Completed Authorization to Provide and Release Information (enclosed). This includes Home Owners Associations, attorneys, and others. **Sign and Date – IF APPLICABLE**
- ___ Completed Authorization to Release Information from Lender (enclosed). **Be sure to sign and date this form**
- ___ Completed Authorization to Provide Information via Email (enclosed). **Be sure to sign and date this form – IF APPLICABLE**
- ___ Completed 4506-T Request for Transcript of Tax Return (enclosed). **Be sure to sign and date this form.**

If Non-Owner Occupied:

- ___ Amount of Principal, Interest, Taxes , Insurance and Homeowner Dues for Primary Residence
- ___ Primary Residence Address
- ___ Copies of all rental agreements for the non-owner occupied property
- ___ Proof of the last two rental payments received on the non-owner occupied property to verify that the property is currently occupied (i.e. copy of check received or copy of bank statement page showing the deposit of the rental income).

By signing this document, I/we certify that all the information is truthful. I/We understand that knowingly submitting false information may constitute fraud.

Borrower Signature	Borrower SS#	Date
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Co-Borrower Signature	Co-Borrower SS#	Date
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MORTGAGE WORKSHEET - PLEASE COMPLETE BOTH PAGES OF THIS FORM

BORROWER

Borrower's name

Social Security Number

Home phone number with area code

Cell or work number with area code

CO-BORROWER

Co-borrower's name

Social Security Number

Home phone number with area code

Cell or work number with area code

I want to: ☐ Keep the Property ☐ Sell the Property

The property is my: ☐ Primary Residence ☐ Second Home ☐ Investment Property

The property is: ☐ Owner Occupied ☐ Renter Occupied ☐ Vacant

Mailing address

Property address (if same as mailing address, just write same)

E-mail address

Is the property listed for sale? ☐ Yes ☐ No

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

Who pays the real estate tax bill on your property?

☐ I do ☐ Lender does ☐ Paid by condo or HOA

Are the taxes current? ☐ Yes ☐ No

Condominium or HOA Fees ☐ Yes ☐ No \$ _____

Paid to: _____

Have you contacted a credit-counseling agency for help?

If yes, please complete the following:

Counselor's Name: _____

Agency Name: _____

Counselor's Phone Number: _____

Counselor's E-mail: _____

Who pays the hazard insurance premium for your property?

☐ I do ☐ Lender does ☐ Paid by condo or HOA

Is the policy current? ☐ Yes ☐ No

Name of Insurance Co.: _____

Insurance Co. Tel #: _____

Have you filed for bankruptcy? ☐ Yes ☐ No If yes: ☐ Chapter 7 ☐ Chapter 13 **Filing Date:** _____

Has your bankruptcy been discharged? ☐ Yes ☐ No **Bankruptcy case number:** _____

Additional Liens/Mortgages or Judgments on this property:

Lien Holder's Name/Service	Balance	Contact Number	Loan Number

This is an attempt to collect a debt by a debt collector. Any information obtained will be used for that purpose.

If you have filed bankruptcy and received a discharge, this is not an attempt to collect a debt. It is an action to enforce a lien on real estate.

MORTGAGE WORKSHEET - PLEASE COMPLETE BOTH PAGES OF THIS FORM**INCOME/EXPENSES FOR HOUSEHOLD****Number of People in Household:** _____

Monthly Household Income		Monthly Household Expenses/Debt		Household Assets	
Monthly Gross Wages	\$	First Mortgage Payment	\$	Checking Account(s)	\$
Overtime	\$	Second Mortgage Payment	\$	Checking Account(s)	\$
Child Support/Alimony	\$	Insurance	\$	Savings/Money Market	\$
Social Security/SSDI	\$	Property Taxes	\$	CDs	\$
Other monthly income from pensions, annuities or retirement plans	\$	Credit Cards/Installment Loan(s)(total minimum payment per month)	\$	Stocks/Bonds	\$
Tips, commissions, bonus and self-employment income	\$	Alimony, child support payments	\$	Other Cash on Hand	\$
Rents Received	\$	Net Rental Expenses	\$	Other Real Estate (estimated value)	\$
Unemployment Income	\$	HOA/Condo Fees/Property Maintenance	\$	Retirement Plans	\$
Food Stamps/Welfare	\$	Car Payments	\$	Other _____	\$
Other (Investment income, royalties, interest, dividends, etc.)	\$	Other _____	\$	Other _____	\$
Total (Gross Income)	\$	Total Expenses	\$	Total Assets	\$

The undersigned certifies/y under penalty of perjury that all statements in this document are true and correct:

Borrower Signature_____
Social Security Number_____
Date of Birth_____
Date_____
Co-borrower Signature_____
Social Security Number_____
Date of Birth_____
Date

This is an attempt to collect a debt by a debt collector. Any information obtained will be used for that purpose. If you have filed bankruptcy and received a discharge, this is not an attempt to collect a debt. It is an action to enforce a lien on real estate.

AUTHORIZATION RELEASE INFORMATION

To Lender:

Loan number:

BORROWER:

Co-BORROWER:

PROPERTY ADDRESS:

I/We, hereby authorize you to release to:

Elizabeth Haug of Poser Investments, Inc.

55 W. Sierra Madre Blvd., Suite 202

Sierra Madre, CA 91024

Phone (626) 355-7100 x 101 or (800) 333-1527 x101

ElizabethH@PoserInvestments.com

You are authorized to release any and all information or documentation that may be requested about the above-referenced loan/account or the above referenced property. This includes providing loan balances due and expedited payoff if requested. "Agents" shall include, but not be limited to, all real estate agents, attorneys, their assistants and junior lien holders. A copy of this authorization may be accepted as an original.

Signed by:

Signed by:

(Signature of Borrower)

(Signature of Co-Borrower)

(Printed Name)

(Printed Name)

(Date)

(Date)

**AUTHORIZATION TO PROVIDE
AND RELEASE INFORMATION**

This Borrower Authorization form will allow POSER INVESTMENTS, INC. or its authorized representative to share information about your mortgage with third parties.

TO: POSER INVESTMENTS, INC.

Type of Loan: _____

Date: _____

Borrowers: _____

Property Address: _____

I/We, _____ (borrower(s) name(s)),
Currently residing at _____ in the County of _____,
State of _____, hereby
authorize POSER INVESTMENTS, INC. to release, furnish, provide, exchange and request information
related to my/our loan to:

Authorized Third Party/Parties

Name of Third Party #1: _____	Name of Third Party #2: _____
Address: _____ _____	Address: _____ _____
Phone Number: _____	Phone Number: _____
Email Address: _____	Email Address: _____

And, I (We) hereby authorize POSER INVESTMENTS, INC. to release, furnish, provide, exchange and request information related to the account above to the Authorized Third Party identified above. You may communicate to the designated person(s) about any account related information, including but not limited to, the balance, delinquency status, payment terms, interest rate, due date, foreclosure actions and payment history. You may also discuss possible loss mitigation options with the designated person(s), such as modification, extension or short sale, as well as any other matter related to my account.

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**AUTHORIZATION TO PROVIDE
AND RELEASE INFORMATION**

Expiration of Authorization

If applicable, please specify a period of time or the particular transaction for which the authorization is valid. **If no expiration date or operational transaction is provided, this authorization will remain valid until revoked in writing.**

You may revoke this authorization at any time by providing written notice to POSER INVESTMENTS, INC. at POSER INVESTMENTS, INC., P.O. Box 850, Sierra Madre, CA 91025-0850.

I/We hereby indemnify and forever hold POSER INVESTMENTS, INC. harmless from any and all actions and causes of actions, suits, claims, attorney's fees or demands against POSER INVESTMENTS, INC., which I/we and/or my/our heirs may have resulting from POSER INVESTMENTS, INC. discussing, or declining to discuss, my/our account with the above-named requestor or person identifying himself/herself to be that requestor, or resulting from providing, or declining to provide, any documents or other information concerning the account to the requestor.

THIS FORM MUST BE SIGNED BY ALL SIGNERS ON THE MORTGAGE:

Signed by:

Signed by:

(Signature)

(Signature)

(Printed Name)

(Printed Name)

(Date)

(Date)

If you have any questions about the form, please call us at 1-800-333-1527.

**AUTHORIZATION TO PROVIDE
INFORMATION VIA EMAIL**

This Borrower Authorization form will allow POSER INVESTMENTS, INC. or its authorized representative to share information about your mortgage with you or authorized 3rd parties via email.

TO: POSER INVESTMENTS, INC.

Type of Loan: _____

Date: _____

Borrowers: _____

Property Address: _____

I/We, _____ (borrower(s) name(s)),

Currently residing at _____ in the County of

_____, State of _____, hereby

authorize POSER INVESTMENTS, INC. to release, furnish, provide, exchange and request information related to my/our loan via email to the following email address(es):

Email Address: _____ Email Address: _____

And, I (We) hereby authorize POSER INVESTMENTS, INC. to release, furnish, provide, exchange and request information related to the account to the email address(es) shown above. You may communicate via the above email address(es) any account related information, including but not limited to, the balance, delinquency status, payment terms, interest rate, due date, foreclosure actions and payment history. You may also email possible loss mitigation options such as modification, extension or short sale, as well as any other matter related to my account.

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**AUTHORIZATION TO PROVIDE
INFORMATION VIA EMAIL**

Expiration of Authorization

If applicable, please specify a period of time or the particular transaction for which the authorization is valid. **If no expiration date or operational transaction is provided, this authorization will remain valid until revoked in writing.**

You may revoke this authorization at any time by providing written notice to POSER INVESTMENTS, INC. at POSER INVESTMENTS, INC., P.O. Box 850, Sierra Madre, CA 91025-0850.

I/We hereby indemnify and forever hold POSER INVESTMENTS, INC. harmless from any and all actions and causes of actions, suits, claims, attorney's fees or demands against POSER INVESTMENTS, INC., which I/we and/or my/our heirs may have resulting from POSER INVESTMENTS, INC. sending information relating to our account to the email address(es) shown above.

THIS FORM MUST BE SIGNED BY ALL SIGNERS ON THE MORTGAGE OR DEED OF TRUST:

Signed by:

Signed by:

(Signature)

(Signature)

(Printed Name)

(Printed Name)

(Date)

(Date)

If you have any questions about the form, please call us at 1-800-333-1527.

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. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
4 Previous address shown on the last return filed if different from line 3 (see instructions)	
5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.	

Posr INvestments, Inc., 55 W. Sierra Madre Blvd., Suite 202, Sierra Madre, CA 91024 (800) 333-1527

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

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

a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 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 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days ☐

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

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

12 / 31 / 2017	12 / 31 / 2016	12 / 31 / 2015	12 / 31 / 2014
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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:** For transcripts being sent to a third party, this form must be received 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: 45%;"> Signature (see instructions) </div> <div style="width: 45%;"> Date </div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Title (if line 1a above is a corporation, partnership, estate, or trust) </div> <div style="width: 45%;"> Date </div> </div>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Spouse's signature </div> <div style="width: 45%;"> 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.

General Instructions

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

Purpose of form. Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

Note: If you are unsure of which type of transcript you need, request the Record of Account, as it provides the most detailed information.

Tip. Use Form 4506, Request for Copy of Tax Return, to request copies of tax returns.

Automated transcript request. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "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 below shows two different addresses, send your request to the address based on the address of your most recent return.

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

If you filed an individual return and lived in:	Mail or fax to:
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301 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	Internal Revenue Service 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	Internal Revenue Service RAIVS Team Stop 6705 P-6 Kansas City, MO 64999 816-292-6102

Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, 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 P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409 801-620-6922
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250 859-669-3592

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

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

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

Note: If the 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 6. Enter only one tax form number per request.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.



You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.

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.

**APPRAISAL CONTACT
INFORMATION**

This Appraisal Contact Information form will allow you to designate an individual for POSER INVESTMENTS, INC. or its authorized representative to contact in order to perform an interior appraisal of the property.

TO: POSER INVESTMENTS, INC.

Type of Loan: _____

Date: _____

Borrowers: _____

Property Address: _____

Name of Contact Person: _____

Phone Number: _____

Email Address: _____

If the contact person is a 3rd party, please complete the Authorization to Provide and Release Information (elsewhere in this packet) to allow us to contact them.