

BUSINESS CREDIT APPLICATION WITH NOTICE OF APPLICANTS' RIGHTS

See Reverse Side for Joint Applicants

APPLICANT NAME AND BUSINESS ADDRESS		LENDER NAME AND ADDRESS	
		TELEPHONE NUMBER:	
		PERSON OR OFFICE TO CONTACT:	
SOCIAL SECURITY OR TAX I.D. NUMBER	BUSINESS TYPE:	BUSINESS PHONE NUMBER	E-MAIL ADDRESS
BRIEF DESCRIPTION OF BUSINESS		OWNERSHIP OF BUSINESS	
AMOUNT OF LOAN REQUESTED	PURPOSE OF LOAN		
\$			
REQUESTED REPAYMENT TERMS		SOURCE(S) OF FUNDS TO REPAY LOAN	
DESCRIPTION AND OWNERSHIP OF COLLATERAL OFFERED			

OFFICERS OR PRINCIPALS			
NAME	TITLE	HOME ADDRESS	HOME PHONE NUMBER

OUR PRINCIPAL FINANCIAL INSTITUTION IS:	SERVICES PRESENTLY USED: <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account <input type="checkbox"/> Safe Deposit <input type="checkbox"/> Cert. of Deposit <input type="checkbox"/> Loan <input type="checkbox"/>	OTHER FINANCIAL INSTITUTIONS USED:
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OUTSTANDING DEBTS OF APPLICANT (List All)				
TO WHOM DUE - INDICATE ADDRESS	DATE OF NOTE	ORIGINAL DEBT	INT. RATE	BALANCE DUE
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
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		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$

A complete, current and signed Financial Statement of Applicant must be attached. (Additional data and income information may also be required).

SIGNATURE

Everything stated in this Application and the Financial Statement of the Applicant attached hereto is correct to the best of undersigned Applicant's knowledge. It is understood that you will retain this Application whether or not it is approved. You are authorized to check credit and business experience and to answer questions about your credit experience with Applicant. The undersigned also acknowledges receipt of a copy of this Application and the Notice of Right to Request Specific Reason(s) for Credit Denial on the reverse side hereof.

APPLICANT'S SIGNATURE	TITLE	DATE

CO-APPLICANT NAME AND BUSINESS ADDRESS		JOINT APPLICANT STATEMENT
		If you intend to apply for joint credit, please initial here: <div style="display: flex; justify-content: space-around;"> _____ Applicant _____ Co-Applicant </div>
SOCIAL SECURITY NUMBER	BUSINESS PHONE NUMBER	DESCRIPTION/OWNERSHIP OF COLLATERAL
SOURCE(S) OF FUNDS TO REPAY LOAN		

OUTSTANDING DEBTS OF CO-APPLICANT (List All)				
TO WHOM DUE - INDICATE ADDRESS	DATE OF NOTE	ORIGINAL DEBT	INT. RATE	BALANCE DUE
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$
		\$	%	\$

A complete, current and signed Financial Statement of Co-Applicant must be attached. (Additional data and income information may also be required).

SIGNATURE

Everything stated in this Application and the Financial Statement of the Co-Applicant attached hereto is correct to the best of undersigned Co-Applicant's knowledge. It is understood that you will retain this Application whether or not it is approved. You are authorized to check credit and business experience and to answer questions about your credit experience with Co-Applicant. The undersigned also acknowledges receipt of a copy of this Application and the Notice of Right to Request Specific Reason(s) for Credit Denial.

CO-APPLICANT'S SIGNATURE

DATE

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

NOTICE OF RIGHT TO REQUEST SPECIFIC REASON(S) FOR CREDIT DENIAL

If your Application for Business Credit should be denied, you have the right to a written statement of the specific reason(s) for such denial. To obtain the Statement of Reason(s), please contact the individual or office listed under Lender Name and Address on inverse side of this form within 60 days from the date you are notified of our decision.

We will provide you with a written statement of reasons for denial within 30 days from the date of receipt of your request.

EQUAL CREDIT OPPORTUNITY ACT 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 administers compliance with law concerning this creditor is:

BINDING ARBITRATION AGREEMENT
WITH _____ THE COMMERCIAL BANK _____ ("AGREEMENT")

1. The Parties to this Agreement are the financial institution named above ("Bank"), the undersigned and either's present, future, or past heirs, personal representatives, representatives, agents, employees, members, officers, directors, partners, managers, affiliated companies, successors, assigns, subsidiaries, and members ("Parties"). In consideration of the loans, benefits, agreements, deposit accounts, or other services received directly or indirectly by the undersigned, as evidenced by previous, concurrent, or future documents, loans, accounts, or other services ("Bank Documents") from Bank, the Parties enter into this Agreement.
2. DEFINITIONS.
 - 2.1. "Arbitration" is a method of dispute resolution in which an arbitrator, who is an independent, neutral party, gives a binding decision after hearing the positions of the Parties.
 - 2.2. "Claim" and "Claims" shall have the broadest definition possible, and include initial claims, counterclaims, cross-claims, and third-party claims based upon, but not limited to, the application of this Agreement, contract, tort, consumer rights, fraud, other intentional torts, constitution, statute, regulation, ordinance, common law, and any other matter at law or equity between the Parties.
 - 2.3. "Dispute" and "Disputes" shall refer to all disputes, Claims (as defined above), actions, breaches, disagreements, or controversies arising out of, or related to, or based upon any prior, current, or future agreement, Bank Documents, loan, account, service, activity, contract, transaction (proposed or actual), event, or occurrence, whether individual or joint.
 - 2.4. Any terms that are not defined in this Agreement shall be defined as in the applicable document with Bank.
3. ARBITRATION PROVISIONS.
 - 3.1. The Parties acknowledge that the transactions contemplated by this Agreement involve interstate commerce; and
 - 3.2. The Parties agree that all Disputes (other than the ARBITRATION EXCEPTIONS listed below), shall be resolved by binding arbitration upon request of either Party at any time, notwithstanding the prior filing by either Party of any legal action, except as otherwise provided in this Agreement or as agreed to in writing and executed by the Parties.
 - 3.3. Any Dispute about the arbitrability, validity, breadth, or scope of this Agreement or the terms and clauses herein, or the entering into of this Agreement shall be decided by the arbitrator in accordance with this Agreement.
 - 3.4. It is understood and agreed that arbitration, and the decisions made by the arbitrator, pursuant to this Agreement shall be binding upon the Parties. However, nothing in the Bank Documents or this Agreement shall preclude any of the Parties from seeking injunctive relief from a court of competent jurisdiction.
4. ARBITRATION EXCEPTIONS.
 - 4.1. The arbitration provisions in this Agreement do not apply to any claim or controversy arising out of a consumer credit transaction secured by a dwelling (including a home equity line of credit secured by the consumer's principal dwelling).
 - 4.2. The arbitration provisions in this Agreement may not apply if the undersigned is a covered member or dependent as defined in the Military Lending Act, 10 U.S.C. 987, if prohibited by said law.
 - 4.3. No act to enforce a mortgage or deed of trust, security agreement, pledge, or any other instrument securing any obligation to Bank, or to take or dispose of any property securing any obligation to Bank ("Collateral") shall be prohibited by this Agreement; nor shall any such act constitute a waiver of Bank's right to compel arbitration under this Agreement.
 - 4.3.1. These arbitration exceptions include, without limitation, obtaining injunctive relief or a temporary restraining order, garnishment, set-off, invoking a power of sale under any deed of trust or mortgage, obtaining adequate protection or relief from the automatic stay or similar actions in bankruptcy proceedings, detinue, interpleader, obtaining a writ of attachment or imposition of a receiver, or exercising any rights relating to Collateral, including taking or disposing of such Collateral through self-help remedies or by judicial process pursuant to Article 9, or other provisions, of the Mississippi Uniform Commercial Code or other applicable law.
 - 4.3.2. However, any Disputes concerning the lawfulness or reasonableness of any act, or exercise of any right, concerning any Collateral, including any Dispute involving rescinding, reforming, or otherwise modifying any Bank Documents, shall also be arbitrated, provided, however, that no arbitrator shall have the right or the power to enjoin or restrain any act of any party.
 - 4.4. The Parties do not have the right to act as a class representative or participate as a member of a class of claimants with respect to any Dispute submitted to arbitration ("Class Action Waiver"). The Parties acknowledge that the Class Action Waiver is material and essential to the arbitration of any Disputes between the Parties and is non-severable from this Agreement to arbitrate Disputes. If the Class Action Waiver is limited, voided, or found unenforceable, then the Parties agreement to arbitrate (except for this sentence) shall be null and void with respect to such proceeding, subject to the right to appeal the limitation or invalidation of the Class Action Waiver. **The Parties acknowledge and agree that under no circumstances will a class action Dispute be arbitrated.** Such forbearance to enforce this Agreement to arbitrate shall not constitute a waiver of any rights under this Agreement except to the extent stated herein.
 - 4.5. No Party shall be precluded from seeking remedies in small claims court for Disputes within the scope of its jurisdiction; however, if the Dispute is transferred, removed, or appealed to a different court, any of the Parties then have the right to choose arbitration under the terms of this Agreement.

5. APPLICABLE DOCTRINES.

- 5.1. The statute of limitations, estoppel, statute of frauds, waiver, laches, other defenses, privileges, including, but not limited to, the attorney-client privilege, and other similar doctrines under Mississippi law that would otherwise be applicable in an action brought by a Party shall apply in any arbitration proceeding, and the commencement of an arbitration proceeding shall be deemed the commencement of an action for these purposes.
- 5.2. The arbitrator shall receive and consider motions for summary judgment, permit and provide a reasonable time of not less than one-hundred and twenty (120) days for discovery, including depositions, interrogatories, requests for admissions, document production, and as otherwise provided under the Mississippi Rules of Civil Procedure.
- 5.3. Applicable Mississippi law and the Mississippi Rules of Evidence shall govern, including, but not limited to, burdens, contract terms, and precedent.
- 5.4. Federal law shall govern the enforceability of the arbitration provisions of this Agreement.
- 5.5. The Arbitrator shall provide written, reasoned findings of fact and conclusions of law.
- 5.6. The arbitrator shall resolve any Dispute, including the applicability of this section to the Dispute except for any Dispute challenging the validity of the Class Action Waiver, which shall be decided by the Court.

6. APPOINTMENT OF ARBITRATOR. The Parties shall strive to appoint the arbitrator within fifteen days of the mailing of a demand for arbitration to a Party or the attorney for such Party. If the Parties are unable to agree upon the appointment of an arbitrator within this time period, then the arbitrator shall be selected in accordance with the Rules of the Judicial Arbitration and Mediation Service (“JAMS”). Unless otherwise agreed by the Parties or the undersigned is a consumer and requests arbitration proceedings be conducted in his or her hometown, all arbitration proceedings shall be conducted in the Mississippi County where the Bank’s main office is located.

7. AWARD. The arbitrator shall prepare and sign a written award. The award shall state who prevails, the relief granted, and shall be issued in accordance with the rules of JAMS. The arbitrator may only grant an award that either a Mississippi judge or jury may legally grant. Any court of competent jurisdiction may enter the judgment of the arbitrator’s award. Such judgment shall be enforced as any other judgment under Mississippi law.

8. COSTS AND FEES.

- 8.1. Costs and attorney’s fees will be allocated among the Parties according to the type of Dispute.
 - 8.1.1. Under breach of contract claims, expenses, costs, and attorney fees shall be awarded as provided under the terms of the contract.
 - 8.1.2. For all other Disputes, each Party will bear their own costs, expenses, and attorney fees.
- 8.2. The arbitration filing fees, costs, and expenses of the arbitrator relating to the Dispute will be paid in accordance with the rules of JAMS. Such payments shall be made when requested by the arbitrator or when otherwise required by the rules of JAMS.

9. GOVERNING LAW. Subject to compliance with the terms of this Agreement, the Federal Arbitration Act shall apply to the construction, interpretation, and enforcement of the arbitration provisions of this Agreement. Subject to compliance with the terms of this Agreement, the arbitration of any Dispute shall be governed by the Rules of JAMS applicable to the type and, if applicable, the size of the Dispute. To obtain a copy of the Rules of JAMS, visit www.jamsadr.com.

10. ENTIRE AGREEMENT AND MODIFICATIONS. This Agreement represents the entire understanding between the Parties. The Parties may only amend this Agreement in writing. This Agreement supersedes all prior arbitration agreements between the Parties. The Parties agree that this Agreement is applicable to all Bank Documents and to all Disputes.

11. NUMBER. Whenever used, the singular shall include the plural, and the plural shall include the singular.

12. SEVERABILITY. If any part of this Agreement is declared invalid for any reason, such decision shall not affect the validity of any remaining portion. Only the invalid part shall be struck, and the remaining portion shall remain in force and effect as if this Agreement had been executed with the invalid portion thereof eliminated.

SIGNATURES: By signing below, **THE PARTIES ACKNOWLEDGE THEIR UNDERSTANDING OF, AND AGREE TO, THE TERMS AND CONDITIONS CONTAINED IN THIS BINDING ARBITRATION AGREEMENT** and acknowledge receipt of a copy of this Binding Arbitration Agreement on this the _____ day of _____, _____.

BANK’S SIGNATURE	PARTY’S SIGNATURE(S)

By: _____

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 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. 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 Customer file number (if applicable) (see instructions)	

Note: Effective July 2019, the IRS will mail tax transcript requests only to your address of record. See **What's New** under **Future Developments** on Page 2 for additional information.

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 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. 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 10 business 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 10 business 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 2016, filed in 2017, will likely not be available from the IRS until 2018. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business 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.

| / / | / / | / / | / / |

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

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T. See instructions.

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.

Future Developments

For the latest information about Form 4506-T and its instructions, go to www.irs.gov/form4506t. Information about any recent developments affecting Form 4506-T (such as legislation enacted after we released it) will be posted on that page.

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 below shows two different addresses, send your request to the address based on the address of your most recent return.

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:

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	Internal Revenue Service RAIVS Team Stop 6716 AUSC Austin, TX 73301	855-587-9604
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	Internal Revenue Service RAIVS Team Stop 37106 Fresno, CA 93888	855-800-8105
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	Internal Revenue Service RAIVS Team Stop 6705 S-2 Kansas City, MO 64999	855-821-0094

Chart for all other transcripts

If you lived in or your business was in:

Mail or fax to:

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Washington, West Virginia, Wisconsin, Wyoming, a foreign country, American Samoa, Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the U.S. Virgin Islands, A.P.O. or F.P.O. address	Internal Revenue Service RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409	855-298-1145
Maine, Massachusetts, New Hampshire, New York, Pennsylvania, Vermont	Internal Revenue Service RAIVS Team Stop 6705 S-2 Kansas City, MO 64999	855-821-0094

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 Party — Business.

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

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

Line 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 trust.

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

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