

Dear Applicant,

Thank you for your interest in applying for homeownership with Pikes Peak Habitat for Humanity. Our Veteran Homeownership Program is designed to give honorably discharged military service members the opportunity to help build and purchase their own home.

Enclosed you will find the Habitat for Humanity application. Before completing the application, please complete the *Eligibility Questionnaire* to ensure that you meet the basic criteria for Habitat Homeownership. Then, fill out the application and attached forms and make copies of all required documentation (follow the Application Checklist provided). Completed applications will be processed in the order that they are received.

Applications will not be processed until they are COMPLETE and include COPIES (Habitat cannot make copies) of all the following documentation:

- ✓ Discharge paperwork DD Form 214
- ✓ Verification of your income
- √ Tax returns and W-2s
- Two months of Bank Statements for all applicants
- ✓ Household bills
- ✓ Current lease agreement
- ✓ Government issued Photo ID for all applicants
- ✓ Social Security cards for all members of the household
- Passport or Birth Certificate for all applicants
- Copy of all minor children's birth certificates (if applicable)
- ✓ Divorce decree and custody statement (if divorced)
- ✓ Copy of bankruptcy documents (if applicable)
- \$15 Credit Check Fee (check or money order made out to PPHFH. Habitat cannot accept cash). This fee is non-refundable and covers the cost of pulling your credit report.

Please return your completed application packet to our office located at:

PPHFH 2802 N. Prospect St. Colorado Springs, CO 80907

Feel free to contact me at **475-7800 ext. 103** with any questions regarding the application. If you need assistance in completing your application, you must call to make an appointment.

Sincerely,

Janet Rísley



# Homeownership Program Application - March 2022

Thank you for your interest in applying to Pikes Peak Habitat for Humanity!

Enclosed you will find the Pikes Peak Habitat for Humanity Homeownership Program application. Follow the steps listed below to complete your application.

Step 1: Review the <i>Eligibility Questionnaire</i> on the back of this page to ensure that you understand the basic criteria for Habitat Homeownership.
Step 2: Complete and sign all sections of the application.
Step 3: Sign the attached forms and disclosures.
Step 4: Using the provided checklist, gather required documentation and make COPIES to submit with your application (Habitat cannot make copies of your documentation). Please organize your application packet in the same order as the checklist.
Step 5: Once your application is complete, return to office at: 2802 N. Prospect Street, 80907
Applications will be accepted until a qualified applicant is found

A <u>\$15.00</u> credit check fee will be charged to each applicant (\$30.00 for applications with an applicant and co-applicant). Please bring this fee, when you submit your application, in the form of a check or a money order. **Habitat cannot accept cash.** 

If you have any questions, or need assistance with completing the application, please call our office at (719) 475-7800 ext. 103.

Homebuyers selected to purchase homes through Pikes Peak Habitat for Humanity's Homeownership Program will be done so by Pikes Peak Habitat for Humanity's Board of Directors in a manner that does not discriminate based on race, color, religion, sex, handicap, familial status, sexual orientation, age, gender identity or national origin or because all or part of the applicant's income is derived from public assistance programs.





# **Eligibility Questionnaire**

Before completing the application for homeownership, please answer the questions below:

Veteran Status:			
Were you honorably discharged from military service?	Υ	N	
Can you provide your discharge paperwork – DD Form 214?	Υ	Ν	
Income (see chart below for income guidelines):			
Does your income fall between the income minimum & maximum for your household size?	Υ	N	
Do you have a two-year employment history with less than a three-month gap in employment? OR has your income source been consistent for the past two years?	Υ	Ν	
Does all of your income count as an "eligible income source"?	Υ	N	
Residency:			
Are all applicants US Citizens or hold US Permanent Resident Cards?	Υ	N	
Have all applicants lived in El Paso County for at least one year?	Υ	N	
Credit:			
Have you had any repossessions, foreclosures, or evictions in the past three years?	Υ	Ν	N/A
If you have any judgements on your credit, have they been paid-in-full and satisfied?	Υ	N	N/A
Have any bankruptcies been discharged at least two years prior to March 2022?	Υ	N	N/A
If you have collection accounts on your credit, do they total less than \$2,500 and are they in a documented payment plan?	Υ	N	N/A
In the past twelve months, do have less than two 30-day late payments or less than one 60-day late payment on all credit accounts?	Υ	N	N/A
Marital Status:			
If you are married, is your spouse listed as the co-applicant?	Υ	N	N/A
Have any pending divorces been finalized?	Υ	N	N/A

Number in Household	1 person	2 person	3 person	4 person	5 person	6 person	7 person	8+ person
Annual Minimum	\$20,188	\$23,072	\$25,956	\$28,840	\$31,147	\$33,454	\$35,762	\$38,069
Annual Maximum	\$46,150	\$52,750	\$59,350	\$65,900	\$71,200	\$76,450	\$81,750	\$87,000



### 2022 Application Cover Page

Applicant Name(s):
Current Mailing Address:
Best Contact Phone #:
Best Time of day to call:
Email:
How did you hear about this program?:
Do you require interpretation? If so, which language?

#### How many people are in your household?

#### Pikes Peak Habitat Bedroom Policy:

Homes will be built to accommodate current family size.

- Every household member must have a bedroom.
- No more than 2 people can occupy a bedroom.
- Children of opposite gender will not share a bedroom.
- Children more than 5 years apart in age will not share a bedroom.
- Children of the same gender, less than 5 years apart will share a room.

Available homes are located at

The Ridge at Sand Creek

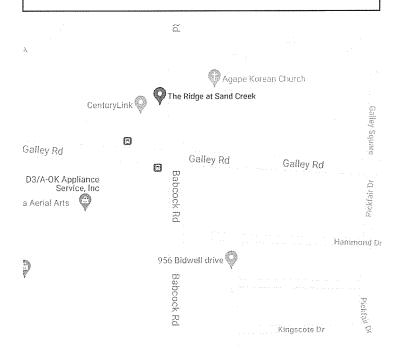
southeast corner of Galley Road & Babcock Road, Colorado Springs, CO Are any of the household members honorably discharged military service member?

Y/N

Have you ever applied with Pikes Peak Habitat in the past?

Y/N

if yes, what year?\_









# **Application Checklist:**

# Provide COPIES only, Habitat will NOT make copies

Ш	Have you	u completed <b>all sections</b> of the application cover page?						
	Have you completed all sections of the application form?							
	Have ALL applicants signed the application?							
	Have AL	L applicants signed the Equal Credit Opportunity Act Disclosure?						
	Have AL	L applicants completed and signed the 4506-T Request for Transcript of Tax Return?						
	Have AL	L applicants signed the Criminal Background Check Authorization?						
	Have you	attached COPIES of all supporting documentation?						
	Discharg	e Paperwork – DD Form 214						
	Verificati	on of all household income sources						
	0	2022 Veteran Benefit Statement 3 months paystubs for all applicants –December 2021, January 2022, February 2022 2022 SSI/SSDI determination letters alimony or child support registry						
	Гах return	s AND W-2s – 2021, 2020, 2019						
	Househol	d bills						
	0 0 0 0	utilities cell phone auto loan student loans credit cards						
	Two mon	ths of Bank Statements for all applicants –January 2022 and February 2022						
	Current le	ease agreement						
	Government issued Photo ID for all applicants							
	Proof of 0	Citizenship for all applicants – Passport, Birth Certificate, or US Permanent Resident Card.						
	Social S	ecurity cards for all members of the household						
	Copy of a	all minor children's birth certificates (if applicable)						
	Divorce d	lecree and custody statement (if divorced)						
	Copy of b	ankruptcy documents (if applicable)						
		included your \$15 application fee? (Please make your check or money order out to No cash will be accepted.)						



## Pikes Peak Habitat for Humanity 2802 N. Prospect St. Colorado Springs, CO 80907



Number of years \_\_\_

#### **Habitat Homeownership Program**

We are pledged to the letter and spirit of U.S. policy for the achievement of equal housing opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color, religion, sex, handicap, familial status or national origin.

application as completely and accurately as possible. All information you include on this application will be kept confidential in accordance with the Gramm-Leach-Bliley Act. 1. APPLICANT INFORMATION Co-applicant **Applicant** Applicant's name Co-applicant's name Social Security number \_\_\_\_\_ Social Security number DOB \_\_\_ Home phone \_\_\_\_\_ DOB\_\_\_\_ Home phone \_\_\_\_\_ ☐ Married ☐ Separated ☐ Unmarried (Incl. single, divorced, widowed) ☐ Married ☐ Separated ☐ Unmarried (Incl. single, divorced, widowed) Dependents and others who will live with you Dependents and others who will live with you (not listed by co-applicant) (not listed by co-applicant) Name Date of Birth Male Female Name Date of Birth Male Female П  $\Box$ Present address (street, city, state, ZIP code)  $\square$  Own  $\square$  Rent | Present address (street, city, state, ZIP code)  $\square$  Own  $\square$  Rent Number of years \_\_\_\_\_ Number of years If you have lived at your present address for less than two years, complete the following: ☐ Own ☐ Rent Present address (street, city, state, ZIP code) ☐ Own ☐ Rent Last address (street, city, state, ZIP code)

Dear Applicant: Please complete this application to determine if you qualify for the Habitat for Humanity homeownership program. Please fill out the

Number of years \_\_\_\_

Date received: \_\_\_\_\_\_\_ Date of selection committee approval: \_\_\_\_\_\_\_\_

Date of notice of incomplete application letter: \_\_\_\_\_\_\_ Date of board approval: \_\_\_\_\_\_\_\_

Date of partnership agreement: \_\_\_\_\_\_\_

2. FOR OFFICE USE ONLY — DO NOT WRITE IN THIS SPACE

List all states in which you have resided in the past ten years:

#### 3. WILLINGNESS TO PARTNER

To be considered for Habitat homeownership, you must be willing to complete 200 "sweat-equity" hours. Your help in building your home and the homes of others is called "sweat equity" and may include clearing the lot, painting, helping with construction, working at the Habitat ReStore, working in the Habitat office, attending homeownership classes or other approved activities.

# I AM WILLING TO COMPLETE THE REQUIRED SWEAT-EQUITY HOURS:

Yes No
Applicant 

Co-applicant

4. PRESENT HOUSING CONDITION	ONS
Number of bedrooms (please circle) 1 2 3 4 5	
Other rooms in the place where you are currently living:	
☐ Kitchen ☐ Bathroom ☐ Living room ☐ Dining room	
☐ Other (please describe)	
If you rent your residence, what is your monthly rent payment? \$	/month I rent check.)
Name, address and phone number of current landlord:	
In the space below, describe the condition of the house or apartment where you live	e. Why do you need a Habitat home?
5. PROPERTY INFORMATION	
Have you owned a home in the past three years? □ No □ Yes  Are you currently listed as an owner or co-signer on any property? □ No □	Von
Are you currently listed as an owner or co-signer on any property?   No □  If you own your residence, what is your monthly mortgage payment? \$	Yes/month Unpaid balance \$
Do you own land? ☐ No ☐ Yes Monthly payment \$	Unnaid halance \$

	6. EMPLOYMENT	INFORMATION	
Applicant		Co-applicant	
Name and address of CURRENT employer	Employment Dates (From - To, month/year)	Name and address of CURRENT employer	Employment Dates (From - To, month/year)
	Monthly (gross) wages \$		Monthly (gross) wages \$
Type of business	Business phone	Type of business	Business phone
If working at currer	ાt job less than two ye	ears, complete the following information	
Name and address of <b>LAST</b> employer	Employment Dates (From - To, month/year)	Name and address of LAST employer	Employment Dates (From - To, month/year)
	Monthly (gross) wages \$		Monthly (gross) wages \$
Type of business	Business phone	Type of business	Business phone

7. MONTHLY INCOME						
Income source	Applicant	Co-applicant	Others in household	Total		
Wages	\$	\$	\$	\$		
TANF	\$	\$	\$	\$		
Alimony	\$	\$	\$	\$		
Child support	\$	\$	\$	\$		
Social Security	\$	\$	\$	\$		
SSI	\$	\$	\$	\$		
Disability	\$	\$	\$	\$		
Section 8 housing	\$	\$	\$	\$		
Other:	_ \$	\$	\$	\$		
Other:	_ \$	\$	\$	\$		
Other:	_ \$	\$	\$	\$		
Total	\$	\$	\$	\$		

PLEASE NOTE:	HOUSEHOLD MEMBERS WHOSE INCOME IS LISTED ABOVE						
Self-employed applicants may be	Name	Income source	Monthly income	Date of birth			
required to provide							
additional documentation such							
as tax returns and							
financial statements.							

8. SOURCE OF DOWN PAYMENT AND CLOSING COSTS	
e money to make the down payment or pay for closing costs (for example, savings or parents)? If you borrow the u borrow it from, and how will you pay it back?	9

9. ASSETS							
Name of bank, savings and loan, credit union, etc.	Address	City, state	ZIP	Account number	Current balance		
					\$		
					\$		
					\$		
					\$		
					\$		
					\$		
					\$		
					\$		
					\$		

		10. D	EBT						
		TO WHOM DO YOU AND THE CO-APPLICANT(S) OWE MONEY?							
		AGENTATA		1500 1500 1500	eropyvericae (egyvyter				
Account	Monthly payment	Unpaid balance	Months left to pay	Monthly payment	Unpaid balance	Months left to pay			
Vehicle: Model	. \$	\$		\$	\$				
Vehicle: Model	\$	\$		\$	\$				
Furniture, appliance, TVs (includes rent-to-own)	\$	\$		\$	\$				
Alimony	\$	\$		\$	\$				
Child support	\$	\$		\$	\$				
Credit card	\$	\$		\$	\$				
Credit card	\$	\$		\$	\$				
Credit card	\$	\$		\$	\$				
Total medical	\$	\$		\$	\$				
Other	\$	\$		\$	\$				
Other	\$	\$		\$	\$				
Total	\$	\$		\$	\$				

	TMONE	REVERNALS:	
Account	Applicant	Co-applicant	Total
Rent	\$	\$	\$
Utilities	\$	\$	\$
Insurance	\$	\$	\$
Child care	\$	\$	\$
Internet service	\$	\$	\$
Cell phone	\$	\$	\$
Land line	\$	\$	\$
Business expenses	\$	\$	\$
Union dues	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Total	\$	\$	\$

11. DECLARATIONS								
Please check the box beside the word that best answers the following questions to	Please check the box beside the word that best answers the following questions for you and the co-applicant							
	Appl	licant	Со-ар	plicant				
a. Do you have any outstanding judgments because of a court decision against you?	☐ Yes	□ No	☐ Yes	□ No				
b. Have you declared bankruptcy in the past seven years?	☐ Yes	□ No	☐ Yes	□ No				
c. Have you had property foreclosed on or deed in lieu of foreclosure in the past seven years?	☐ Yes	□ No	☐ Yes	□ No				
d. Are you currently involved in a lawsuit?	☐ Yes	□ No	☐ Yes	□ No				
<ul> <li>Have you directly or indirectly been obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgment?</li> </ul>	□ Yes	□ No	☐ Yes	□ No				
f. Are you currently delinquent or in default on any federal debt or any other loan, mortgage financial obligation or loan guarantee?	☐ Yes	□ No	□ Yes	□ No				
g. Are you paying alimony or child support or separate maintenance?	☐ Yes	□ No	☐ Yes	□ No				
h. Are you a co-signer or endorser on any loan?	□ Yes	□ No	☐ Yes	□ No				
i. Are you a U.S. citizen or permanent resident?	☐ Yes	□ No	☐ Yes	□ No				
j. Have you or anyone in your household served or is currently serving in the U.S. military?	☐ Yes	□ No	☐ Yes	□ No				

If you answered "yes" to any question a through h, or "no" to question i, please explain on a separate piece of paper.

#### 12. AUTHORIZATION AND RELEASE

I understand that by completing this application, I am authorizing Habitat for Humanity to evaluate my actual need for the Habitat homeownership program, my ability to repay an affordable loan and other expenses of homeownership, and my willingness to be a partner through sweat equity.

I understand that the evaluation will include a home visit, a credit check and employment verification. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied, and that even if I have already been selected to receive a Habitat home, I may be disqualified from the program and forfeit any rights or claims to a Habitat home. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved.

I also understand that Habitat for Humanity screens all applicants on the sex offender registry. By completing this application, I am submitting myself to such an inquiry. I further understand that by completing this application, I am submitting myself to a criminal background check.

Applicant signature	Date	Date Co-applicant signature		
X		X		
PLEASE NOTE: If more space is needed to com this application. Please mark your additional com			sheet of paper and attach it t	
⊪ 13. R	IGHT TO RE	CEIVE COPY OF APPRAISAL	The second secon	
This is to notify you that we may order an apprais completion of the appraisal, we will promptly prov			for this appraisal. Upon	
Applicant signature		Co-applicant signature		
X		X		

#### 14. ADDITIONAL DISCLOSURES

Your signature at the end of this section is to act as verification that your application included the attached documents:

- 1. Equal Credit Opportunity Act Notice
- 2. Borrower Signature Authorization Form
- 3. E-Sign Act Disclosure & Agreement
- 4. Pikes Peak Habitat for Humanity's Privacy Notice
- 5. 4506-T Request for Tax Transcripts

Applicant signature	Co-applicant signature
x	X



Homebuyers selected to purchase homes through Pikes Peak Habitat for Humanity's Homeownership Program will be done so by Pikes Peak Habitat for Humanity's Board of Directors in a manner that does not discriminate based on race, color, religion, sex, handicap, familial status, sexual orientation, age, gender identity or national origin or because all or part of the applicant's income is derived from public assistance programs.

# 15. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW: We are requesting the following information to monitor our compliance with the federal Equal Credit Opportunity Act, which prohibits unlawful discrimination. You are not required to provide this information. We will not take this information (or your decision not to provide this information) into account in connection with your application or credit transaction. The law provides that a creditor may not discriminate based on this information, or based on whether or not you choose to provide it. If you choose not to provide the information, we may note it by visual observation or surname.

Ann	licant				
		Co-applicant			
☐ I do not wish to furnish this inf	ormation	☐ I do not wish to furnish this information			
Race (applicant may select more than one racial designation):  ☐ American Indian or Alaska Native ☐ Native Hawaiian or other Pacific Islander ☐ Black/African-American ☐ White ☐ Asian		Race (applicant may select more than one racial designation):  ☐ American Indian or Alaska Native ☐ Native Hawaiian or other Pacific Islander ☐ Black/African-American ☐ White ☐ Asian			
Ethnicity:  ☐ Hispanic or Latino ☐ No	on-Hispanic or Latino	Ethnicity:  ☐ Hispanic or Latino ☐ Non-Hispanic or Latino			
Sex:  □ Female □ Male		Sex:			
Birthdate:		Birthdate:/			
Marital status: ☐ Married ☐ Separated ☐ L	Jnmarried (single, divorced, widowed)	Marital status:  ☐ Married ☐ Separated ☐ Unmarried (single, divorced, widowed)			
	To be completed only by the per	rson conducting the interview			
This application was taken by:  ☐ Face-to-face interview  ☐ By mail	Interviewer's name (print or type)				
☐ By telephone	Interviewer's signature	Date			
	Interviewer's phone number				



# **Borrower Signature Authorization**

**Privacy Act Notice:** This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et. seq., or 7 USC, 1921 et. seq. (if USDA/FmHA).

USDA/FmHA).	
Part I – General Information	
Borrower Name	2. Name and Address of Lender
	Pikes Peak Habitat for Humanity Colorado Springs, CO 80907
Part II – Borrower Authorization	
I hereby authorize the Lender/Broker to verify my pa accounts, stock holdings, and any other asset balance application.	ces that are needed to process my mortgage loan
I further authorize the Lender/Broker to order a cons information, including past and present mortgage and	umer credit report and verify other credit d landlord references.
It is understood that a copy of this form will also serv	e as authorization.
The information the Lender/Broker obtains is only to mortgage loan.	be used in the processing of my application for a
Borrower Signature	Date
	ı



## E-SIGN ACT DISCLOSURE AND AGREEMENT

We are pleased to offer you the opportunity to receive information about your account electronically. If you would like to receive correspondence and notices from us electronically, instead of paper copies through the mail, please review this notice and provide your consent.

- 1. Scope of Communications to Be Provided in Electronic Form. When you use a product or service to which this disclosure applies, you agree that we may provide you with any communications in electronic format, and that we may discontinue sending paper communications to you, unless and until you withdraw your consent as described below. Your consent to receive electronic communications and transactions includes, but is not limited to:
  - All legal and regulatory disclosures and communications associated with the product or service available through Pikes Peak Habitat for Humanity.
  - Notices or disclosures about a change in the terms of your account or associated payment feature and responses to claims.
  - Privacy policies and notices.
- 2. Method of Providing Communications to You in Electronic Form. All communications that we provide to you in electronic form will be provided either (1) via e-mail, (2) by access to a web site that we will designate in an e-mail notice we send to you at the time the information is available, or (3) to the extent permissible by law, by access to a web site that we will generally designate in advance for such purpose. The information that Habitat may deliver to you could be confidential in nature. By signing this agreement you acknowledge and agree that Habitat shall not be responsible for verifying the identity of any person sending an email from your email account. You also agree to hold Habitat harmless for any damages resulting from unauthorized access to emails and/or information sent between you and Habitat. Habitat shall not be responsible for delays in the transmission of any information or for any computer virus, hacking or related problems.
- 3. How to Withdraw Consent. You may withdraw your consent to receive communications in electronic form by contacting us at office@pikespeakhabitat.org and 2802 N. Prospect St., Colorado Springs, CO 80907. At our option, we may treat your provision of an invalid email address, or the subsequent malfunction of a previously valid email address, as a withdrawal of your consent to receive electronic communications. We will not impose any fee to process the withdrawal of your consent to receive electronic communications. Any withdrawal of your consent to receive electronic communications will be effective only after we have a reasonable period of time to process your withdrawal.
- 4. How to Update Your Records. It is your responsibility to provide us with true, accurate and complete e-mail address, contact, and other information related to this E-Sign Act disclosure and your account, and to maintain and update promptly any changes in this information. You can update information (such as your e-mail address) by contacting us at office@pikespeakhabitat.org and 2802 N. Prospect St., Colorado Springs, CO 80907.
- 6. Requesting Paper Copies. We will not send you a paper copy of any communication, unless you request it or we otherwise deem it appropriate to do so. You can obtain a paper copy of an electronic communication by printing it yourself or by requesting that we mail you a paper copy,

provided that such request is made within a reasonable time after we first provided the electronic communication to you. To request a paper copy, contact us at office@pikespeakhabitat.org and 2802 N. Prospect St., Colorado Springs, CO 80907. We may charge you a reasonable service charge for the delivery of paper copies of any communication provided to you electronically pursuant to this authorization. We reserve the right, but assume no obligation, to provide a paper (instead of electronic) copy of any communication that you have authorized us to provide electronically.

- 7. **Communications in Writing.** All communications in either electronic or paper format from us to you will be considered "in writing." You should print or download for your records a copy of this disclosure and any other communication that is important to you.
- 8. Federal Law. You acknowledge and agree that your consent to electronic communications is being provided in connection with a transaction affecting interstate commerce that is subject to the federal Electronic Signatures in Global and National Commerce Act, and that you and we both intend that the Act apply to the fullest extent possible to validate our ability to conduct business with you by electronic means.
- 9. **Termination/Changes.** We reserve the right, in our sole discretion, to discontinue the provision of your electronic communications, or to terminate or change the terms and conditions on which we provide electronic communications. We will provide you with notice of any such termination or change as required by law.
- 10. Consent. By signing below you agree that you have read, understand, and agree to the E-Sign Act. You hereby give your affirmative consent to provide electronic communications to you as described herein. You further agree that your computer satisfies the hardware and software requirements specified above and that you have provided us with a current e-mail address at which we may send electronic communications to you.

Achiomeaged and Agreed to by.
D. C. Aleman
Borrower Signature:
Name:
Date:
Email Address:
Co-Borrower Signature:
Name:
Da <b>t</b> e:
Email Address:

Asknowledged and Agroad to by:

Department of the Treasury Internal Revenue Service

### Request for Transcript of Tax Return

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

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

▶ For more information about Form 4506-T, visit www.irs.gov/form4506t. Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using

OMB No. 1545-1872

Ia	Na sho	me shown on tax return. If a joint return, enter the na own first.	nme   1b Fi n	rst social security umber, or employe	number on er identifica	tax return, ition numb	individu: er (see in	al taxp	ayer identi ons)	fication
2a	lf a	joint return, enter spouse's name shown on tax retu		econd social se lentification nun	curity nur nber if joi	nber or in nt tax retu	dividual rn	taxpa	ıyer	
3	Cur	rent name, address (including apt., room, or suite no	o.), city, state, and ZI	P code (see instr	uctions)					
4	Prev	rious address shown on the last return filed if differe	nt from line 3 (see in:	structions)		·				
5 (	Custo	omer file number (if applicable) (see instructions)								
Note: Page 2	Effect 2 for	ctive July 2019, the IRS will mail tax transcript reque additional information.	sts only to your addr	ess of record. Se	e What's	New unde	r Future	Deve	lopment	s on
6	Tra	nscript requested. Enter the tax form number here nber per request. ▶	e (1040, 1065, 1120,	etc.) and check	the approp	oriate box	below. E	nter c	only one to	ax forr
а	For	turn Transcript, which includes most of the line it inges made to the account after the return is proc m 1065, Form 1120, Form 1120-A, Form 1120-H, Fo I returns processed during the prior 3 processing ye	essed. Transcripts a orm 1120-L, and For	re only available m 1120S. Return	for the fo	llowing ret	turns: Fo	orm 10 the cu	140	5, 1 <i>r</i>
đ	Acc	count Transcript, which contains information on the essments, and adjustments made by you or the IRS estimated tax payments. Account transcripts are ava	financial status of the	ne account, such	as paym	ents made	on the	accoui	nt, penalty	
С	Rec	cord of Account, which provides the most detaile ascript. Available for current year and 3 prior tax yea	d information as it i	s a combination	of the R	eturn Tran	scrint a			 t 
7	Veri after	fication of Nonfiling, which is proof from the IRS to Found 15th. There are no availability restrictions on p	hat you <mark>did not</mark> file a prior year requests. N	return for the ye Most requests wil	ear. Currei I be proce	nt year rec	uests ar	e only	available	
	Forn these trans exan	n W-2, Form 1099 series, Form 1098 series, or For e information returns. State or local information is n script information for up to 10 years. Information for th aple, W-2 information for 2016, filed in 2017, will likely oses, you should contact the Social Security Administr	m 5498 series transe ot included with the e current year is gene not be available from	cript. The IRS ca Form W-2 inform rally not available the IRS until 20	n provide a nation. The until the y	a transcrip e IRS may ear after it	t that inc be able is filed v	ludes to provith the	data from ovide this e IRS. For	
th you	i: II y ur reti	ou need a copy of Form W-2 or Form 1099, you sho urn, you must use Form 4506 and request a copy of	uld first contact the p your return, which in	payer. To get a c cludes all attach	opy of the ments.	Form W-2	or Forn	1099	filed	ليا
	years	or period requested. Enter the ending date of the or periods, you must attach another Form 4506-quarter or tax period separately.	e year or period, usi T. For requests rela	ng the mm/dd/y ting to quarterly	yyy forma tax returr	t. If you a is, such a	re reque s Form	sting i 941, y	more than	1 four enter
ution	• Do	not sign this form unless all applicable lines have be	en completed		/			/	/	
gnatur ormati arehol tify th nature Sign	re of ion reder, nat I I e date atory	taxpayer(s). I declare that I am either the taxpay equested. If the request applies to a joint return, partner, managing member, guardian, tax matters have the authority to execute Form 4506-T on beh	er whose name is slat least one spouse partner, executor, realf of the taxpayer.	must sign. If sign eceiver, administ Note: This form	gned by a rator, trus must be r	corporative, or par eceived by	e officer ty other (IRS wind umber o	, 1 pe than t thin 12	ercent or i	more yer, I of the
	)	Signature (see instructions)		Date						
gn ·re	)	Title (if line 1a above is a corporation, partnership, estate, o	or trust)							
. •										

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

#### **Future Developments**

For the latest information about Form 4506-T and its instructions, go to www.irs.gov/lorm4506t. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

The filing location for the Form 4506-T has changed. Please see Chart for individual transcripts or Chart for all other transcripts for the correct mailing location.

What's New. As part of its ongoing efforts to protect taxpayer data, the Internal Revenue Service announced that in July 2019, it will stop all third-party mailings of requested transcripts. After this date masked Tax Transcripts will only be mailed to the taxpayer's address of record.

If a third-party is unable to accept a Tax Transcript mailed to the taxpayer, they may either contract with an existing IVES participant or become an IVES participant themselves. For additional information about the IVES program, go to www.irs.gov and search IVES.

#### **General Instructions**

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

Purpose of form. Use Form 4506-T to request tax return information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

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

Customer File Number. The transcripts provided by the IRS have been modified to protect taxpayers' privacy. Transcripts only display partial personal information, such as the last four digits of the taxpayer's Social Security Number. Full financial and tax information, such as wages and taxable income, are shown on the transcript.

An optional Customer File Number field is available to use when requesting a transcript. This number will print on the transcript. See Line 5 instructions for specific requirements. The customer file number is an optional field and not required.

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

Automated transcript request. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946.

Where to file. Mail or fax Form 4506-T to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual transcripts (Form 1040 series and Form W-2) and one for all other transcripts.

If you are requesting more than one transcript or other product and the chart shows two different addresses, send your request to the address based on the address of your most recent return.

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

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

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

Note: If the addresses on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address. For a business address, file Form 8822-B, Change of Address or Responsible Parry — Business.

Line 5. Enter up to 10 numeric characters to create a unique customer file number that will appear on the transcript. The customer file number <u>should not</u> contain an SSN Completion of this line is not required.

Note. It 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 "999999999" on the transcript

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. The IRS must receive form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.



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

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

Corporations. Generally, Form 4506-T can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer. A bona fide shareholder of record owning 1 percent or more of the outstanding stock of the corporation may submit a Form 4506-T but must provide documentation to support the requester's right to receive the information.

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

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Note: If you are Heir at law, Next of kin, or Beneficiary you must be able to establish a material interest in the estate or

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

Signature by a representative. A representative can sign Form 4506-T for a taxpayer only it the taxpayer has specifically delegated this authority to the representative on Form 2848, line 5. The representative must attach Form 2848 showing the delegation to Form 4506-T.

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

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6.103.

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

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.

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

If you filed an individual return and lived in:

Mail or fax to:

Florida, Louisiana, Mississippi, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address

Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301

855-587-9604

Alabama, Arkansas, Delaware, Georgia, Illinois, Indiana, Iowa, Kentucky, Maine, Massachusetts, Minnesota, Missouri, New Hampshire, New Jersey, New York, North Carolina, Oklahoma, South Carolina, Tennessee, Vermont, Vircinia, Wisconsin Internal Revenue Service RAIVS Team Stop 6705 S-2 Kansas City, MO 64999

855-821-0094

Alaska, Arizona, California, Colorado, Connecticut, District of Columbia, Hawaii, Idaho, Kansas, Maryland, Michigan, Montana, Nebraska, Nevada, New Mexico, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, South Dakota, Utah, Washington, West Virginia, Wyoming

Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409

855-298-1145

#### Chart for all other transcripts

If you lived in or your business was in:

Mail or fax to:

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the

Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409

855-298-1145

Connecticut, Delaware,
District of Columbia,
Georgia, Illinois, Indiana,
Kentucky, Maine, Maryland,
Massachusetts, Michigan,
New Hampshire, New
Jersey, New York, North
Carolina, Ohio, Pennsylvania,
Rhode Island, South
Carolina, Tennessee,
Vermont, Virginia, West

Virginia, Wisconsin

Northern Mariana Islands.

the U.S. Virgin Islands.

A.P.O. or F.P.O. address

Internal Revenue Service RAIVS Tearn Stop 6705 S-2 Kansas City, MO 64999

855-821-0094



### **EQUAL CREDIT OPPORTUNITY ACT NOTICE**

Special Purpose Credit Program Notice

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal Agency that monitors compliance with this law concerning this company is the Federal Trade Commission, with offices at: FTC Regional Office for the Western region, 600 Pennsylvania Ave., NW Washington DC 20580 or Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

You need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so. However, because we operate a Special Purpose Credit Program, we may request and require, in order to determine an applicant's eligibility for the program and the affordable mortgage amount, information regarding the applicant's marital status; alimony, child support, and separate maintenance income; and the spouse's financial resources.

Accordingly, if you receive income from these sources and do not provide this information with your application, your application will be considered incomplete and we will be unable to invite you to participate in the Habitat program.

Borrower Name:
Borrower Signature:
Date:
Co-Borrower Name:
Co-Borrower Signature:
Date:



# **Privacy Statement and Notice**

At Pikes Peak Habitat for Humanity, we are committed to keeping your information private. We recognize the importance applicants, program families, tenants, and homeowners place on the privacy and confidentiality of their information. While new technologies allow us to more efficiently serve our customers, we are committed to maintaining privacy standards that are synonymous with our established and trusted name.

When collecting, storing, and retrieving applicant, program family, and homeowner data – such as tax returns, pay stubs, credit reports, employment verifications and payment history – internal controls are maintained throughout the process to ensure security and confidentiality.

We collect nonpublic personal information about you from the following sources:

- Information we receive from you on applications or other form
- Information about your transactions with us or others
- Information we receive from a consumer reporting agency

We may disclose the following kinds of nonpublic personal information about you:

- Information we receive from you on applications or other forms, such as your name, address, social security number, assets, and income
- Information about your transactions with us or others such as your loan balance and payment history
- Information we receive from a consumer reporting agency such as your credit worthiness and credit history

Pikes Peak Habitat for Humanity employees and volunteers are subject to a written policy regarding confidentiality, and access to applicant data is restricted to staff and volunteers on an as-needed basis. Information is used for lawful business purposes and is never shared with third parties without your consent, except as permitted by law. As permitted by law, we may disclose nonpublic personal information about you to the following types of third parties:

- Financial service providers, such as mortgage servicing agents
- Credit reporting agencies
- Nonprofit organizations, government entities, or other subsidy providers

If you prefer that we do not disclose non-public personal information about you to nonaffiliated third parties, you may opt out of those disclosures, that is, you may direct us not to make those disclosures (other than disclosures permitted by law). If you wish to opt out of disclosures to nonaffiliated third parties, you may call Pikes Peak Habitat for Humanity at (719) 475-7800.