



SunTrust Bank  
1001 Semmes Avenue  
Richmond, Virginia 23224  
Tel 800.443.1032

# Submission Avenues

## **Fax:**

You may fax all documents to 877-589-0758. A fax cover sheet with directions has been included for your use.

## **Mail:**

You may mail all documents to:

SunTrust Bank  
VA-RVW-5113  
PO Box 26150  
Richmond, VA 23260

## **Email:**

You may email all documents to [Homepreservationdocuments@SunTrust.com](mailto:Homepreservationdocuments@SunTrust.com). Please include your loan number in the Subject line.

- Please ensure that all documents are in a PDF format.
- Please do not send more than 8 attachments in each submission. If you have additional documents, please send in a separate email.
- If you are submitting documents for more than one loan, please send a separate transmission for each loan.

## **IMPORTANT NOTES**

- Please do the following to facilitate the prompt and accurate imaging of your documents:
- Include your FULL name, applicable 10 digit loan numbers and date at the top of this form.
- Ensure each document includes a valid mortgage loan number. If multiple documents for the same loan are being submitted, include the loan number at the top of the each page.
- Please refer to the Homeowner Checklist and the Mortgage Assistance Application Form 710 to ensure that all required information is being submitted.



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1001 Semmes Avenue  
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# Loss Mitigation Fax Coversheet

Please fax all documents to: **877-589-0758**

Date: \_\_\_\_\_

Client's Full Name: \_\_\_\_\_

Loan #: \_\_\_\_\_

- All loan numbers must be ten (10) digits.

Additional Loan #'s: \_\_\_\_\_

Property Address: \_\_\_\_\_

- Please only include loan numbers that you wish to have considered for Loss Mitigation options
- Please submit a separate cover sheet for additional property addresses.

**Comments:**

## **IMPORTANT NOTES**

- Please do the following to facilitate the prompt and accurate imaging of your documents:
- Include your FULL name, applicable 10 digit loan numbers and date at the top of this form.
- Ensure each document includes a valid mortgage loan number. If multiple documents for the same loan are being submitted, include the loan number at the top of the each page.
- Please refer to the Homeowner Checklist and the Mortgage Assistance Application Form 710 to ensure that all required information is being submitted.

**Homeowner Checklist**  
**For Your Information Only - Do Not Return with Your Borrower Response Package**

**GET STARTED** - Use this checklist to ensure you have completed all required forms and have the right information.

**Step 1** ☐ **Review the information provided** to help you understand your options, responsibilities, and next steps:

- ☐ Avoiding Foreclosure      ☐ Frequently Asked Questions      ☐ Beware of Foreclosure Rescue Scams

**Step 2** ☐ **Complete and sign the enclosed Borrower Assistance Form.** Must be signed by all borrowers on the mortgage (notarization is not required) and must include:

- ☐ All income, expenses and assets for each borrower  
☐ An explanation of financial hardship that makes it difficult to pay the mortgage  
☐ Your acknowledgment and agreement that all information that you provide is true and accurate

**Step 3** ☐ **Complete and sign a dated copy of the enclosed IRS Form 4506C:**

- ☐ For each borrower, please submit a signed dated copy of IRS Form 4506C (Request for Transcript of Tax Return)  
☐ Borrowers who filed their tax returns jointly may send in one IRS Form 4506C signed and dated by both joint filers

**Step 4** ☐ **Provide required Hardship documentation. This documentation will be used to verify your hardship.**

- ☐ Follow the instructions set forth on the Borrower Assistance Form (attached)

**Step 5** ☐ **Provide required income documentation.** This documentation will be used to verify your hardship and all of your income (including any alimony or child support that you choose to disclose and rely upon to qualify).

- ☐ Follow the instructions set forth on the Borrower Assistance Form (attached)  
☐ You may also disclose any income from a household member who is not on the promissory note (non-borrower), such as a relative, spouse, domestic partner, or fiancé who occupies the property as a primary residence. If you elect to disclose and rely upon this income to qualify, the required income documentation is the same as the income documentation required for a borrower. See page 2 of the Borrower Assistance Form for specific details on income documentation

**Step 6** ☐ **Gather and send your completed Borrower Response Package at your earliest possible opportunity.**

- ☐ **For Home Retention Requests**, you must send all required documentation listed in steps 2-5 above, and summarize below:
- Mortgage Assistance Application Form (attached)
  - Form 4506C (attached)
  - Income Documentation as outlined on page 4 of the Mortgage Assistance Application Form (attached)
  - Hardship Documentation as outlined on page 2 of the Mortgage Assistance Application Form (attached)
  - Additional Information Pertaining to Household and Living Expenses (attached)
  - Authorization Form for Non-Borrowers (if applicable)
  - 2 most recent bank statements
- ☐ **For Home Liquidation Requests** you must send all required documentation as outlined above **Plus:**
- Sales contract (if applicable)
  - Estimated HUD-1 (if applicable)
  - Affidavit of ARM's Length Transaction signed by all parties (if applicable)
  - 3<sup>rd</sup> Party Authorization Form (if applicable)

Please fax all documents to 877.589.0758, or you may mail them to SunTrust Mortgage Inc., VA-RVW-5113, PO BOX 26150, Richmond, VA 23260, or email them to: [homepreservationdocuments@suntrust.com](mailto:homepreservationdocuments@suntrust.com). Please include your loan number in the subject line as well as at the top of each page. Please do not email more than eight (8) attachments per submission. If you have additional attachments, please send a supplemental email.

**IMPORTANT REMINDERS:**

- ☐ If you cannot provide the documentation within the time frame provided, have other types of income not specified on Page 2 of the Borrower Assistance Form, cannot locate some or all of the required documents, OR have any questions, please contact us at the number provided on Page 2.
- ☐ Keep a copy of all documents and proof of mailing/emailing for your records. **Don't send original income or hardship documents. Copies are acceptable.**

**Questions? Contact us at 855.223.4680**

## Information on Avoiding Foreclosure

### Learn more About Options to Avoid Foreclosure

The variety of options summarized below may help you keep your home. For example, you may be eligible to modify your mortgage, lowering your monthly payment to make it more affordable. Contact us to determine if you qualify.

Depending on your circumstances, staying in your home may not be possible. In this case, a short sale or deed-in-lieu of foreclosure may be a better choice than foreclosure - see the table below for more information.

Don't delay, as failure to take action may result in foreclosure proceedings being initiated on your mortgage.

OPTIONS TO STAY IN YOUR HOME		
	OVERVIEW	BENEFIT
<b>Reinstatement</b>	Pay the total amount you owe, in a lump sum payment and by a specific date. This may follow a forbearance plan as described below.	Allows you to avoid foreclosure by bringing your mortgage current if you can show you have funds that will become available at a specific date in the future.
<b>Repayment Plan</b>	Pay back your past-due payments together with your regular payments over an extended period of time.	Allows you time to catch up on late payments without having to come up with a lump sum.
<b>Forbearance Plan</b>	Make reduced mortgage payments or no mortgage payments for a specific period of time.	Gives you time to improve your financial situation and possibly qualify for a better option that would be available right now.
<b>Modification</b>	Receive modified mortgage terms to make it more affordable or manageable after successfully making payments during a "trial period" (e.g., completing a three month trial period plan) that requires payment of the approximate amount of the modified	Permanently modifies your mortgage so that your payments or terms are more manageable as a permanent solution to a long-term or permanent hardship.
OPTIONS TO LEAVE YOUR HOME		
	OVERVIEW	BENEFIT
<b>Short Sale</b>	Sell your home and pay off a portion of your mortgage balance when you owe more on the home than it is worth.	Allows you to transition out of your home without going through foreclosure. In some cases, relocation assistance may be available.
<b>Deed-in-Lieu of Foreclosure</b>	Transfer the ownership of your property to us.	Allows you to transition out of your home without going through foreclosure. In some cases, relocation assistance may be available.

## **We Want to Help**

Take action to gain peace of mind and control of your housing situation. Call us at 855.223.4680 and we'll talk about available options and help you understand the forms and documents we need from you to determine if you qualify for an option to avoid foreclosure.

## **Frequently Asked Questions**

### **1. Will It Cost Money to Get Help?**

There should never be a fee from your lender or qualified counselor to obtain assistance or information about foreclosure prevention options. However, foreclosure prevention has become a target for scam artists. Be wary of companies or individuals offering to help you for a fee, and never send a mortgage payment to any company other than the one listed on your monthly mortgage statement or one designated to receive your payments under a state assistance program.

### **2. What is foreclosure?**

Forfeiture of your home through a legal process where your mortgage company repossesses the property and you will have to move. This process may involve an eviction, you may remain liable for your first lien mortgage debt and it may be as long as seven years before you are eligible for another Fannie Mae or Freddie Mac loan.

### **3. What Happens Once I Have Sent the Borrower Response Package to You?**

We will contact you within three business days of our receipt of your Borrower Response Package to confirm that we have received your package and will review it to determine whether it is complete. Within five business days of receipt of your request, we will send you a notice of incompleteness in the event there is any missing information or documentation that you must still submit. Once your application is considered complete by SunTrust, collection activities will stop while your application is being evaluated. If your request for assistance requires a property valuation, a copy of the valuation will be provided to you. We will then review your application to determine whether you are eligible for any loss mitigation options. The review will be completed within 30 days of a complete package notification and you will be notified of the decision.

### **4. What Happens to My Mortgage While You Are Evaluating My Borrower Response Package?**

You remain obligated to make all mortgage payments as they come due, even while we are evaluating the types of assistance that may be available.

### **5. Will the Foreclosure Process Begin If I Do Not Respond to My Lender's Notices Regarding Missed Payments?**

If you do not respond to your lender's notices to you regarding past due payments, your lender may refer your loan to foreclosure in accordance with your mortgage loan documents and applicable law.

### **6. Should I Still Contact My Lender if I Have Waited Too Long and My Property Has Been Referred to an Attorney for Foreclosure?**

Yes, the sooner the better!

### **7. What if My Property is Scheduled for a Foreclosure Sale in the Future?**

If your complete application and documents required for a Borrowers Response Package are received no later than 37 days prior to a scheduled foreclosure sale, then certain foreclosure activities may be suspended until all acceptance periods and any applicable appeal period for any loss mitigation option expire. If we receive your application 37 days or less before a scheduled sale, foreclosure proceedings may continue, depending upon the laws of your state. For all loss mitigation options, any foreclosure sale postponement or suspension will occur as permitted by state law, local court rules and public officials. **Please submit your Borrower Response Package as soon as possible.**

**8. Will My Property be Sold at a Foreclosure Sale If I Accept a Foreclosure Alternative?**

No. The property will not be sold at a foreclosure sale if you accept an offer for an alternative to foreclosure and comply with all requirements.

**9. Will My Credit Score Be Affected by My Late Payments or Being in Default?**

The delinquency status of your loan will be reported to credit reporting agencies as well as your entry into a Repayment Plan, Forbearance Plan, or Trial Period Plan in accordance with the requirements of the Fair Credit Reporting Act and the Consumer Data Industry Association requirements.

**10. Will My Credit Score Be Affected if I Accept a Foreclosure Prevention Option?**

While the effect on your credit will depend on your individual credit history, credit scoring companies generally would consider entering into a plan with reduced payments as increasing your credit risk. As a result, entering into a plan with reduced payments may adversely affect your credit score, particularly if you are current on your mortgage or otherwise have a good credit score.

## Beware Of Foreclosure Rescue Scams!

Scam artists have stolen millions of dollars from distressed homeowners by promising immediate relief from foreclosure, or demanding cash for counseling services when HUD-approved counseling agencies provide the same services for FREE. If you receive an offer, information or advice that sounds too good to be true, it probably is. Don't let them take advantage of you, your situation, your house or your money. **Remember, help is FREE.**

**How to Spot a Scam** - beware of a company or person who:

- Asks for a fee in advance to work with your lender to modify, refinance or reinstate your mortgage.
- Guarantees they can stop a foreclosure or get your loan modified.
- Advises you to stop paying your mortgage company and pay them instead.
- Pressures you to sign over the deed to your home or sign any paperwork that you haven't had a chance to read, and you don't fully understand.
- Claims to offer "government-approved" or "official government" loan modifications.
- Asks you to release personal financial information online or over the phone and you have not been working with this person and/or do not know them.

**How to Report a Scam** - do one of the following:

- Go to [www.preventloanscams.org](http://www.preventloanscams.org) and fill out the Loan Modification Scam Prevention Network's (LMSPN) complaint form online and get more information on how to fight back. Note: you can also fill out this form and send to the fax number/e-mail/address (your choice!) on the back of the form.
- Call 888.995.HOPE (4673) and tell the counselor about your situation and that you believe you got scammed or know of a scam.

Loan number: \_\_\_\_\_

## Mortgage Assistance Application

If you are having mortgage payment challenges, please complete and submit this application, along with the required documentation, to Truist Bank via mail: Mail Code: RVW-5113, P. O. Box 26150, Richmond, VA 23224 fax: 877-589-0758, or online: [homepreservationdocuments@suntrust.com](mailto:homepreservationdocuments@suntrust.com). We will contact you within five business days to acknowledge receipt and let you know if you need to send additional information or documents.

We will use the information you provide to help us identify the assistance you may be eligible to receive. If you need help completing this application, please contact Truist Bank at 855-223-4680

For a list of HUD-approved housing counseling agencies that can provide foreclosure prevention information, contact one of the following federal government agencies:

- The U.S. Department of Housing and Urban Development (HUD) at (800) 569-4287 or [www.hud.gov/counseling](http://www.hud.gov/counseling)
- The Consumer Financial Protection Bureau (CFPB) at (855) 411-2372 or [www.consumerfinance.gov/mortgagehelp](http://www.consumerfinance.gov/mortgagehelp)

If you need assistance with translation or other language assistance, HUD-approved housing counseling agencies may be able to assist you. These services are provided without charge.

## Borrower Information

**Borrower's name:** \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Primary phone number: \_\_\_\_\_ ☐ Cell ☐ Home ☐ Work ☐ Other

Alternate phone number: \_\_\_\_\_ ☐ Cell ☐ Home ☐ Work ☐ Other

**Co-borrower's name:** \_\_\_\_\_ Are you married to the Borrower? ☐ Yes ☐ No

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Primary phone number: \_\_\_\_\_ ☐ Cell ☐ Home ☐ Work ☐ Other

Alternate phone number: \_\_\_\_\_ ☐ Cell ☐ Home ☐ Work ☐ Other

Preferred contact method (choose all that apply): ☐ Cell phone ☐ Home phone ☐ Work phone ☐ Email ☐ Text—checking this box indicates your consent for text messaging

Is either borrower on active duty with the military (including the National Guard and Reserves), the dependent of a borrower on active duty, or the surviving spouse of a member of the military who was on active duty at the time of death? ☐ Yes ☐ No

## Property Information

Property Address: \_\_\_\_\_

Mailing address (if different from property address): \_\_\_\_\_

- The property is currently: ☐ A primary residence ☐ A second home ☐ An investment property
- The property is (select all that apply): ☐ Owner occupied ☐ Renter occupied ☐ Vacant ☐ Condemned and/or notice received
- I want to: ☐ Keep the property ☐ Sell the property ☐ Transfer ownership of the property to my servicer ☐ Undecided

Is the property listed for sale? ☐ Yes ☐ No – If yes, provide the listing agent's name and phone number—or indicate "for sale by owner" if applicable: \_\_\_\_\_

Is the property subject to condominium or homeowners' association (HOA) fees? ☐ Yes ☐ No – If yes, indicate monthly dues: \$ \_\_\_\_\_

## Hardship Information

The hardship causing mortgage payment challenges began on approximately (date)\_\_\_\_\_ and is believed to be:

- ☐ Short-term (up to 6 months)
- ☐ Long-term or permanent (greater than 6 months)
- ☐ Resolved as of (date) \_\_\_\_\_

TYPE OF HARDSHIP (CHECK ALL THAT APPLY)	REQUIRED HARDSHIP DOCUMENTATION
<input type="checkbox"/> Unemployment	<ul style="list-style-type: none"> <li>Not required</li> </ul>
<input type="checkbox"/> Reduction in income: a hardship that 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)	<ul style="list-style-type: none"> <li>Not required</li> </ul>
<input type="checkbox"/> Increase in housing-related expenses: a hardship that has caused an increase in your housing expenses due to circumstances outside your control (e.g., uninsured losses, increased property taxes, HOA special assessment)	<ul style="list-style-type: none"> <li>Not required</li> </ul>
<input type="checkbox"/> Disaster (natural or man-made) impacting the property or borrower's place of employment	<ul style="list-style-type: none"> <li>Not required</li> </ul>
<input type="checkbox"/> Long-term or permanent disability, or serious illness of a borrower/co-borrower or dependent family member	<ul style="list-style-type: none"> <li>Written statement from the borrower, or other documentation verifying disability or illness</li> <li><b>Note:</b> Detailed medical information is not required, and information from a medical provider is not required</li> </ul>
<input type="checkbox"/> Divorce or legal separation	<ul style="list-style-type: none"> <li>Final divorce decree or final separation agreement <b>OR</b></li> <li>Recorded quitclaim deed</li> </ul>
<input type="checkbox"/> Separation of borrowers unrelated by marriage, civil union, or similar domestic partnership under applicable law	<ul style="list-style-type: none"> <li>Recorded quitclaim deed <b>OR</b></li> <li>Legally binding agreement evidencing that the non-occupying borrower or co-borrower has relinquished all rights to the property</li> </ul>
<input type="checkbox"/> Death of borrower or death of either the primary or secondary wage earner	<ul style="list-style-type: none"> <li>Death certificate <b>OR</b></li> <li>Obituary or newspaper article reporting the death</li> </ul>
<input type="checkbox"/> Distant employment transfer/relocation	<ul style="list-style-type: none"> <li><b>For active duty service members:</b> Permanent Change of Station (PCS) orders or letter showing transfer.</li> <li><b>For employment transfers/new employment:</b> Copy of signed offer letter or notice from employer showing transfer to a new location or written explanation if employer documentation not applicable, <b>AND</b></li> <li>Documentation that reflects the amount of any relocation assistance provided (not required for those with PCS orders)</li> </ul>
<input type="checkbox"/> Other – hardship that is not covered above:	<ul style="list-style-type: none"> <li>Written explanation describing the details of the hardship and any relevant documentation</li> </ul>



## Current Borrower Assets

Exclude retirement funds such as a 401(k) or Individual Retirement Account (IRA), and college savings accounts such as a 529 plan.

Checking account(s) and cash on hand	\$
Savings, money market funds, and Certificates of Deposit (CDs)	\$
Stocks and bonds (non-retirement accounts)	\$
Other:	\$

## Borrower Income

BORROWER			COBORROWER	
	PRIMARY JOB	SECONDARY JOB	PRIMARY JOB	SECONDARY JOB
Name of Employer				
Start Date of Employment				
Frequency of Pay	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other
If you are paid less than 12 months out of the year, how many months are you paid?	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11
If you receive a bonus, commission or reward, how often is it received?	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other
Will the bonus, commission or rewards continue?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

MONTHLY TOTAL BORROWER INCOME TYPE & AMOUNT		REQUIRED INCOME DOCUMENTATION
Gross (pre-tax) wages, salaries and overtime pay, commissions, tips, and bonuses	\$	<ul style="list-style-type: none"> <li>Thirty days of pay stubs and documentation of year-to-date earnings if not on pay stub <b>AND</b></li> <li>Two most recent bank statements showing income deposit amounts</li> </ul>
Self-employment income	\$	<ul style="list-style-type: none"> <li>Personal federal tax returns completed and signed by each Borrower/Co-Borrower. Include all schedules <b>AND</b></li> <li>Two most recent years of your Business federal tax return, including K-1, if applicable, completed and signed by Borrower or Co-Borrower. Include all schedules <b>AND</b></li> <li>The most recent signed and dated year-to-date Profit and Loss statement that reflects activity for the most recent twelve months <b>OR</b></li> <li>Two most recent bank statements for the business account—include all pages (front and back) even blank pages</li> </ul>
Unemployment benefit income	\$	<ul style="list-style-type: none"> <li>No documentation required</li> </ul>
Taxable Social Security, pension, disability, death benefits, adoption assistance, housing allowance, and other public assistance	\$	<ul style="list-style-type: none"> <li>Award letters or other documentation showing the amount and frequency of the benefits <b>AND</b></li> <li>Most recent complete and signed individual federal income tax return <b>AND</b></li> <li>Two most recent bank statements showing deposit amounts or other documentation showing receipt of payment</li> </ul>
Non-taxable Social Security or disability income	\$	<ul style="list-style-type: none"> <li>Award letters or other documentation showing the amount and frequency of the benefits <b>AND</b></li> <li>Most recent complete and signed individual federal income tax return <b>AND</b></li> <li>Two most recent bank statements showing deposit amounts or other documentation showing receipt of payment</li> </ul>
Rental income (rents received, less expenses other than mortgage expense)	\$	<ul style="list-style-type: none"> <li>Two most recent bank statements demonstrating receipt of rent <b>AND</b></li> <li>Current lease agreement</li> </ul>
Investment or insurance income	\$	<ul style="list-style-type: none"> <li>Two most recent investment statements <b>AND</b></li> <li>Two most recent bank statements supporting receipt of the income</li> </ul>
Other sources of income not listed above (Note: Only include alimony, child support, or separate maintenance income if you choose to have it considered for repaying this loan)	\$	<ul style="list-style-type: none"> <li>Two most recent bank statements showing receipt of income <b>AND</b></li> <li>Other documentation showing the amount and frequency of the income</li> </ul>

## Borrower Certification 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.
2. 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 required documents, including any additional supporting documentation as requested, 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. When applying for loss mitigation assistance, certain costs may be charged to facilitate the review process, including appraisals, property inspections and valuation.
7. Charges associated with the servicing of my loan may be billed in the form of corporate advance and will appear on my periodic billing statement.
8. If during the servicer's review it is found that I have received a HAMP modification on this or any other property, I agree to the cancellation of any approved HAMP trial or final modification and understand I will be reviewed for non HAMP modification options.
9. 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 waiver is revoked.
10. . The servicer or authorized third party\* will obtain a current credit report on all borrowers obligated on the Note.
11. 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.
12. I consent to being contacted concerning this application 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. \* I understand that by providing my phone number, I consent to Truist Bank (SunTrust now Truist), its affiliates, agents, and assignees of any of those contacting me at this number by calling, texting, or sending other electronic messages, from time to time, for any reason about my accounts with Truist Bank and its affiliates, including but not limited to, for collection and payment purposes, even if I have submitted a request to cease collection calls. I agree that automated dialing equipment or prerecorded voice messages may be used for any of these purposes.
13. Borrower understands, acknowledges, and agrees that the Lender and Other Loan Participants can obtain, use and share Borrower's tax return information for purposes of (i) providing an offer; (ii) originating, maintaining, managing, monitoring, servicing, selling, insuring, and securitizing a loan; (iii) marketing; or (iv) as otherwise permitted by applicable laws, including state and federal privacy and data security laws. The Lender includes the Lender's affiliates, agents, service providers and any of aforementioned parties' successors and assigns. The Other Loan Participants includes any actual or

potential owners of a loan resulting from your loan application, or acquirers of any beneficial or other interest in the loan, any mortgage insurer, guarantor, any servicers or service providers for these parties and any of aforementioned parties' successors and assigns.

---

Borrower Signature

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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.

## Home Affordable Modification Program Hardship Affidavit

Borrower Name (first, middle, last): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Co-Borrower Name (first, middle, last): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Property Street Address: \_\_\_\_\_  
Property City, ST, Zip: \_\_\_\_\_  
Servicer: \_\_\_\_\_  
Loan Number: \_\_\_\_\_

In order to qualify for \_\_\_\_\_'s ("Servicer") offer to enter into an agreement to modify my loan under the federal government's Home Affordable Modification Program (the "Agreement"), I/we am/are submitting this form to the Servicer and indicating by my/our checkmarks ("✓") the one or more events that contribute to my/our difficulty making payments on my/our mortgage loan.

Borrower		Co-Borrower	
Yes	No	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

My income has been reduced or lost. For example: unemployment, underemployment, reduced job hours, reduced pay, or a decline in self-employed business earnings. I have provided details below under "Explanation."

Yes	No	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

My household financial circumstances have changed. For example: death in family, serious or chronic illness, permanent or short-term disability, increased family responsibilities (adoption or birth of a child, taking care of elderly relatives or other family members). I have provided details below under "Explanation."

Yes	No	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

My expenses have increased. For example: monthly mortgage payment has increased or will increase, high medical and health-care costs, uninsured losses (such as those due to fires or natural disasters), unexpectedly high utility bills, increased real property taxes. I have provided details below under "Explanation."

Yes	No	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

My cash reserves are insufficient to maintain the payment on my mortgage loan and cover basic living expenses at the same time. Cash reserves include assets such as cash, savings, money market funds, marketable stocks or bonds (excluding retirement accounts). Cash reserves do not include assets that serve as an emergency fund (generally equal to three times my monthly debt payments). I have provided details below under "Explanation."

Yes	No	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

My monthly debt payments are excessive, and I am overextended with my creditors. I may have used credit cards, home equity loans or other credit to make my monthly mortgage payments. I have provided details below under "Explanation."

Yes	No	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

There are other reasons I/we cannot make our mortgage payments. I have provided details below under "Explanation."

### **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.**

<b>BORROWER</b> <input type="checkbox"/> I do not wish to furnish this information		<b>CO-BORROWER</b> <input type="checkbox"/> I do not wish to furnish this information	
<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino		<b>Ethnicity:</b> <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	
<b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White		<b>Race:</b> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	
<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male		<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male	
<b>To be Completed by Interviewer</b>	Interviewer's Name (print or type)		Name/Address of Interviewer's Employer
<input type="checkbox"/> Face-to-face interview	Interviewer's Signature      Date		
<input type="checkbox"/> Mail			
<input type="checkbox"/> Telephone	Interviewer's Phone Number (include area code)		
<input type="checkbox"/> Internet			

### **Borrower/Co-Borrower Acknowledgement**

1. Under penalty of perjury, I/we certify that all of the information in this affidavit is truthful and the event(s) identified above has/have contributed to my/our need to modify the terms of my/our mortgage loan.
2. I/we understand and acknowledge the Servicer may investigate the accuracy of my/our statements, may require me/us to provide supporting documentation, and that knowingly submitting false information may violate Federal law.
3. I/we understand the Servicer will pull a current credit report on all borrowers obligated on the Note.
4. I/we understand that if I/we have intentionally defaulted on my/our existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this Hardship Affidavit, or if I/we do not provide all of the required documentation, the Servicer may cancel the Agreement and may pursue foreclosure on my/our home.
5. I/we certify that my/our property is owner-occupied and I/we have not received a condemnation notice.
6. I/we certify that I/we am/are willing to commit to credit counseling if it is determined that my/our financial hardship is related to excessive debt.
7. I/we certify that I/we am/are willing to provide all requested documents and to respond to all Servicer communication in a timely manner. I/we understand that time is of the essence.



This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



## Additional Information Pertaining to Household and Living Expenses:

If you are experiencing temporary or long term hardship and need help, you must complete and submit this document along with other required documents received as part of your Borrower Response Package to be considered for available solutions. Internal Revenue Service (IRS) standards may be used if supporting documentation is not provided for the expenses listed below.

**NOTICE:** In addition, when you sign and date this form, you will make important certifications, representations and agreements, including certifying that all information provided on this form is accurate and truthful.

**REMINDER:** This form needs to be returned as part of your Borrower Response Package in addition to the other required documents listed in Form 710 Mortgage Assistance Application Form: (1) A complete, signed and dated Mortgage Assistance Application Form; (2) A complete and signed IRS 4506C form (if applicable); (3) Required income documentation; and (4) Required Hardship documentation.

### Additional Monthly Household and Living Expenses:

*(Please check all expenses that apply and state the monthly amount for each)*

- ☐ Auto/Transportation \$ \_\_\_\_\_ (gas/fuel, insurance, maintenance)
- ☐ Food \$ \_\_\_\_\_
- ☐ Child Care \$ \_\_\_\_\_
- ☐ Utilities \$ \_\_\_\_\_ (electric, gas, water, sewer, heating oil)
- ☐ Communications \$ \_\_\_\_\_ (phone/cell, cable, internet)
- ☐ Medical/Dental \$ \_\_\_\_\_ (co-pays and monthly prescriptions)
- ☐ Tuition & Books \$ \_\_\_\_\_
- ☐ Life Insurance Premiums \$ \_\_\_\_\_ (if not withheld from paystub)
- ☐ Health Insurance Premiums \$ \_\_\_\_\_ (if not withheld from paystub)
- ☐ \_\_\_\_\_ \$ \_\_\_\_\_
- ☐ \_\_\_\_\_ \$ \_\_\_\_\_
- ☐ \_\_\_\_\_ \$ \_\_\_\_\_
- ☐ Other Total Monthly Household Expenses and Debt Payments \$ \_\_\_\_\_
  
- ☐ List number of people living in the house # Adults \_\_\_\_\_ # Children \_\_\_\_\_

\_\_\_\_\_  
Borrower Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Borrower Signature

\_\_\_\_\_  
Date

**IVES 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-C, visit [www.irs.gov](http://www.irs.gov) and search IVES.

<b>1a.</b> Name shown on tax return (if a joint return, enter the name shown first)	<b>1b.</b> First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
<b>2a.</b> If a joint return, enter spouse's name shown on tax return	<b>2b.</b> Second social security number or individual taxpayer identification number if joint tax return
<b>3.</b> Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
<b>4.</b> Previous address shown on the last return filed if different from line 3 (see instructions)	
<b>5a.</b> IVES participant name, address, and SOR mailbox ID TALX Corporation, a provider of Equifax Verification Services, 11432 Lackland Road, Saint Louis, MO 63146	
<b>5b.</b> Customer file number (if applicable) (see instructions)	

**Caution:** This tax transcript is being sent to the third party entered on Line 5a. Ensure that lines 5 through 8 are completed before signing. (see instructions)

<b>6. Transcript requested.</b> Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request	
<b>a. Return Transcript</b> , 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	<input checked="" type="checkbox"/>
<b>b. Account Transcript</b> , 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	<input type="checkbox"/>
<b>c. Record of Account</b> , 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	<input type="checkbox"/>
<b>7. Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.</b> 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 2016, filed in 2017, will likely not be available from the IRS until 2018. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213	<input type="checkbox"/>

**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.

<b>8.</b> Year or period requested. Enter the ending date of the tax year or period using the mm/dd/yyyy format (see instructions)
12 / 31 / 2020    12 / 31 / 2019    12 / 31 / 2018    /    /

**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-C on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.☒ **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-C. See instructions.**

<b>Sign Here</b>	<b>Signature</b> (see instructions)	Date	Phone number of taxpayer on line 1a or 2a
	<b>Print/Type name</b>		
	<b>Title</b> (if line 1a above is a corporation, partnership, estate, or trust)		
	<b>Spouse's signature</b>		Date
	<b>Print/Type name</b>		

# Instructions for Form 4506-C, IVES Request for Transcript of Tax Return

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

## Future Developments

For the latest information about Form 4506-C and its instructions, go to [www.irs.gov](http://www.irs.gov) and search IVES. Information about any recent developments affecting Form 4506-C (such as legislation enacted after we released it) will be posted on that page.

**What's New.** Form 4506-C was created to be utilized by authorized IVES participants to order tax transcripts with the consent of the taxpayer.

## General Instructions

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

**Designated Recipient Notification.** Internal Revenue Code, Section 6103(c), limits disclosure and use of return information received pursuant to the taxpayer's consent and holds the recipient subject to penalties for any unauthorized access, other use, or redisclosure without the taxpayer's express permission or request.

**Taxpayer Notification.** Internal Revenue Code, Section 6103(c), limits disclosure and use of return information provided pursuant to your consent and holds the recipient subject to penalties, brought by private right of action, for any unauthorized access, other use, or redisclosure without your express permission or request.

**Purpose of form.** Use Form 4506-C to request tax return information through an authorized IVES participant. You will designate an IVES participant to receive the information on line 5a.

**Note:** If you are unsure of which type of transcript you need, check with the party requesting your tax information.

**Where to file.** The IVES participant will fax Form 4506-C with the approved IVES cover sheet to their assigned Service Center.

## Chart for ordering transcripts

If your assigned Service Center is:	Fax the requests with the approved coversheet to:
Austin Submission Processing Center	Austin IVES Team 844-249-6238
Fresno Submission Processing Center	Fresno IVES Team 844-249-6239
Kansas City Submission Processing Center	Kansas City IVES Team 844-249-8128
Ogden Submission Processing Center	Ogden IVES Team 844-249-8129

## Specific Instructions

**Line 1b.** Enter the social security number (SSN) or individual taxpayer identification number (ITIN) for the individual listed on line 1a, or enter the employer identification number (EIN) for the business listed on line 1a.

**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, or Form 8822-B, Change of Address or Responsible Party — Business, with Form 4506-C.

**Line 5b.** Enter up to 10 numeric characters to create a unique customer file number that will appear on the transcript. The customer file number cannot contain an SSN, ITIN or EIN. Completion of this line is not required.

**Note.** If you use an SSN, name or combination of both, we will not input the information and the customer file number will reflect a generic entry of "9999999999" on the transcript.

**Line 8.** Enter the end date of the tax year or period requested in mm/dd/yyyy format. This may be a calendar year, fiscal year or quarter. Enter each quarter requested for quarterly returns. Example: Enter 12/31/2018 for a calendar year 2018 Form 1040 transcript.

**Signature and date.** Form 4506-C must be signed and dated by the taxpayer listed on line 1a or 2a. The IRS must receive Form 4506-C within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines, including lines 5a through 8, 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 if unchecked.*

**Individuals.** Transcripts listed on line 6 may be furnished to either spouse if jointly filed. Only one signature is required. Sign Form 4506-C exactly as your name appeared on the original return. If you changed your name, also sign your current name.

**Corporations.** Generally, Form 4506-C 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-C but must provide documentation to support the requester's right to receive the information.

**Partnerships.** Generally, Form 4506-C can be signed by any person who was a member of the partnership during any part of the tax period requested on line 8.

**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-C 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 sign Form 4506-C.

## 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-C 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.  
**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-C 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.

**Authorization Form for Non-Borrower**

I give permission to Truist Bank (SunTrust now Truist) to utilize my income submitted, and to obtain a copy of my credit report to use in the Loss Mitigation application for assistance.

Non-Borrower understands, acknowledges, and agrees that the Lender and Other Loan Participants can obtain, use and share Non-Borrower's tax return information for purposes of (i) providing an offer; (ii) originating, maintaining, managing, monitoring, servicing, selling, insuring, and securitizing a loan; (iii) marketing; or (iv) as otherwise permitted by applicable laws, including state and federal privacy and data security laws. The Lender includes the Lender's affiliates, agents, service providers and any of aforementioned parties' successors and assigns. The Other Loan Participants includes any actual or potential owners of a loan resulting from your loan application, or acquirers of any beneficial or other interest in the loan, any mortgage insurer, guarantor, any servicers or service providers for these parties and any of aforementioned parties' successors and assigns.

Loan # \_\_\_\_\_

Property Address: \_\_\_\_\_

\_\_\_\_\_

Name of Non-Borrower: \_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_

Social Security Number: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Non-Borrower: \_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_

Social Security Number: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

# THIRD PARTY AUTHORIZATION

Truist Bank ("SunTrust now Truist") Mortgage Loan Number (10 digits) \_\_\_\_\_

I/We, \_\_\_\_\_ ("Borrowers") and  
\_\_\_\_\_ ("Co-Borrower", if applicable) hereby  
authorize Truist Bank to release any and all information about my loan to the third party indicated below.  
I/We understand that information released by Truist may include, but may not be limited to, information  
relating to my loan amount and payment transactions history, and/or the provision of copies of my loan  
documents, which may contain non-public information relating to me and the Co-Borrower.

I/We acknowledge that should I and/or Co-Borrower (if applicable) wish to terminate this authorization,  
the request to terminate must be in writing.

Date Requested: \_\_\_\_\_

Full Name of Authorized Third Party(s): \_\_\_\_\_

Authorized Party Phone/Email: \_\_\_\_\_ / \_\_\_\_\_

Relationship to Borrower: \_\_\_\_\_

Borrower Name: \_\_\_\_\_

Borrower Social Security Number (last 4 digits): \_\_\_\_\_

Co-Borrower Name: \_\_\_\_\_

Property Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\_\_\_\_\_  
Borrower Signature / Date

\_\_\_\_\_  
Co-Borrower Signature / Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name