

Payment Disclaimer Form

You may “disclaim” a payment if you do not want to accept it and do not want the payment reported to the Internal Revenue Service (IRS) as potential income that may be subject to taxation.

Generally, the payment administrator is required by law to report your payment to the IRS and mail you appropriate tax form(s) at tax time such as a Form 1099-MISC and/or a Form 1098. The payment administrator must report such payments even if (1) the check has not been deposited or cashed, and/or (2) the check is no longer valid because the void date printed on the check has passed.

The only way to request that your payment NOT be reported to the IRS is to complete this Form, sign it in the presence of a notary (who must also sign) and return it to the address listed below. Once the Payment Disclaimer Form has been processed, the payment agent will void any outstanding check and no reporting will be made to the IRS.

If the check is deposited or cashed—either before or after submission of this Payment Disclaimer Form—the payment will not be treated as disclaimed under any circumstances. Instead, the payment administrator will comply with all necessary tax reporting requirements and mail you appropriate forms at tax time.

The Disclaimer Form can only be accepted if it is signed by all borrowers listed on the check. If more than two borrowers are listed on the check, attach a separate page with the additional borrowers’ information and signature. *Note:* If one borrower listed as a payee on the check wants to accept his or her share of the payment and another borrower listed as a payee wants to disclaim his or her respective share, please submit this Payment Disclaimer Form together with a Split Payment Form (available at www.OcwenNYDFSPayments.com).

IMPORTANT: The undersigned do hereby irrevocably disclaim any interest in any payment from the Ocwen NYDFS Consent Order payment.

Provide information about the check (to the extent known):

Check Enclosed?	Tracking No.	Check No.	Check Date	Amount	Void Date
<input type="checkbox"/> Yes <input type="checkbox"/> No					

Borrower 1:

Name	
Mailing Address	
Email	Phone
Signature	Date
Signed by: <input type="checkbox"/> Borrower <input type="checkbox"/> Representative (attach proof of representation)	

Borrower 2:

Name	
Mailing Address	
Email	Phone
Signature	Date
Signed by: <input type="checkbox"/> Borrower <input type="checkbox"/> Representative (attach proof of representation)	

Questions? Call 1-877-541-3110 or email

info@OcwenNYDFSPayments.com

Notary Public Signature and Seal:

Notarized before me on this _____ day of _____, 20_____. Notary Signature:	Notary Public Seal
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Mail form to: Ocwen NYDFS Consent Order, PO Box 4655, Portland OR 97208-4655

Questions? If you would like to confirm that your Form has been received or if you have questions, call 1-877-541-3110 or send an email to info@OcwenNYDFSPayments.com. Agents are available Monday-Friday, 9:00 a.m.-9:00 p.m. Eastern Time and Saturday, 8:00 a.m-4:00 p.m. Eastern Time.

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info@OcwenNYDFSPayments.com**