



Wells Fargo 3RD Party Subordination Checklist

Thoroughly complete all sections and attach the requested forms, then fax **ALL** documents and mail fee to the Subordination Department **AT LEAST 30 BUSINESS DAYS PRIOR TO CLOSING**. Please call (800) 945-3056 for status updates.

FAX: Fax completed form together with **ALL** of the required items listed below to (866) 238-6875.

Please **DO NOT** mail or Fed Ex packages.

MAIL: Mail Check for the Underwriting and Document Preparation fee to the following address. Check must be received before subordination documents are processed. **Make check for Underwriting and Document Preparation fee in the amount of \$125.00 payable to Wells Fargo Bank:**

Wells Fargo Bank
 Subordination Team – MAC P6051-019
 18700 NW Walker Road Bldg. #92
 Beaverton, OR 97006

Customer Management Sales Agent Name: _____

Section 1 – Documentation Required

The following items are **REQUIRED & MUST accompany this request** (if incomplete, this request could be declined):

1. Copy of **UNIFORM RESIDENTIAL LOAN APPLICATION**. (FNMA Form 1003 including income information)
2. Copy of **UNIFORM RESIDENTIAL APPRAISAL REPORT**. (FNMA Form 1004/1073 including all pages)
3. Copy of the **PRELIMINARY TITLE REPORT**. [Must show vesting, legal description, & our recorded lien(s).]
4. Copy of the **UNDERWRITING TRANSMITTAL FORM**. (FNMA Form 1008)
5. Explanation of **Cash Out**.
6. **Income documentation** – Include documentation for income verification.
7. Completed and signed **Form 4506T** (all parties **MUST** sign)
8. Copy of the **Rate Lock** document

NOTE: Although not initially requested, the underwriter may require additional items (appraisal review, etc).

Section 2 – Borrower Information

Borrower Name		WF Employee?	Yes	No
WF HE Account #		Additional WF HE Acct #		
Benefit to Borrower				

Note: A clear statement indicating how borrower is improving their financial position (i.e., getting out of Neg AM/Option ARM, moving to fixed rate, reducing mortgage payment, **terms, rate of old 1st Mortgage, etc.**) is required.

Section 3 – Requestor (Contact) Information

Who would you like us to contact with approval and/or questions? Please provide contact information should there be any questions regarding this Subordination request (income, appraisal, assets, debts, new 1st Mortgage product, etc).

Contact Name		Company	
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Contact Email		Telephone #		Fax #	
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Section 4 – Loan Information					
Current 1 st Mortgage Holder Name		Current 1 st Mortgage Balance			
New 1 st Mortgage Lender's Name					
New 1 st Mortgage Loan Amt (must match application & 1008)					
Is the First Mortgage Refinance being done as part of HASP? (Homeowners Affordability and Stability Plan)				Yes	No
Terms of New 1 st Mortgage Product		Rate Lock Expiration Date			
New 1 st Loan Payment (P&I Only)		Closing Date			
Does this have a negative amortization potential?		Yes	No		

Section 5 – Closing Agent Information			
Approved Subordination Agreements can be sent directly to the Closing Agent via courier. Please provide the following information:			
Company Name			
Escrow/File Number		Telephone Number	
Closing Agent Name		Fax Number	
Street Address (City, State, Zip)			
Email Address			

Section 6 – Shipping Information
FedEx users: For faster service, please provide a self addressed, pre-paid express mail courier envelop OR provide your billing account number: _____
UPS users: Please provide a pre-addressed UPS Shipping label for the documents to be sent back to you.
NOTE: If shipping information is not provided, your documents will be sent via standard US mail.

Thank you for your assistance in making the Subordination Process as efficient and timely as possible. Please allow a minimum of 30 business days for processing of a Subordination Agreement. For Subordination status or any changes to your submitted request, please contact Home Equity Group Customer Service at (800) 945-3056.

Please note: Any requested changes after our Subordination agreement has been sent will be charged a \$50.00 Redraw Fee which must be paid prior to redraw.

Form **4506-T**

Request for Transcript of Tax Return

(Rev. January 2008)

Department of the Treasury
Internal Revenue Service

- ▶ Do not sign this form unless all applicable lines have been completed.
Read the instructions on page 2.
- ▶ Request may be rejected if the form is incomplete, illegible, or any required line was blank at the time of signature.

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.	

Caution: DO NOT SIGN this form if a third party requires you to complete Form 4506-T, and lines 6 and 9 are blank.

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

- a **Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. 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. 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 2006, filed in 2007, will not be available from the IRS until 2008. 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.

____ / ____ / ____ ____ / ____ / ____ ____ / ____ / ____ ____ / ____ / ____

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.

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

Received Time Apr. 22. 9:33AM

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.

Note. You can also call 1-800-829-1040 to request a transcript or get more information.

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:
District of Columbia, Maine, Maryland, Massachusetts, New Hampshire, New York, Vermont	RAIVS Team Stop 679 Andover, MA 05501
Alabama, Delaware, Florida, Georgia, North Carolina, Rhode Island, South Carolina, Virginia	RAIVS Team P.O. Box 47-421 Stop 91 Doraville, GA 30362
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
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Iowa, Kansas, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	RAIVS Team Stop 37106 Fresno, CA 93888
Arkansas, Connecticut, Illinois, Indiana, Michigan, Missouri, New Jersey, Ohio, Pennsylvania, West Virginia	RAIVS Team Stop 6705-B41 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, Georgia, 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
Connecticut, Delaware, District of Columbia, 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
	801-620-6922
	859-669-3592

Line 1b. Enter your employer identification number (EIN) if your request relates to a business return. Otherwise, enter the first social security number (SSN) 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 60 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

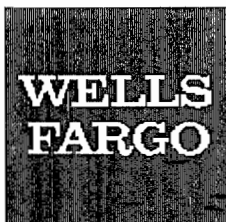
We ask for the information on this form to establish your right to gain access to the requested tax information under the Internal Revenue Code. We need this information to properly identify the tax information and respond to your request. Sections 6103 and 6109 require you to provide this information, 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.



Consumer Credit Group
Customer Service
P.O.Box 4233
Portland, OR 97208-4233

Fax: (866) 238-6880
Phone: (800) 400-9738

FAX COVER SHEET

Date: 4/22/2009
To: _____
Company: _____
Address: 11 _____
Fax # 4253537894
From: Stesha R
Desk #: 866-275-9138
Number of pages (including cover sheet) 5

INTENDED FOR ABOVE-NAMED RECIPIENT ONLY

Message:

Warning: Unauthorized interception of the telephonic communication could be in violation of federal and state law. The documents accompanying this telecopy transmission contain confidential information belonging to the sender that is legally privileged. The information is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or taking of any action in reliance on the contents of this telecopied information is strictly prohibited. If you received this transmission in error, please immediately notify us by telephone to arrange for the return of the original document to us.

PLEASE CALL 1-800-400-9738 IF YOU EXPERIENCE ANY PROBLEMS WITH THIS TRANSMISSION.

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