



Auto Financing Checklist

To ensure a prompt response to your request for credit, please provide the following information.

1. Signed Auto Loan Application (attached)
2. Signed Form 4506-C (attached)
3. Signed Form W-9 (attached) (One for each borrower)
4. Fair Lending Notice (attached)
5. Equal Credit Opportunity Act (attached)
6. Privacy Notice (attached)
7. Copy of Driver License(s)
8. Most Recent 3-Months Copy of Checking and/or Saving Account Statement(s)
9. Copy of Purchase Contract
10. Most Recent 3-Years Signed Personal Tax Return
11. Most Recent 3-Years Form W2
12. 3-months Pay Stub
13. Copy of Auto Insurance
14. Resume

If Self-Employed, please also provide the following additional documents:

1. Most Recent 3-Years Signed Business Tax Return
2. Year-to-Date Profit/Loss and Balance Sheet Statements
3. Most Recent 3-Months Business Bank Statement

After completion, please fax the above requested documents to us at **(562) 693-1241** or mail to **American Finance House Lariba. attn: Credit Department at 15141 E. Whittier Blvd. Suite 400, Whittier, CA 90603.**

Applicant

Co-applicant

Date:_____

Date:_____

Auto Loan Application

SECTION 1: LOAN INFORMATION

Please read before completing this application: Regardless of your marital status you may apply for credit in your name alone.

► **If you are unmarried or separated and**

- ☐ Applying in your name alone: complete the information about you and sign.
- ☐ Applying jointly with another person: complete the information about you, sign where indicated and have the other person complete a separate financial statement

► **If you are married, not separated and relying on community property (such as your salary or that of your spouse) and**

- ☐ Applying in your name alone: complete the information about you and your spouse, and sign where indicated;
- ☐ Applying jointly with your spouse: both complete the application and sign where indicated
- ☐ Applying jointly with a person other than your spouse: complete the information about you and your spouse, sign where indicated, and have the other person complete a separate financial statement.

► **If you are married, not separated, and relying solely on separate property and**

- ☐ Applying in your name alone: complete the information about you, provide documentation of separate property, and sign where indicated:
- ☐ Applying jointly with a person other than your spouse: complete the information about your, sign where indicated, and have the other person complete a separate financial statement.

PURCHASE PRICE: _____ LOAN AMOUNT: _____ LOAN TERM (Years): ☐ 3 ☐ 4 ☐ 5 (Max)

Dealership Name: _____ CAR MAKE/MODEL: _____ CAR YEAR: _____

Contact Email: _____ Contact Phone: _____

SECTION 2: APPLICANT INFORMATION

First Name _____ Middle Initial _____ Last Name _____

Social Security Number _____ Date of Birth (MM/DD/YY) _____ Place of Birth _____

Legal Status: ☐ US Citizen ☐ Permanent Resident ☐ Other _____ Driver License Number _____ State _____

Current Street Address (PO and APO boxes are not valid) _____

City _____ State _____ Zip _____ Residential Status: ☐ Rent ☐ Home Owner

Time at Residence: _____ years _____ months Monthly Rent _____ Cell Phone _____

Home Phone _____ Work Phone _____ Email Address _____

SECTION 3: CO-APPLICANT INFORMATION

First Name _____ Middle Initial _____ Last Name _____

Social Security Number _____ Date of Birth (MM/DD/YY) _____ Place of Birth _____

Legal Status: ☐ US Citizen ☐ Permanent Resident ☐ Other _____ Driver License Number _____ State _____

Current Street Address (PO and APO boxes are not valid) _____

City _____ State _____ Zip _____ Residential Status: ☐ Rent ☐ Home Owner

Time at Residence: _____ years _____ months Monthly Rent _____ Cell Phone _____

Home Phone _____ Work Phone _____ Email Address _____

SECTION 4: PREVIOUS ADDRESS INFORMATION

Previous Street Address (PO boxes are not valid) _____ City _____ State _____

Zip _____ Time at Previous Address: _____ years _____ months

SECTION 5: EMPLOYMENT INFORMATION

APPLICANT: Employer Name _____ Job Title _____ Gross Monthly Income _____

Time at Employer _____ years _____ months Employer Telephone # _____

Employer Street Address _____ City _____ State _____ Zip _____

CO-APPLICANT: Employer Name _____ Job Title _____ Gross Monthly Income _____

Time at Employer _____ years _____ months Employer Telephone # _____

Employer Street Address _____ City _____ State _____ Zip _____

SECTION 6: FINANCIAL INFORMATION

Do you have a Checking Account? ☐ Yes ☐ No Account Balance _____

Do you have a Saving Account? ☐ Yes ☐ No Account Balance _____

Other Monthly Income* _____ Other Income Source* _____

*Other income including alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

SECTION 7: PERSONAL HISTORY INFORMATION

IT IS IMPORTANT THAT THE NEXT THREE QUESTIONS BE ANSWERED COMPLETELY. AN ARREST OR CONVICTION RECORD WILL NOT NECESSARILY DISQUALIFY YOU; HOWEVER, AN UNTRUTHFUL ANSWER WILL CAUSE YOUR APPLICATION TO BE DENIED.

IF YOU ANSWER, "YES" TO 7, 8, OR 9, FURNISH DETAILS ON A SEPARATE SHEET. INCLUDE DATES, LOCATION, FINES, SENTENCES, WHETHER MISDEMEANOR OR FELONY DATES OF PAROLE / PROBATION, UNPAID FINES OR PENALTIES, NAME (S) UNDER WHICH CHARGED, AND ANY OTHER PERTINENT INFORMATION.

1. Are you presently under indictment, on parole or probation?

Applicant: ☐ Yes, indicate date parole or probation is to expire _____ ☐ No

Co-Applicant: ☐ Yes, indicate date parole or probation is to expire _____ ☐ No

2. Have you ever been charged with and or arrested for any criminal offense other than a minor motor vehicle violation? Include offenses, which have been dismissed, discharged, or not prosecuted. (All arrests and charges must be disclosed and explained on an attached sheet.)

Applicant: ☐ Yes ☐ No **Co-Applicant:** ☐ Yes ☐ No

3. Have you ever been convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor vehicle violation?

Applicant: ☐ Yes ☐ No **Co-Applicant:** ☐ Yes ☐ No

The information on this application is given to American Finance House Lariba for the purpose of obtaining or continuing an extension of credit. We represent and warrant that the information provided is accurate and complete in all respects. We acknowledge that the lender is relying on our statement in this application and that the statements will be incorporated by reference into any agreement we may enter into with the Lender. We also realize that failure to completely and accurately disclose the information requested would constitute a breach of any agreement that we may enter into with Lender.

We authorize American Finance House Lariba or any other credit bureau or investigative agency employed by the company to check references, credit, and employment history under any of the names and social security numbers of any and all of the owners and/or officers provided. We understand that a consumer report may be requested in connection with this credit application. If requested, we may be informed whether or not a consumer report(s) were requested, and if such reports were requested, we will be informed of the name and address of the consumer reporting agency that furnished the report. American Finance House Lariba may at any time in the future obtain additional credit reports to review my account.

Applicant Signature

Date

Co-Applicant Signature

Date



PRIVACY FORM

FACTS		WHAT DOES AMERICAN FINANCE HOUSE LARIBA (AFHL) DO WITH YOUR PERSONAL INFORMATION?
Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.	
What?	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> • Social Security number and income • Income • Account balance • Payment history • Credit history and credit scores <p>When you are <i>no longer</i> our customer, we continue to share our information as describe in this notice.</p>	
How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons AFHL chooses to share; and whether you can limit this sharing.	
Who we are		
Who is providing this notice?		American Finance House LARIBA (AFHL)
What we do		
How does AFHL protect my personal information?		To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does AFHL collect my personal information		<p>We collect your personal information, for example, when you</p> <ul style="list-style-type: none"> • open an account or deposit money • pay your bills or apply for a loan • apply for a loan • use your credit card or debit card <p>We also collect your personal information from others, such as credit affiliates, or other companies.</p>
Why can't I limit all sharing?		<p>Federal law gives you the right to limit only</p> <ul style="list-style-type: none"> • sharing for affiliates' everyday business purposes - information about your creditworthiness • affiliates from using your information to market to you • sharing for nonaffiliates to market to you <p>State laws and individual companies may give you additional rights to limit sharing.</p>
What happens when I limit sharing for an account I hold jointly with		Your choice will apply to everyone on your account - unless you tell us otherwise.
Definitions		
Affiliates		Companies related by common ownership or control. <i>Bank of Whittier, N.A</i>
Nonaffiliates		Companies not related by common ownership or control. They can be financial and nonfinancial companies. <i>AFHL does not share with nonaffiliates so they can market to you</i>
Joint Marketing		A formal agreement between nonaffiliated financial companies that together market financial products or services to you. <i>AFHL doesn't jointly market</i>
Reasons we can share your personal information		
For our everyday business purposes - such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes - to offer our products and services to you	No	No
For joint marketing with other financial companies -	No	We don't share
For our affiliates everyday business purpose - information about your transactions and experiences	No	We don't share
For our affiliates everyday business purpose - information about your creditworthiness	No	We don't share
For our affiliates to market to you	No	We don't share
For nonaffiliates to market to you	No	We don't share
Questions?		
Contact us at 15141 E. Whittier Blvd., Suite 400, Whittier, CA 90603, call (562) 693-1241 Ext-0 or go to WWW.LARIBA.COM		



Electronic Communications Disclosure and Consent

Please read this information carefully, print and retain a copy for your reference. This document is provided in accordance with the Electronic Signatures in Global and National Commerce Act (E-Sign Act), which was signed into law on June 30, 2000.

This Electronic Communications Disclosure and Consent (collectively, “Electronic Communications”) describes how American Finance House Lariba delivers communications to you electronically. The Company may amend this disclosure at any time by posting a revised version on our website (www.lariba.com). The revised version will be effective at the time the company posts it. In addition, if the revised version includes a substantial change, we will provide you with 30 days’ prior notice by posting notice of change on our Homepage.

Introduction

This Electronic Communications Disclosure and Consent covers all of your accounts, products, and services with American Finance House Lariba either currently or in the future. This includes, but is not limited to, the following account, product, and service types:

- Deposit accounts (e.g. checking, saving, time of certificate of deposit, etc.),
- Credits (e.g. mortgage, auto loan, commercial real estate loan, etc.),
- Online services (e.g. online banking, bill pay, etc.), and
- Other services (e.g. wire transfer, etc.).

The words “I”, “you” and “your” means each account holder, product owner and/or service user identified on an account, product or service.

In connection with your application for credit, deposit account, and/or online service (collectively, “application”) and/or existing accounts, products, and services (collectively, “existing services”) that you currently have with the Company, you have the option to receive important information about your application and/or existing services electronically. Any and all electronics disclosures, agreements, documents, and communications are collectively referred to as “Electronic Communications”. Electronic Communications may include, but is not limited to, the following:

- Application for credit / account;
- Certain information or forms that American Finance House Lariba request from you and ask you to submit electronically (e.g. tax returns, bank statements, IDs, signature cards, Form W-9, etc.);
- Updates/decisions related to your application;
- Disclosures, notices and other information related to the opening or maintaining your accounts, products, and services that may be required by the Equal Credit Opportunity Act, Truth in Lending Act, Real Estate Settlement Procedures Act, Truth in Savings Act, Fair Credit Reporting

Act, Electronic Fund Transfer Act, Gramm Leach Bliley Act or other applicable federal or state laws and regulations;

- Terms and conditions that govern your application;
- Agreements and policies you agree to (e.g. Wire Transfer Agreement, Electronic Banking, Telephone Transfer Agreement, Authorization Agreement for Automatic Mortgage Payment, etc.), including updates to these agreements or policies;
- Periodic, annual, or monthly statements, disclosures and notices relating to the maintenance or operation of an account, product, or service including, but not limited to account information, account activity, account inactivity, payments made or due, or other statements, disclosures or notices that may be required by the Equal Credit Opportunity Act, Truth in Lending Act, Real Estate Settlement Procedures Act, Truth in Savings Act, Fair Credit Reporting Act, Electronic Fund Transfer Act, Gramm Leach Bliley Act or other applicable federal or state laws and regulations (e.g. privacy, account escrow, account statement, etc.);
- Any notice or disclosure regarding an account, product or service fee, such as a late fee, insufficient fund, stop payment order, wire transfer fee, etc.; and
- Certain tax statements or notices that American Finance House Lariba is legally required to provide to you such as IRS Form 1098 and Form 1099;

American Finance House Lariba will provide you these communications by emailing / faxing them to you at a valid e-mail address / fax number which you have provided to the company and/or posting them on the Company's website.

Consent and Acknowledgement

By signing below, you (including any joint account-holders and co-applicants) acknowledge receipt of this Electronic Communications Disclosure and Consent form, and consent to the delivery of Electronic Communications via the Internet to an e-mail address and/or fax number you will designate to receive such Electronic Communications. Upon your consent to receive Electronic Communications, we will provide certain Electronic Communication through our website. In such cases, we will send you an e-mail that informs you when relevant information is available for your viewing on our website. That communication will include instructions on how to access the information from our website.

You also confirm that you meet the Hardware and Software Requirements listed below and are able to access and retain Electronic Communications from American Finance House Lariba. Your Consent to Electronic Communication applies to all applications, accounts, products, and services which you have now or may have in the future, with American Finance House Lariba

Withdrawing Consent

You may withdraw your consent at any time with 30 days prior written notice to Communications electronically by writing to as at:

**American Finance House Lariba
Attn: Electronic Communications Delivery
15141 E. Whittier Blvd. Suite 400
Whittier, CA 90603**

You can also fax your request to **(562) 693-1539 or (562) 693-1546 attn: Electronic Communication Delivery.**

Hardware and Software Requirements

To receive Electronic Communications, you must ensure that you are able to receive information electronically and retain it. You will need the following computer hardware and software, and fax machine:

- A computer with an Internet connection;
- A current web browser that includes 128-bit encryption or higher (e.g. Internet Explorer version 9.0 and above, Mozilla Firefox version 25.0 and above, Google Chrome version 6.0 and above, or Safari version 6.0 and above) with cookies enabled;
- Adobe Acrobat Reader version 9.0 and above to open documents in .pdf format;
- A valid e-mail address;
- Sufficient storage space to save past Communications or an installed printer to print them; and
- A fax machine with a phone line connection;

Copies of Electronic Communications

You may request a paper copy of any Electronic Communication. If you wish to obtain a paper copy of any of the Electronic Communication, you may contact us at Toll Free (855) 269-1122. If you request paper copies, you understand and agree that American Finance House Lariba may charge you a Records Request Fee for each Communication.

Updating Contact Information

It is your responsibility to keep your primary e-mail address and fax number updated so that American Finance House Lariba. can communicate with you electronically. If your e-mail address and/or fax number change, please contact us at Toll Free (562) 693-1241 ext 0 to provide us with updated information through which future Electronic Communications will be received by you. If you fail to notify us of any change in your e-mail address and/or fax number, you agree that we may provide Electronic Communications to you at the e-mail address and/or fax number maintained in our records and provided by you. Any Electronic Communications we send to you will be deemed to have been provided on the date we deliver the e-mail and/or fax to you advising you of their availability online.

THIS IS TO CERTIFY THAT I (WE) HAVE READ THE ABOVE INFORMATION AND THAT A COPY OF THIS FORM HAS BEEN GIVEN TO ME (US) FOR MY (OUR) RECORDS.

____ I/We hereby give my/our consent.

____ I/We hereby limit my/our consent to the following: _____

Print Name

Signature

Date

Print Name

Signature

Date

Print Name

Signature

Date

The Housing Financial Discrimination Act of 1977 Fair Lending Notice

It is illegal to discriminate in the provisions of or in the availability of financial assistance because of the consideration of:

1. Trends, characteristics or conditions in the neighborhood or geographic area surrounding a housing accommodation, unless the financial institution can demonstrate in the particular case that such consideration is required to avoid an unsafe and unsound business practice; or
2. Race, color, religion, sex, gender, gender identity, gender expression, sexual orientation, marital status, national origin, ancestry, familial status, source of income, disability, veteran or military status, or genetic information.

It is illegal to consider the racial, ethnic, religious or national origin composition of a neighborhood or geographic area surrounding a housing accommodation or whether or not such composition is undergoing change, or is expected to undergo change. In appraising a housing accommodation or in determining whether or not, or under what terms and condition, to provide financial assistance.

These provisions govern financial assistance for the purpose of the purchase, construction, rehabilitation, or refinancing of one-to-four-unit family residences occupied by the owner and for the purpose of the home improvement of any one-to-four-unit residence.

If you have questions about your rights, or if you wish to file a complaint, contact the management of this financial institution or the department of financial protection and innovation at the following location:

**California Department of Financial Protection and Innovation
Consumer Services Office
2101 Arena Boulevard
Sacramento, CA 95834**

ACKNOWLEDGEMENT OF RECEIPT

I (WE) RECEIVED A COPY OF THIS NOTICE

Borrower's Signature

Date

Borrower's Signature

Date

Borrower's Signature

Date

Borrower's Signature

Date



The Federal Equal Credit Opportunity Act

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 this law concerning this creditor is:

**Comptroller of the Currency
Customer Assistance Group
PO Box 53570
Houston, TX 77052**

Lending institutions are prohibited from bringing up, in the taking of applications for loans, certain specific subjects which lend themselves to discrimination. They are as follows:

- a) Whether or not you have or will have children.
(Although inquiring as to the number and age of dependents is proper.)
- b) Whether or not there exist childcare problems.
- c) Whether or not there will be interruption of income due to childbirth
- d) Whether or not you are receiving alimony, child support or separate maintenance. (Unless voluntarily disclosed as a source of additional income which you wish to be considered.)
- e) Whether you are widowed, divorced, or single.
(Allowable designations are married, unmarried, and separated).
- f) Whether or not your telephone number is listed.

Lending institutions must take and report action on your application "within a reasonable time". If application is denied, reasons **MUST** be given if requested.

THIS IS TO CERTIFY THAT I (WE) HAVE READ THE ABOVE INFORMATION AND THAT A COPY OF THIS FORM HAS BEEN GIVEN TO ME (US) FOR MY (OUR) RECORDS.

Borrower's Signature	Date	Borrower's Signature	Date
Borrower's Signature	Date	Borrower's Signature	Date

Form 4506-C (October 2022)	Department of the Treasury - Internal Revenue Service <h2 style="margin: 0;">IVES Request for Transcript of Tax Return</h2>	OMB Number 1545-1872
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Do not sign this form unless all applicable lines have been completed.

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

For more information about Form 4506-C, visit www.irs.gov and search IVES.

1a. Current name			2a. Spouse's current name <i>(if joint return and transcripts are requested for both taxpayers)</i>		
i. First name	ii. Middle initial	iii. Last name/BMF company name	i. Spouse's first name	ii. Middle initial	iii. Spouse's last name
1b. First taxpayer identification number <i>(see instructions)</i>			2b. Spouse's taxpayer identification number <i>(if joint return and transcripts are requested for both taxpayers)</i>		
1c. Previous name shown on the last return filed if different from line 1a			2c. Spouse's previous name shown on the last return filed if different from line 2a		
i. First name	ii. Middle initial	iii. Last name	i. First name	ii. Middle initial	iii. Last name
3. Current address <i>(including apt., room, or suite no.)</i> , city, state, and ZIP code <i>(see instructions)</i>					
a. Street address <i>(including apt., room, or suite no.)</i>			b. City	c. State	d. ZIP code
4. Previous address shown on the last return filed if different from line 3 <i>(see instructions)</i>					
a. Street address <i>(including apt., room, or suite no.)</i>			b. City	c. State	d. ZIP code
5a. IVES participant name, ID number, SOR mailbox ID, and address					
i. IVES participant name			ii. IVES participant ID number	iii. SOR mailbox ID	
iv. Street address <i>(including apt., room, or suite no.)</i>			v. City	vi. State	vii. ZIP code
5b. Customer file number <i>(if applicable) (see instructions)</i>			5c. Unique identifier <i>(if applicable) (see instructions)</i>		
5d. Client name, telephone number, and address <i>(this field cannot be blank or not applicable (NA))</i>					
i. Client name					ii. Telephone number
iii. Street address <i>(including apt., room, or suite no.)</i>			iv. City	v. State	vi. ZIP code

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

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 for line 6 transcripts

a. Return Transcript ☐ b. Account Transcript ☐ c. Record of Account ☐

7. Wage and Income transcript *(W-2, 1098-E, 1099-G, etc.)* ☐

a. Enter a max of three form numbers here; if no entry is made, all forms will be sent.

b. Mark the checkbox for taxpayer(s) requesting the wage and income transcripts. If no box is checked, transcripts will be provided for all listed taxpayers

Line 1a ☐ Line 2a ☐

8. Year or period requested. Enter the ending date of the tax year or period using the mm dd yyyy format *(see instructions)*

/ / / / / / / / / /

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, if applicable, line 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; however, if both spouses' names and TINs are listed in lines 1a-1b and 2a-2b, both spouses must sign the request. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-C on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

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

Sign Here	Signature for Line 1a <i>(see instructions)</i>		Date	Phone number of taxpayer on line 1a or 2a
	<input type="checkbox"/> Form 4506-C was signed by an Authorized Representative		<input type="checkbox"/> Signatory confirms document was electronically signed	
	Print/Type name			
	Title <i>(if line 1a above is a corporation, partnership, estate, or trust)</i>			
	Spouse's signature <i>(required if listed on Line 2a)</i>			Date
	<input type="checkbox"/> Form 4506-C was signed by an Authorized Representative		<input type="checkbox"/> Signatory confirms document was electronically signed	
Print/Type name				

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number											
				-				-			
or											
Employer identification number											
					-						

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
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General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they