Workout Review Documentation Checklist

Please use this checklist to help you compile the require documents to begin a workout review. These are absolute requirements for ALL parties currently on the note; any missing documents at the time of submission will increase the time necessary for Nationstar and (if applicable) the investor to come to a decision about assistance. Additional documentation may be required to clarify your financial and/or housing situation.

	Complete all of the following to provide a complete package
☐	**Uniform Borrower Assistance Form (710 and 710a)**
☐	**4506-T or 4506-TEZ (4506-T provided)**
☐	**All applicable income documentation:** _ If you are a **wage earner**: 2 paystubs with year-to-date earnings _ If you are **self-employed**: Most recent quarterly or year-to-date profit and loss statement _ If you are receiving **alimony or child support (optional)**: Divorce decree, separation agreement, or other legal agreement showing amount of monthly payment _ If you receive **fixed income**: Award letter and 2 most recent bank statements _ If you receive **unemployment**: Letters, exhibits, or benefits statement showing award amount and last 2 months of bank statements _ If you receive **rental income**: Schedule E from previous year's tax return, lease agreement, or other legal agreement showing amount of monthly payment
☐	**Typed, signed hardship letter detailing:** _ Reason for hardship including dates and amounts that income or expenses changed _ Intention with the property (ex. remain in the home, rent the home, sell the home, etc) _ Your plan to get current if we are unable to assist you. If you have no plan please explain why.
☐	**Tax Documentation** _ Copy of 2010 Tax Return, signed and dated (this is not required, providing it will expedite the review process) _ If you have an extension for 2010 taxes, copy of the extension letter and signed and dated copy of 2009 tax return (this is not required, providing it will expedite the review process)
☐	**Last two months of bank statements for all checking and savings accounts.**
☐	**Dodd-Frank Certification**
☐	**Documentation of Home Owners Association or Condo dues.**

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) information on the property's status; (3) real estate taxes; (4) homeowner's insurance premiums; (5) bankruptcy; (6) your credit counseling agency, and (7) information concerning other liens, If any, on your property.

On Page 2 you must disclose information about **all** 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 4506-T; (3) required income documentation, and (4) required hardship documentation.

Loan I.D. Number __________________________ (usually found on your monthly mortgage statement)

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

The property is currently: ☐ **My Primary Residence** ☐ **A Second Home** ☐ **An Investment Property**

The property is currently: ☐ **Owner Occupied** ☐ **Renter occupied** ☐ **Vacant**

BORROWER		**CO-BORROWER**	
BORROWER'S NAME		CO-BORROWER'S NAME	
SOCIAL SECURITY NUMBER	DATE OF BIRTH	SOCIAL SECURITY NUMBER	DATE OF BIRTH
HOME PHONE NUMBER WITH AREA CODE		HOME PHONE NUMBER WITH AREA CODE	
CELL OR WORK NUMBER WITH AREA CODE		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: ____

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 13 Filing Date: ______________________________
Has your bankruptcy been discharged? ☐ Yes ☐ No Bankruptcy case number: ____________________

UNIFORM BORROWER ASSISTANCE FORM

Monthly Household Income		Monthly Household Expenses/Debt		Household Assets (associated with the property and/or borrower(s)	
Monthly 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 (estimated value)	$
Unemployment Income	$	HOA/Condo Fees/Property Maintenance	$	Other ________________ ______________________	$
Food Stamps/Welfare	$	Mortgage Payments on other properties	$		$
Other ________________ ______________________	$	Other ________________ ______________________	$		$
Total (Gross income)	**$**	**Total Debt/Expenses**	**$**	**Total Assets**	**$**

Lien Holder's Name	Balance / Interest Rate	Loan Number

Required Income Documentation

☐ **Do you earn a wage?**
For each borrower who is a salaried employee or hourly wage earner, include the most recent pay stub that reflects at least 30 days of year-to-date earnings for each borrower.

☐ **Are you self-employed?**
For each borrower who receives self-employed income, include a complete, signed individual federal income tax return and, as applicable, the business tax return; AND either the most recent signed and dated quarterly or year-to-date profit/loss statement that reflects activity for the most recent three months; OR copies of bank statements for the business account for the last two months evidencing continuation of business activity

☐ **Do you have any additional sources of income?** Provide for each borrower as applicable:

"Other Earned Income" such as bonuses, commissions, housing allowance, tips, or overtime:
- ☐ Reliable third-party documentation describing the nature of the income (e.g., employment contract or printouts 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 receipt of payment, such as copies of the two most recent bank statements showing deposit amounts.

Rental income:
- ☐ Copy of the most recent filed federal tax return with all schedules, including Schedule E—Supplement Income and Loss. Rental income for qualifying purposes will be 75% of the gross rent reduced by the monthly debt service on the property, if applicable; or
- ☐ If rental income is not reported on Schedule E – Supplemental Income and Loss, provide a copy of the current lease agreement with either bank statements or cancelled rent checks demonstrating receipt of rent.

Investment income:
- ☐ Copies of the two most recent investment statements or bank statements supporting receipt of this income.

Alimony, child support, or separation maintenance payments as qualifying income:*
- ☐ Copy of divorce decree, separation agreement, or other written legal agreement filed with a court, or court decree that states the amount of the alimony, child support, or separation 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, or separate maintenance income need not be revealed if you do not choose to have it considered for repaying this loan.**

HARDSHIP AFFIDAVIT
(provide a written explanation with this request describing the specific nature your hardship)

I am requesting review of my current financial situation to determine whether I qualify for temporary or permanent mortgage 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 reasons set forth below:
(Please check all that apply and submit required documentation demonstrating your hardship)

If Your Hardship is:	Then the Required Hardship Documentation is:
❑ Unemployment	❑ No hardship documentation required
❑ Underemployment	❑ No hardship documentation required, as long as you have submitted the income documentation that supports the income described in the Required Income Documentation section above
❑ Income reduction (e.g., elimination of overtime, reduction in regular working hours, or a reduction in base pay)	❑ No hardship documentation required, as long as you have submitted the income documentation that supports the income described in the Required Income Documentation section above
❑ Divorce or legal separation; Separation of Borrowers unrelated by marriage, civil union or similar domestic partnership under applicable law	❑ Divorce decree signed by the court OR ❑ Separation agreement signed by the court OR ❑ Current credit report evidencing divorce, separation, or non-occupying borrower has a different address OR ❑ 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 the primary or secondary wage earner in the household	❑ Death certificate OR ❑ Obituary or newspaper article reporting the death
❑ Long-term or permanent disability; Serious illness of a borrower/co-borrower or dependent family member	❑ Doctor's certificate of illness or disability OR ❑ Medical bills OR ❑ Proof of monthly insurance benefits or government assistance (if applicable)
❑ Disaster (natural or man-made) adversely impacting the property or Borrower's place of employment	❑ Insurance claim OR ❑ Federal Emergency Management Agency grant or Small Business Administration loan OR ❑ Borrower or Employer property located in a federally declared disaster area
❑ Distant employment transfer	❑ No hardship documentation required
❑ 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 cessation of business activity; or • Most recent signed and dated quarterly or year-to-date profit and loss statement

Borrower/Co-Borrower Acknowledgement and Agreement

1. I certify that all of the information in this Borrower Assistance Form is truthful and the hardship(s) identified above has contributed to submission of this request for mortgage relief.
2. I understand and acknowledge that the Servicer, owner or guarantor of my mortgage, or their agent(s) may investigate the accuracy of my statements, may require me to provide additional supporting documentation, and that knowingly submitting false information may violate Federal and other applicable law.
3. I understand the Servicer will obtain a current credit report on all borrowers obligated on the Note.
4. I understand that 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. I certify that my property has not received a condemnation notice.
6. I certify that I am willing to provide all requested documents and to respond to all Servicer communications in a timely manner. I understand that time is of the essence.
7. I understand that the Servicer will use this information to evaluate my eligibility for available relief options and foreclosure alternatives, but 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.
8. If I am eligible for a trial period plan, repayment plan, or forbearance plan, and I accept and agree to all terms of such plan, I also agree that the terms of this Acknowledgment and Agreement are incorporated into such plan by reference as if set forth in such plan in full. My first timely payment following my servicer's determination and notification of my eligibility or prequalification for a trial period plan, repayment plan, or forbearance plan (when applicable) will serve as acceptance of the terms set forth in the notice sent to me that sets forth the terms and conditions of the trial period plan, repayment plan, or forbearance plan.
9. I agree that when the Servicer accepts and posts a payment during the term of any repayment plan, trial period plan, or forbearance plan it will be without prejudice to, and will not be deemed a waiver of, the acceleration of my loan or foreclosure action and related activities and shall not constitute a cure of my default under my loan unless such payments are sufficient to completely cure my entire default under my loan.
10. I agree that any prior waiver as to my payment of escrow items to Servicer in connection with my loan has been revoked.
11. If I qualify for and enter into a repayment plan, forbearance plan, and trial period plan, I agree to the establishment of an escrow account and the payment of escrow items if an escrow account never existed on my loan.
12. I understand that Servicer will collect and record personal information that I submit in this Borrower Response Package and during the evaluation process, including, but not limited to, my name, address, telephone number, social security number, credit score, income, payment history, and information about my account balances and activity. I understand and consent to the Servicer's disclosure of my personal information and the terms of any relief or foreclosure alternative that I receive to any investor, insurer, guarantor, or servicer that owns, insures, guarantees, or services my first lien or subordinate lien (if applicable) mortgage loan(s) or to any HUD-certified housing counselor.
13. If I am eligible for foreclosure prevention relief under the federal Making Home Affordable Program, I understand and consent to the disclosure of my personal information and the terms of any Making Home Affordable Agreement by the servicer to (a) the U.S. Department of the Treasury, (b) Fannie Mae and Freddie Mac in connection with their responsibilities under the Homeowner Affordability and Stability Plan, and (c) companies that perform support services in conjunction with Making Home Affordable.
14. I consent to being contacted concerning this request for mortgage assistance at any cellular or mobile telephone number I have provided to the Lender. This includes text messages and telephone calls to my cellular or mobile telephone.

______________________ __________	__________	___________________________	__________
Borrower Signature	Date	Co-Borrower Signature	Date

Home Affordable Modification Program
Government Monitoring Data Form

Information for Government Monitoring Purposes

The following information is requested by the federal government in order to monitor compliance with federal statutes that prohibit discrimination in housing. **You are not required to furnish this information, but are encouraged to do so. The law provides that a lender or servicer may not discriminate either on the basis of this information, or on whether you choose to furnish it.** If you furnish the information, please provide both ethnicity and race. For race, you may check more than one designation. If you do not furnish ethnicity, race, or sex, the lender or servicer is required to note the information on the basis of visual observation or surname if you have made this request for a loan modification in person. If you do not wish to furnish the information, please check the box below.

BORROWER	CO-BORROWER
☐ I do not wish to furnish this information	☐ I do not wish to furnish this information
Ethnicity: ☐ Hispanic or Latino ☐ Not Hispanic or Latino	***Ethnicity:*** ☐ Hispanic or Latino ☐ Not Hispanic or Latino
Race: ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White	***Race:*** ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American ☐ Native Hawaiian or Other Pacific Islander ☐ White
Sex: ☐ Female ☐ Male	***Sex:*** ☐ Female ☐ Male

To be completed by Servicers		*Name/Address of Interviewer's Employer*
This request was taken by: ☐ Face-to-face interview ☐ Mail ☐ Telephone ☐ Internet	*Servicer/Interviewer's Name (print or type) & ID Number* *Servicer/Interviewer's Signature* *Servicer/Interviewer's Phone Number(include area code)*	
Loan Number: ___________	*Servicer/Interviewer's Fax Number(include area code)*	*Servicer/Interviewer's email address*

Form **4506-T**

(Rev. January 2010)

Department of the Treasury
Internal Revenue Service

Request for Transcript of Tax Return

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

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 also call 1-800-829-1040 to order a transcript. 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 or employer identification number (see instructions)

2a If a joint return, enter spouse's name shown on tax return.

2b Second social security number if joint tax return

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

4 Previous address shown on the last return filed if different from line 3

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. The IRS has no control over what the third party does with the tax information.

Nationstar Mortgage LLC
350 Highland Dr, Lewisville TX 75067

Caution. *If the transcript is being mailed to a third party, ensure that you have filled in line 6 and line 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy.*

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. ▶ 1040

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 is a combination of line item information and later adjustments to the account. 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 2007, filed in 2008, will not be available from the IRS until 2009. 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.

12/31/2010   12/31/2009   ____   ____

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 signature date.*

Telephone number of taxpayer on line 1a or 2a

Sign Here

Signature (see instructions)   Date

Title (if line 1a above is a corporation, partnership, estate, or trust)

Spouse's signature   Date

General Instructions

Purpose of form. Use Form 4506-T to request tax return information. You can also designate a third party to receive the information. See line 5.

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 RAIVS teams, send your request to the team based on the address of your most recent return.

Automated transcript request. You can call 1-800-829-1040 to order a transcript through the automated self-help system. Follow prompts for "questions about your tax account" to order a tax return transcript.

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

If you filed an individual return and lived in:	Mail or fax to the "Internal Revenue Service" at:
Florida, Georgia, North Carolina, South Carolina	RAIVS Team P.O. Box 47-421 Stop 91 Doraville, GA 30362 770-455-2335
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team Stop 6716 AUSC Austin, TX 73301 512-460-2272
Alaska, Arizona, 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 559-456-5876
Arkansas, Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, Ohio, Pennsylvania, Rhode Island, Vermont, Virginia, West Virginia	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 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, Tennessee, 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 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, Vermont, Virginia, West Virginia, Wisconsin	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) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

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.

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 Internal Revenue Code 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, and the District of Columbia 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 the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 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.

Dodd-Frank Certification

The following information is requested by the federal government in accordance with the Dodd-Frank Wall Street Reform and Consumer Protection Act (Pub. L. 111-203). **You are required to furnish this information.** The law provides that no person shall be eligible to receive assistance from the Making Home Affordable Program, authorized under the Emergency Economic Stabilization Act of 2008 (12 U.S.C. 5201 *et seq.*), or any other mortgage assistance program authorized or funded by that Act, if such person, in connection with a mortgage or real estate transaction, has been convicted, within the last 10 years, of any one of the following: (A) felony larceny, theft, fraud or forgery, (B) money laundering or (C) tax evasion.

Borrower	Co-Borrower
☐ I have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real estate transaction: **(a)** felony larceny, theft, fraud or forgery, **(b)** money laundering or **(c)** tax evasion	☐ I have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real estate transaction: **(a)** felony larceny, theft, fraud or forgery, **(b)** money laundering or **(c)** tax evasion

In making this certification, I/we certify under penalty of perjury that all of the information in this document is truthful and that I/we understand that the Servicer, the U.S. Department of the Treasury, or their agents may investigate the accuracy of my statements by performing routine background checks, including automated searches of federal, state and county databases, to confirm that I/we have not been convicted of such crimes. I/we also understand that knowingly submitting false information may violate Federal law.

______________________________ ____________
Borrower Signature Date

______________________________ ____________
Co-Borrower Signature Date

Payment Worksheet

Nationstar MORTGAGE

Financial Overview

Borrower	
Address	
City, State, Zip	
Home Phone	
Work Phone	
Cell Phone	
# in Household	
Length of Ownership	____ yrs ____months
Co-Borrower	
Address	
City, State, Zip	
Home Phone	
Work Phone	
Cell Phone	
# in Household	
Length of Ownership	____ yrs ____months

Property Information		
Loan #		
Property for Sale	☐ yes ☐ no	
Listing Date/Price		
Realtor Name		
Realtor Phone		
Assets	**Amount Owed**	**Value**
Home	$	$
Real Estate (Other)	$	$
Checking		$
Savings		$
Investments		$
Retirement		$
Auto 1 Model ________	Year ________	$
Auto 2 Model ________	Year ________	$
Auto 3 Model ________	Year ________	$

Income Overview

Employer	Gross Monthly Wage
	$
	$
	$
Additional Income* - alimony/child support/etc.	**Monthly Amount**
	$
	$

* Additional income does not need to be reviewed if you do not choose to have it considered for approval of a payment workout.

Expense Overview

Monthly Expense	Monthly $ Amount
Mortgage	$
2nd Mortgage	$
Auto Payment(s) # _____	$
Auto Insurance	$
Auto Maintenance/Fuel	$
Credit Card Payments	$
Installment Loan Payments	$
Child Support/Alimony	$
Day Care/Child Care/Tuition	$
Food	$
Utilities	$
Telephone	$
Cable	$
Medical	$
Home/Condo Association Dues	$
Spending Money	$
Other Misc Expenses	$

Description of Hardship

Please answer the following questions to help us better understand your current situation:

What caused you fall behind on your payments?

____

____

____

Can you make a down payment toward a resolution plan?

☐ yes ☐ no If yes, how much? __________________

How and when will your situation change in the future?

____

____

____

Best time to contact: ____________ ☐ am ☐ pm

Preferred method of contact: ☐ phone ☐ email

Email address: ____________________________________

I agree that the financial information provided is an accurate statement of my financial status and by signing, I authorize the mortgage servicer to order a credit repot, verify any employment, bank account or assets and release any information concerning the above.

Please sign and date (required):

Borrower signature ______________________________ __/__/__

Co-Borrower signature ___________________________ __/__/__