

Financial Assistance Application



DOCUMENT CHECKLIST

Loan Number(s): _____

Please submit the following information to be considered for Assistance:

- Hardship letter/Hardship Affidavit: (A detailed letter explaining what caused your financial problems)
- Must be signed and dated by all borrowers.
- Verification of all income you have listed on the Financial Statement Form. (Wages, Social Security Award Letter, Disability, Child/Alimony income (Divorce Decree), Profit & Loss statement, Rental/Leases Agreements, 401K, IRA, Brokerage Account if applicable etc...)
- If you are currently working, we need copies of your last two (2) pay stubs.
- If you are currently collecting unemployment, copies of your last two (2) unemployment paystubs and the unemployment award letter or unemployment extension letter.
- If you are self-employed, please provide a Year-to-Date profit and loss statement.
- If any of your income is from child/alimony support, rental, social security, disability please provide paperwork to verify this income. (Acceptable forms of verification include: Court orders, Divorce Decree, Award letters or similar documents.)
- Copy of your signed federal tax returns (All Pages Required) for the last two (2) years.
- Signed Copy of your 4506-T Form. *Must be included even though providing copies of your tax returns*
- Copy of your bank statements for the last two (2) months. (All Pages Required)
- Copy of your most recent Property & School Tax Bill & Homeowners Insurance Statement.
- If you have hired a third party to represent you during the loss mitigation review, please complete the attached Third-Party Authorization and Agreement to Release.

If you currently have a purchase offer for a short sale, please forward the following documentation in addition to the documents listed above:

- Sales & Purchase Agreement (signed by buyer and seller).
- Net Sheet or proposed Settlement Statement, showing itemized breakdown of all costs related to the sale transaction (i.e., realtor's commissions and closing costs).
- Listing Agreement(s).
- Copy of buyer's earnest money check deposit.
- Copy of buyer's loan approval letter.
- Settlement/Payoff letter from 2nd lien holder. (If applicable)

Please Note: In order to review for a possible short sale you must presently have a purchase offer. If you DO NOT presently have an offer, please wait to make your request.

Upon our receipt of all of the required items listed above you will receive confirmation within 5 days via mail. Please be advised that an Appraiser will contact you to schedule an appointment for an inspection of your property; this appraisal will be of no cost to you unless you are otherwise informed by the Bank.

Please provide the name and phone number of a contact person who can schedule the appointment and accompany the Appraiser:

Name: _____
Print Signature

Phone #: _____ Alternate Phone #: _____

If this inspection has not been scheduled to take place within **5 days of the confirmation date**, then this application will be considered INCOMPLETE.

Please send all the required information and documentation at the same time. Please be advised that in order to determine the best possible course of action for your situation, we may need to request additional or updated information or documentation throughout the course of our review.

Mail:
NBT Bank, N.A.
Holly Vorhies (607) 337-6591
52 South Broad Street
Norwich, NY 13815

Fax: Attn Holly V 1-607-336-8252
E-mail: HomeLoanHelp@nbtbank.com

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BORROWER INFORMATION (To avoid delays please make sure all pages are complete and accurate.)

Borrower	Co-Borrower
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Name: _____	Name: _____
Social Security #: _____	Social Security #: _____
Phone #: _____	Phone #: _____
Email: _____	Email: _____

I want to: Keep the property Sell the property

The Property is my: Primary residence Second Home Investment

The property is: Owner Occupied Renter Occupied Vacant

Number of people in household: _____

Mailing Address: _____

Property Address (if same as mailing address, write "same") _____

Is the property listed for sale? Yes No

If yes, what was the listing date? _____

Have you received an offer on the property? Yes No

Date of Offer: _____ Amount of Offer: _____

Agent's Name: _____

Agent's Phone #: _____

For sale by Owner? Yes No

Who pays the real estate tax bill on your property?

I do Lender Condo or HOA

Are the taxes current? Yes No

If No: Years Delinquent _____ \$ Amount: _____

Also please provide copy of delinquent tax notice if available

Please note: If your taxes are not escrowed; it is our Bank's requirement to add Escrow through any Modification that is completed.

Condo or HOA Fees? Yes No \$ _____ per month

Have you filed for bankruptcy? Yes No

If yes: Chapter 7 Chapter 13

File Date: _____

Name of Attorney: _____

Phone # of Attorney: _____

Additional Liens/Mortgages or Judgements on this property (If not applicable write "None").

Have you contacted a credit counseling agency for help?

Yes No

If yes, please complete the following:

Counselor's Name: _____

Agency Name: _____

Counselor's Phone #: _____

Counselor's Email: _____

Who pays the hazard insurance premium for your property?

I do Lender Condo or HOA

Is the policy current? Yes No

Insurance Company Name: _____

Insurance Company Phone #: _____

Has your bankruptcy been discharged? Yes No

Bankruptcy case number: _____

Lien Holder's Name/Service	Balance	Phone Number	Loan Number

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HARDSHIP AFFIDAVIT (Provide a written explanation describing the specific nature of your hardship.)

I am requesting review of my current situation to determine whether I qualify for temporary or permanent mortgage relief options.

Date Hardship Began: _____

I believe that my situation is:

- Short-term (under 6 months)
- Medium-term (6-12) months
- Long-term or Permanent Hardship (greater than 12 months)

I am having difficulty making my monthly payment because of the reasons set forth below: (Please check all that apply and submit required documentation demonstrating your hardship). Please note that all required hardship documentation is required in addition to the documents set forth on the document checklist.

If your hardship is:	Then the Required Hardship Documentation is:
<ul style="list-style-type: none"> • Unemployment • Underemployment • Income reduction (e.g., elimination of overtime, reduction in regular working hours, or a reduction in base pay) • Divorce or legal separation; Separation of Borrowers unrelated by marriage, civil union or similar domestic partnership under applicable law • Death of a borrower or death of either the primary or secondary wage earner in the household or dependent family member • Long-term or permanent disability; Serious illness of a borrower /co-borrower or dependent family member • Disaster (natural or manmade) adversely impacting the property or Borrower's place of employment • Distant employment transfer • Excessive Obligations • Business Failure • Payment Increase 	<ul style="list-style-type: none"> • A copy of your benefits statement or letter detailing the amount, frequency and duration of your unemployment benefits. • Documentation is listed on Document Checklist • Documentation is listed on Document Checklist • Divorce decree signed by the court OR • Separation agreement signed by the court or that non-occupying Borrower has a different address OR • Recorded quitclaim deed evidencing that the non-occupying Borrower OR Co-Borrower has relinquished all rights to the property • Death certificate OR • Obituary or newspaper article reporting the death • Doctor's certificate of illness or disability OR • Medical bills OR • Proof of monthly insurance benefits or government assistance • Insurance claim OR • Federal Emergency Management Agency grant or Small Business Administration loan OR • Borrower or Employer property located in a federally declared disaster area • Proof of transfer • Documentation listed on Document Checklist • Tax return from the previous year (including all schedules) AND • Proof of business failure supported by one of the following: <ul style="list-style-type: none"> • Bankruptcy filing for the business; OR • Two months recent bank statements for the business account evidencing cessation of business activity; OR • Most recent signed and dated quarterly or year-to-date profit and loss statement • Documentation listed on Document Checklist

Other (explain):

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WRITTEN EXPLANATION (Describing the specific nature of your hardship).

Borrower Signature: _____

Date: _____

Co-Borrower Signature: _____

Date: _____

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INCOME/EXPENSES FOR HOUSEHOLD

EMPLOYMENT INFORMATION

Borrower

Monthly Income: _____

Employer 1 Name: _____

Employer Address: _____

Employment Start Date: _____

Employer 2 Name: _____

Employer Address: _____

Employment Start Date: _____

Are you self Employed? Yes No

Co-Borrower

Monthly Income: _____

Employer 1 Name: _____

Employer Address: _____

Employment Start Date: _____

Employer 2 Name: _____

Employer Address: _____

Employment Start Date: _____

Are you self Employed? Yes No

OTHER INCOME

Is there a person not on the mortgage note who lives in the residence and contributes financially to the household? Yes No

If yes, complete the following:

First and Last Name: _____

Monthly amount and/or contribution to the household: \$ _____

Income

Monthly Household Income: \$ _____ Less: Federal @ State Tax, FICA \$ _____ IRA/Keogh Account: \$ _____

Monthly Gross Income: \$ _____ Less: Other Deductions \$ _____ Retirement, 401(k), 403(B)s, etc, \$ _____

Overtime: \$ _____ Other: \$ _____ CDs: \$ _____

Child Support/Alimony*: \$ _____ Total Gross Income: \$ _____ Stocks/Bonds: \$ _____

Taxable SS benefits or other monthly income from annuities or retirement plans: \$ _____ **Household Assets** (associated with the property and/or borrower) _____ Other Cash on Hand : \$ _____
 Tips, Commissions, bonus and self-employed income: \$ _____ Checking Account(s) \$ _____

Rent Received \$ _____ Checking Account(s) \$ _____ Other Real Estate \$ (Estimated Value) _____

Unemployment Income: \$ _____ Savings/Money Market \$ _____ Total Assets \$ _____

Food Stamps/Welfare: \$ _____

*Notice: Alimony, Child Support, or separate maintenance income need not be revealed if you choose not to have it considered for repayment.

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Monthly Household Expenses	Amount	Remaining Balance	Comments
Mortgage			
2nd Mortgage			
Rent/Other Mortgage			
Home Equity 1			
Home Equity 2			
HOA/Fees/Dues			
Alimony/Child Support Payments			
Child/Dependent/Elderly Care			
Entertainment			
Insurance (auto, health, life)			
Pet Expenses			
Groceries/Toiletries			
Car Expenses (gas, maint., etc.)			
Automobile Loan(s), List All:			
Credit Card (1) _____			
Credit Card (2) _____			
Doctor/Medical Bills			
Student Loans			
Personal Loans			
Utilities			
Cable TV/Satellite			
Electricity			
Natural Gas/Oil/Pellets/Wood			
Telephone/Cell Phone			
Water/Sewer			
Mortgage			
Internet			
Other (please list all examples: Spending money, Lunch money, Tuition, Tithing, etc.)			
Total			

*Any additional items/expenses per month – not listed, please feel free to include on a separate sheet of paper and include with packet.

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THIRD PARTY AUTHORIZATION AND AGREEMENT TO RELEASE

Please complete and return if you want us to speak with any designated third party on your behalf.

Account Number: _____ Name: _____

Property Address: _____



Before you sign this authorization, please.....

- Beware of any person or organization that asks you to pay a fee in exchange for housing counseling services or modification of a delinquent loan.
- Beware of anyone who says they can "save" your home if you sign or transfer over the deed to your house.
- Do not sign over the deed to your property to any organization or individual other than as required by your mortgage company in connection with forgiving the debt.
- Never make your mortgage payments to anyone other than your mortgage company without their written approval.

NOTE: No information concerning your account will be provided until we have received this executed document. The **authorization needs to be in the name of an individual (not a company)** and a form needs to be completed for each authorized individual. All parties on the Mortgage/Loan/Note/or both must sign.

I/we do hereby authorize my lender/mortgage servicer to release or otherwise provide to:

_____ of _____ my
Name Company Name

Relationship Phone # Email

All Public and Non-Public personal financial information contained in my loan account which may include, but is not limited to, loan balance, final payoff statement, loan payment history, payment activity, and/or property information.

I/we understand that the lender/ mortgage servicer will take reasonable steps to verify the identity of the third party authorized above, but will have no responsibility or liability to verify the true identity of the requestor when he/she asks to discuss my/our account or seeks information about my account. Further, the lender/ mortgage servicer shall have any responsibility or liability for what the requestor may do with my/our information he/she obtains concerning my/our account.

I/we do hereby indemnify and forever hold harmless the lender/mortgage servicer from all actions and causes of actions, suits, claims, attorney fees, or demands against the lender/ mortgage servicer which I/we and/or my heirs may have resulting from the lender/ mortgage servicer discussing my/our loan account and/or providing any information concerning the loan account to the above named requestor or person identifying themselves to be that requestor.

My/our agreement to this Authorization and the terms of the Release as stated above are endorsed by my/our signature(s) below. Please sign, date, and return with the Financial Form

Borrower Print Name Borrower Signature Date

Co-Borrower Print Name Co-Borrower Signature Date

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THIRD PARTY AUTHORIZATION AND AGREEMENT TO RELEASE

I/we agree as follows: My/our Lender/Mortgage Servicer may discuss, obtain and share information about my/our mortgage and financial situation with third parties regarding a possible alternative to foreclosure. Negotiations for a possible foreclosure alternative will not constitute a waiver of or defense to my Lender's/Mortgage Servicer's right to commence or continue any foreclosure or other collection action, and an alternative to foreclosure will be provided only if an agreement has been approved in writing by my Lender/Mortgage Servicer. The information herein is an accurate statement of my financial status.

I consent to the servicer obtaining a current credit report for the borrower and co-borrower.

It is a federal crime punishable by fine or imprisonment, or both to knowingly make any false statements concerning any of the above facts as applicable under the provisions of title 18, United States Code, Section 1001. et seq.

Submitted this _____ day of _____, 20 _____

By _____ Date: _____

Signature of Borrower: _____

By _____ Date: _____

Signature of Co-Borrower: _____

****Please be advised that when requesting assistance on your loan(s); if we are able to modify your loan – this may affect current insurance policies you have on your existing loans (such as your policy being canceled and/or not covering the new terms/money added to your loan through the modification). It is your responsibility to inquire on this prior to agreeing to any modification proposals provided to you.**

****Please also be advised that any loans being reviewed for a Modification must have escrow included; if your taxes are not escrowed – it will be a requirement through the Modification to have them escrowed**

Right to Receive a Copy of an Appraisal Disclosure



We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly provide you a copy of any appraisal, even if your loan does not close.

You can pay for an additional appraisal for your own use and at your own cost.

Request for Transcript of Tax Return

OMB No. 1545-1872

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

Tip. Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return.	2b Second social security number or individual taxpayer identification number if joint tax return
3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
4 Previous address shown on the last return filed if different from line 3 (see instructions)	
5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.	

NBT Bank, N.A., Attn: Melissa Eaton, 52 S. Broad St., Norwich NY 13815 - Phone # (607) 337-6012

Caution. If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your IRS transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

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

a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days

b Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days

c Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days

7 Verification of Nonfiling, which is proof from the IRS that you **did not** file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days

8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2010, filed in 2011, will not be available from the IRS until 2012. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days

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

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

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

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

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** For transcripts being sent to a third party, this form must be received within 120 days of the signature date.

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

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

What's New

The IRS has created a page on IRS.gov for information about Form 4506-T at www.irs.gov/form4506. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

General Instructions

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

Purpose of form. Use Form 4506-T to request tax return information. You can also designate (on line 5) a third party to receive the information. Taxpayers using a tax year beginning in one calendar year and ending in the following year (fiscal tax year) must file Form 4506-T to request a return transcript.

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

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

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

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

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

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

If you filed an individual return and lived in:	Mail or fax to the "Internal Revenue Service" at:
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, or A.P.O. or F.P.O. address	RAIVS Team Stop 6716 AUSC Austin, TX 73301 512-460-2272
Alaska, Arizona, Arkansas, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	RAIVS Team Stop 37106 Fresno, CA 93888 559-456-5876
Connecticut, Delaware, District of Columbia, Florida, Georgia, Maine, Maryland, Massachusetts, Missouri, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia	RAIVS Team Stop 6705 P-6 Kansas City, MO 64108 816-292-6102

Chart for all other transcripts

If you lived in or your business was in:	Mail or fax to the "Internal Revenue Service" at:
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409 801-620-6922
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250 859-669-3592

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

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

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

Note. If the address on lines 3 and 4 are different and you have not changed your address with the IRS, file Form 8822, Change of Address.

Line 6. Enter only one tax form number per request.

Signature and date. Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the information be sent to a third party, the IRS must receive Form 4506-T within 120 days of the date signed by the taxpayer or it will be rejected. Ensure that all applicable lines are completed before signing.

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

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

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

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

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

Privacy Act and Paperwork Reduction Act

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

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

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506-T will vary depending on individual circumstances. The estimated average time is: **Learning about the law or the form**, 10 min.; **Preparing the form**, 12 min.; and **Copying, assembling, and sending the form to the IRS**, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506-T simpler, we would be happy to hear from you. You can write to:

Internal Revenue Service
Tax Products Coordinating Committee
SE:W:CAR:MP:T: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.