

Flagstar

Requirements from Borrower:

Mortgage Statement for all loans

3rd Party Authorization (attached)

2011 & 2010 tax return (Please include all schedules and W2)

2 most recent pay stubs

2 months most recent bank statements

Borrower financial information (attached-completed to its entirety)

Hardship Letter (attached)

Third Party authorization (attached)

4506T (attached)

(HOA info on Short Sale Information Summary attached)

Most current Utility Bill w/ a mailing address on it

Please forward them to

Gabriela Hanson

7065 Indiana Ave, Ste 200

Riverside, Ca 92506

Email to **gabby@shortsaleprocessor.org**

Fax to 951-346-0492 Attn: Gabby

Thank You for your cooperation

Gabriela Hanson

Short Sale Specialist

951-329-9119 office

951-488-8025 direct



Short Sale Information Summary

Property Address:	
Borrowers Name:	Last 4 social #:
Co-Borrowers Name:	Last 4 social #:
Mailing Address:	Home #
Borrower Mobile #:	Co-Borrower Mobile #:
Tenants (if any):	Tenants #:
1st Note:	
# months delinquent:	Loan #:
Notice of Default Filed: Y N	Date issued:
Notice of Trustee Sale filed: Y N	
2nd Note:	
# months delinquent:	Loan #:
Notice of Default Filed: Y N	Date issued:
Notice of Trustee Sale filed: Y N	
3rd Note:	
# months delinquent:	Loan #:
Notice of Default Filed: Y N	Date issued:
Notice of Trustee Sale filed: Y N	
Brief Reason for Default:	
HOA Info & phone #:	# months delinquent:
Property taxes : current // delinquent // impounded	Annual Tax:
Escrow Co.:	Escrow Contact:
Main #:	Fax #
	Email:
Title Company:	Title Rep:

THIRD PARTY AUTHORIZATION FORM

I hereby authorize _____ to discuss the account with the individual(s) that I have identified below as my designated agent(s) (hereinafter the "Designated Agent"). Further, _____ is hereby authorized to negotiate the terms of a work-out agreement with my Designated Agent and to deliver documents to my Designated Agent which concern my request for payment assistance and change of loan terms. I understand that I will be fully responsible for reviewing any information that is sent by _____ to my Designated Agent. This Authorization will remain effective until I specifically notify _____ in writing that this authorization is no further in force and effect.

**My Designated Agents Are: Keller Williams Realty
7065 Indiana Ave Ste 200, Riverside, CA 92506**

Gabriela Benitez-Hanson _____

951-329-9119 ext 304
_____ **Phone #**

Gabriel Gonzalez _____

951-329-9119 ext 304
_____ **Phone #**

_____ **Phone #**

Loan # _____

Last Four digits of SSN _____

Date: _____

_____ **Borrower**

Date: _____

_____ **Coborrower**

Explanation of Hardship

What changes or events have occurred since your loan originated that have caused you to fall behind?

Lined area for writing the explanation of hardship.

When did the change(s) and/or event(s) occur?

Lined area for writing the date of the change(s) and/or event(s).

Do you anticipate any improvement in your financial situation in the near future?

Y_____ N_____

Acknowledgement:

I (we) acknowledge that the financial information provided is an accurate statement of my (our) financial status.

By:_____ Date:_____

Signed Borrower

By:_____ Date:_____

Signed Co-Borrower

BORROWER FINANCIAL INFORMATION

LOAN NUMBER:			
BORROWER		CO-BORROWER	
BORROWER'S NAME		CO-BORROWER'S NAME	
SOCIAL SECURITY NUMBER	DATE OF BIRTH	SOCIAL SECURITY NUMBER	DATE OF BIRTH
HOME PHONE WITH AREA CODE	(BEST TIME TO CALL)	HOME PHONE WITH AREA CODE	(BEST TIME TO CALL)
WORK PHONE WITH AREA CODE	(BEST TIME TO CALL)	WORK PHONE WITH AREA CODE	(BEST TIME TO CALL)
CELL PHONE WITH AREA CODE	(BEST TIME TO CALL)	CELL PHONE WITH AREA CODE	(BEST TIME TO CALL)
MAILING ADDRESS			
PROPERTY ADDRESS (IF SAME AS MAILING ADDRESS, JUST WRITE SAME)			EMAIL ADDRESS
NUMBER OF CARS YOU OWN	NUMBER OF DEPENDENTS AT THIS ADDRESS	Do you occupy the property? YES { } NO { }	
Is it a rental property? YES { } NO { }	Is it leased? YES { } NO { } (If you have a lease agreement, please provide a copy.)		
Is your home listed for sale? YES { } NO { } (If yes, please provide a copy of the listing agreement.)			
AGENT'S NAME:		PHONE:	EMAIL:
How long has it been listed?	Any offers/inquiries? YES { } NO { }	LISTING SALES PRICE	
Have you contacted a credit-counseling agency for help? YES { } NO { }			
COUNSELOR'S NAME:		PHONE:	EMAIL:
Do you receive, and pay, the real estate tax bill on your home or does your lender? I DO { } LENDER DOES { } (If you pay, please provide a copy of your tax statement.)			
Are the taxes current? YES { } NO { }			
Do you pay for a hazard insurance policy? YES { } NO { } Is the policy current? YES { } NO { } (If you pay, please provide a copy of your hazard policy.)			
Have you filed for bankruptcy? YES { } NO { }			
IF YES, CHAPTER 7 { } CHAPTER 13 { }		FILING DATE:	
Has your bankruptcy been discharged? YES { } NO { } (If yes, please provide a copy of the discharge order signed by the court.)			
INVOLUNTARY INABILITY TO PAY			
I (We), _____, am/are requesting that Flagstar Bank review my/our financial situation to determine if I/we qualify for a workout option.			
I am having difficulty making my monthly payment because of financial difficulties created by <i>(Please check all that apply)</i> :			
{ } Abandonment of Property	{ } Excessive Obligations	{ } Military Service	
{ } Business Failure	{ } Fraud	{ } Payment Adjustment	
{ } Casualty Loss	{ } Illness in Family	{ } Payment Dispute	
{ } Curtailment of Income	{ } Illness of Mortgagor	{ } Property Problems	
{ } Death in Family	{ } Inability to Rent Property	{ } Title Problems	
{ } Death of Mortgagor	{ } Incarceration	{ } Transferring Property	
{ } Distant Employment Transfer	{ } Marital Difficulties	{ } Unemployment	
{ } Servicing Problem	{ } Inability to Sell	{ } Energy/Environment Costs	
{ } Other _____			
I believe that my situation is: { } Short term (under 6 months) { } Long term (over 6 months) { } Permanent			
I want to: { } Keep the property { } Sell the Property			

BORROWER FINANCIAL INFORMATION

LOAN NUMBER:				
EMPLOYMENT				
BORROWER-EMPLOYER'S ADDRESS/PHONE		HOW LONG?	CO-BORROWER-EMPLOYER'S ADDRESS/PHONE	
			HOW LONG?	
MONTHLY INCOME- BORROWER		MONTHLY INCOME- CO-BORROWER		
GROSS INCOME		GROSS INCOME		
NET INCOME		NET INCOME		
UNEMPLOYMENT INCOME		UNEMPLOYMENT INCOME		
CHILD SUPPORT/ALIMONY*		CHILD SUPPORT/ALIMONY*		
DISABILITY INCOME/SSI		DISABILITY INCOME/SSI		
RENTS RECEIVED		RENTS RECEIVED		
OTHER		OTHER		
LESS: FEDERAL & STATE SALES TAX, FICA		LESS: FEDERAL & STATE SALES TAX, FICA		
LESS: OTHER DEDUCTIONS (401K, ETC)		LESS: OTHER DEDUCTIONS (401K, ETC)		
COMMISSIONS, BONUS AND SELF-EMPLOYED INCOME		COMMISSIONS, BONUS AND SELF-EMPLOYED INCOME		
*Alimony, child support or separate maintenance income need not be revealed if the borrower or co-borrower does not choose to have it considered for repaying this loan.				
TOTAL		\$	TOTAL	
MONTHLY EXPENSES		ASSETS		
OTHER MORTGAGES/LIENS	\$	TYPE	ESTIMATED VALUE	
AUTO LOAN(S)	\$	CHECKING ACCOUNT(S)	\$	
CREDIT CARDS/INSTALLMENT LOANS	\$	SAVING/MONEY MARKET	\$	
HEALTH INSURANCE/MEDICAL	\$	STOCKS/BONDS/CDs	\$	
STUDENT LOANS	\$	IRA/KEOGH ACCOUNTS	\$	
CHILD CARE/SUPPORT/ALIMONY	\$	401K/ESPO ACCOUNTS	\$	
FOOD/SPENDING MONEY	\$	HOME	\$	
WATER/SEWER/UTILITIES/PHONE	\$	OTHER REAL ESTATE	\$	
HOA/CONDO FEES/PROPERTY MAINTENANCE	\$	CARS	\$	
AUTO EXPENSES	\$	BOATS	\$	
LIFE INSURANCE PAYMENT	\$	LIFE INSURANCE	\$	
ENTERTAINMENT/DISCRETIONARY	\$	OTHER	\$	
FLAGSTAR LOAN	\$			
CHARITABLE	\$			
TOTAL		\$	TOTAL	

BORROWER FINANCIAL INFORMATION

LOAN NUMBER: _____

Lien Holders

If there are additional Liens/Mortgages or Judgements on this property, please name the person(s), company or firm and their respective telephone numbers.

_____	\$ _____	_____ %	_____
Lien Holder's Name	Balance	Interest Rate	Phone Number (with area code)
_____	\$ _____	_____ %	_____
Lien Holder's Name	Balance	Interest Rate	Phone Number (with area code)

FINAL INSTRUCTIONS:

Before returning this Borrower Financial Information form to us, please complete the following:

1. Sign and date this Borrower Financial Information form.
2. Sign and date the hardship letter explaining the reason for your request.
3. Include proof of any household income with supporting documentation dated within 60 days of today's date for each borrower. For example: wages, unemployment, child support, alimony, Social Security, disability, etc.
4. Include proof of rental income, including the lease agreement and copies of last three months' cancelled rent checks.
5. Include the front and back copies of each borrower's driver's license.
6. Include last two monthly statements for all checking, savings, 401(k) accounts, etc.
7. Include last two years' W-2 forms and most recent income tax return, including all schedules.

Flagstar may, at its discretion, require that each borrower furnish additional information and/or documentation to substantiate his or her current financial status.

I (We) agree that the financial information provided in the Borrower Financial Information form is an accurate statement of my (our) financial status as of the date of my (our) signature(s) below. I (we) understand and acknowledge that any action taken by Flagstar Bank, Inc. or its successors or assigns, as the lender and/or servicer of my (our) mortgage loan, will be made in strict reliance on the information provided in this Borrower Financial Information form. My (Our) signature(s) below grants Flagstar Bank, Inc. or its successors or assigns, as the lender and/or servicer of my (our) mortgage loan, the authority to confirm the information I (we) have provided in this Borrower Financial Information form and attached hardship letter, to verify that it is accurate by ordering a credit report, to contact me (us) to discuss my (our) loan, and to contact my (our) Realtor and/or credit counseling service representative (if applicable).

The Borrower Financial Information form is part of Flagstar's debt collection process. All information obtained relating to this form will be used for that purpose.

By: _____
Borrower Printed Name

By: _____
Co-Borrower Printed Name

By: _____ Date: _____
Borrower Signature

By: _____ Date: _____
Co-Borrower Signature



Convenience You Can Count On

HARDSHIP LETTER

LOAN NUMBER:

Please provide a detailed explanation of the hardship in the space below.

By: _____
Borrower Printed Name

By: _____
Co-Borrower Printed Name

By: _____ Date: _____
Borrower Signature

By: _____ Date: _____
Co-Borrower Signature



Convenience You Can Count On

HARDSHIP LETTER

LOAN NUMBER:

Please provide a detailed explanation of the hardship in the space below.

By: _____
Borrower Printed Name

By: _____
Co-Borrower Printed Name

By: _____ Date: _____
Borrower Signature

By: _____ Date: _____
Co-Borrower Signature

Request for Transcript of Tax Return

OMB No. 1545-1872

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

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" 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.	

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 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 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 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days

b Account Transcript, which contains information on the financial status of the account, 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 30 calendar 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 30 calendar 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 2010, filed in 2011, will not be available from the IRS until 2012. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days

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

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

Check this box if you have notified the IRS or the IRS has notified you that one of the years for which you are requesting a transcript involved **identity theft** on your federal tax return

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, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** For transcripts being sent to a third party, this form must be received within 120 days of the signature date.

		Phone number of taxpayer on line 1a or 2a
▶ Signature (see instructions)	Date	
▶ Title (if line 1a above is a corporation, partnership, estate, or trust)		
▶ Spouse's signature	Date	

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

What's New

The IRS has created a page on IRS.gov for information about Form 4506-T at www.irs.gov/form4506. 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.

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.

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 "Order a Transcript" or call 1-800-908-9946.

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 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
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
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
	512-460-2272
	559-456-5876
	816-292-6102

Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to the "Internal Revenue Service" at:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409
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	RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250
	801-620-6922
	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 address on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address.

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.

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

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer.

Partnerships. Generally, Form 4506-T can be signed by any person who was a member of the partnership during any part of the tax period requested on line 9.

All others. See 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.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the letters testamentary authorizing an individual to act for an estate.

Privacy Act and Paperwork Reduction Act

Notice. We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. You are not required to request any transcript; if you do request a transcript, sections 6103 and 6109 and their regulations require you to provide this information, including your SSN or EIN. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, 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 Products Coordinating Committee
SE:W:CAR:MP:T:M:S
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.