

Real Estate: Buy Direction Letter Instructions

Form Use

Use this form when purchasing real estate.

If you need assistance completing the form, please call us at:

888-322-6534 option 1

Fees and Processing

Asset purchase fee: \$175

Check fee: \$7

Wire fee: \$30

Overnight delivery: \$30 (if requested)

Expedited review fee: \$100 (if requested)

IRAR processing time: 2-3 Days

Submission Options



Email

forms@iraresources.com



Fax

858-459-6565



Mail

IRA Resources, Inc. 1000 Broadway, Suite 350 Oakland, CA 94607

IMPORTANT

You must have enough funds in your account to cover the investment purchase and transaction fees. Lack of funds will delay your purchase.

Instructions

Provide a copy of this document to the party(ies) responsible for closing the transaction. It is imperative that all documents are properly titled/vested in the name of the IRA.

Example: IRAR Trust FBO [Client Name, Account #]

Use IRAR Trust Co. information when a purchaser's Tax ID or physical address is required on the documents.

IRAR Trust Co. Tax ID: 83-1624780

IRA Resources, Inc.

1000 Broadway, Suite 350

Oakland, CA 94607

Do not sign the documents where a buyer's signature is required. IRAR Trust must sign all documentation for the purchase on behalf of the client's account. Mark all applicable documents and acknowledge as read and approved before submitting to IRAR.

All executed documents (original Note, recorded Deed of Trust/Mortgage, Title Policy, and Final Settlement agreement, if applicable) must be returned to IRAR

Required Documentation

For Earnest Money Deposit (EMD) Funding

- Real Estate Buy Direction Letter
- Real Estate Contract Review Letter
- Purchase Agreement/Contract

For Final Funding/Closing

- Proposed Warranty or Grant Deed
- Title Commitment of Preliminary Report
- Estimated Closing Statement of HUD
- Closing Instructions (if applicable)
- Loan Documents (if applicable)

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Real Estate Buy Direction Letter

1. ACCOUNT OWNER INFORMATION						
Full Name (as it appears on your account applica	ation) Account Number		Account Type			
			☐ Traditional ☐ Roth ☐	SEP □ SIMPLE	□ HSA □ ESA	
Email Address			Daytime Phone Number			
2. REVIEW AND PROCESSING						
How Do You Want IRAR to Review Your Tra	nsaction? (NOTE: The review	v request	does not guarantee the complet	ion of the transactio	n)	
□ Normal Review Request	☐ Expedited Review Rec	quest (\$1	00)			
Documents are reviewed within approximately 2-3 business days	Documents are reviewed within one (1) business day if received before noon (PST). Any documents received after noon (PST) will be reviewed by close of next business day					
3. INVESTMENT INFORMATION						
Indicate the Type of Purchase and Comple		set Type				
□ New Purchase	☐ Additional Funding			☐ Exchange		
	This is when you add funds for an additional percentage of ownership of an existing asset.		of			
Property Address	City	State		ZIP	ZIP	
Total Purchase Value	Deposit (EMD)	Parcel Number - Lot/Block Number		er IRA Percentag	IRA Percentage of Ownership	
\$	\$				%	
Property Type						
\square Single Family \square Multi-Family Residentia	l (duplex, condo, etc.) 🛚 Cor	nmercia	l □ Vacant Land □ Forei	gn □ Other:		
This Property is a: ☐ REO ☐ Short Sale						
Is This Property a Replacement ? (a replacement occurs when an asset defaults and is exchanged for its collateral) □ Yes □ No						
Will the Property Have Debt Financing?						
☐ Yes (complete section 4) ☐ No (skip to section 5)						
4. NON-RECOURSE LENDER INFORMATION						
Lender Name Loan		Loan N	lumber			
Lender Address		Lender	City	Lender State	Lender Zip	
Lender Email		Lender	Website			
NON-RECOURSE LOAN: Financing on the property must be non-recourse, with no personal guarantee by the account owner or any disqualified person related to the retirement account UNRELATED DEBT-FINANCED INCOME TAX: Property purchased with your retirement account using debt financing may be subjected to Unrelated Debt-Financed Income, which is taxable. You will be responsible for reporting this income on IRS form 990-T using the IRA's Employer Identification Number						
(EIN). Please seek a tax professional or CPA if you have questions concerning this matter. You may also visit www.IRS.gov for additional information.						

IRAR PROCESSING CENTER 1000 BROADWAY, SUITE 350 OAKLAND, CA 94607 PHONE: 888-322-6534 FAX: 858-459-6565 EMAIL: FORMS@IRARESOURCES.COM

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5. ENTITY RESPONSIBLE FOR CLOSING TRANSACTION					
Escrow Company/Title Company/Attorney		Contact N	ontact Name		
Phone Number	Fax Number			Email	
Expected Closing Date		File/Escrov	w Number		
6. EARNEST MONEY DEPOSIT (EMD) FUNDING INFOR	MATION			
How Would You Like the Funds Delivered? (c	heck one)				
1. ☐ Wire					
Bank Name	Bank ABA/Routing Number				
Account Name	Account Number			Reference Number	
2. Check Issue A Cashier's C	heck (overnight mail is req	uired)			
Payee Name	Phone Number (required for cashier's check)				
Payee Street Address	City State			Zip	
How Would You Like the Check Delivered?					
□ First Class Mail			nird Party - Overnight Delivery I UPS (provide account #):		
☐ Mail Check to an Address Different From Payee (enter name below)			Phone Number (required for overnight check)		
Street Address	City		State		Zip
7. FINAL CLOSING / FUNDING INFO	RMATION				
How Would You Like the Funds Delivered? (c	heck one) \Box Use the	same info	rmation as li	sted in #6 above.	
1. ☐ Wire					
Bank Name				Bank ABA/Routing Num	ber
Account Name	Account Number		Reference Number		

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2. □ Check 3. □ Cashier'	s Check (overnight delivery required)				
Payee Name	Phone Number (required for cash	Phone Number (required for cashier's check)			
Payee Street Address	City	State	Zip		
How Would You Like the Check or C					
□ First Class Mail	☐ Overnight Delivery (additional fee applies)		Bill to Third Party - Overnight Delivery FedEx ☐ UPS (provide account #):		
☐ Mail Check to an Address Differe	nt From Payee (enter name below)	Phone Number (required	e Number (required for overnight check)		
Street Address	City	State	Zip		
8. SPECIAL INSTRUCTIONS					
9. PAYMENT OF IRAR FEES					
How Will You Pay for Transaction If credit card is declined, fees will be debit	Fees? ted from IRA. Transaction will NOT be processed	unless fees are paid.			
□ Debit IRAR Account □ Credit Card (complete credit card information below)					
Credit Card Type					
	☐ American Express ☐ Discover	☐ Save this card to my acc	count for future fees		
Name As it Appears on the Card	Card Number	Expiration			
			,		
Billing Address	Billing City	Billing Star	te Billing Zip		
	d to be charged for the option(s) chosen above. I will delay the processing of the account transaction				
Signature			Date		
→					

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10. ACCOUNT OWNER SIGNATURE AND ACKNOWLEDGEMENT

Prior to funding, all transaction documents must be notated "read and approved" with your signature and date (for example: purchase contract, promissory notes, etc.)

I understand that my account is self-directed and that IRAR Trust Company is acting solely as a passive custodian to hold retirement account assets and in no other capacity. IRAR Trust Company will not review the merits, legitimacy, appropriateness, and/or suitability of any investment in general, including but not limited to: any investigation and/or due diligence prior to making any investment, or in connection with my account in particular. I acknowledge that I have not requested that IRAR Trust Company provide, and IRAR Trust Company has not provided, any advice with respect to the investment directive set forth in this Buy Direction Letter. I understand that it is my responsibility to conduct all due diligence, including but not limited to: search concerning the validity of title, and all other investigation that a reasonably prudent investor would undertake prior to making any investment. I understand that IRAR Trust Company will not determine whether this investment is acceptable under the Employee Retirement Income Securities Act (ERISA), the Internal Revenue Code (IRC), or any applicable federal, state, or local laws, including securities laws. I understand that it is my responsibility to review the risks associated with this investment and I performed the due diligence I deemed necessary on the investment itself to ensure compliance with these requirements. I also understand and agree that IRAR Trust Company will not be responsible to take any action should there be any default with regard to this investment.

I understand that IRAR Trust Company is not a "fiduciary" for my account and/or my investment as such terms are defined in the IRC, ERISA, and/or any applicable federal, state, or local laws. I agree to release, indemnify, defend, and hold IRAR Trust Company, and its respective officers, directors, managers, members, employees, agents, owners, representatives, affiliates, and successors harmless from any claims, including but not limited to: actions, liabilities, losses, penalties, fines, and/or claims by others, arising out of this Buy Direction Letter and/or this investment, including but not limited to: claims that an investment is not prudent, proper, diversified or otherwise in compliance with ERISA, the IRC and/or any other applicable federal, state, or local laws. In the event of claims by others related to my account and/or investment wherein IRAR Trust Company is named as a party, IRAR Trust Company shall have the full and unequivocal right at their sole discretion to select their own attorneys to represent them in such litigation and deduct from my account any amounts to pay for any costs and expenses, including but not limited to: all attorneys' fees, costs, and internal costs (collectively "Litigation Costs"), incurred by IRAR Trust Company in the defense of such claims and/or litigation. If there are insufficient funds in my account to cover the Litigation Costs incurred by IRAR Trust Company, on demand, I will promptly reimburse IRAR Trust Company the outstanding balance of the Litigation Costs. If I fail to promptly reimburse the Litigation Costs, IRAR Trust Company shall have the full and unequivocal right to freeze my assets, liquidate my assets, and/or initiate legal action in order to obtain full reimbursement of the Litigation Costs.

I confirm that this purchase does not include any illegal or impermissible investments under South Dakota or Federal law, including, but not limited to, holdings of marijuana or other illegal substances, illegal gambling, or illegal artifacts.

I am directing IRAR Trust Company to complete this transaction as specified above. I confirm that the decision to buy this asset is in accordance with the rules of my account, and I agree to hold harmless and without liability IRAR Trust Company under the foregoing hold harmless provision. I understand that no one at IRAR Trust Company has authority to agree to anything different than my foregoing understandings of IRAR Trust Company's policy. If any provision of this Buy Direction Letter is found to be illegal, invalid, void, or unenforceable, such provision shall be severed, and such illegality or invalidity shall not affect the remaining provisions, which shall remain in full force and effect. I declare that I have examined this document, including accompanying information, and to the best of my knowledge and belief, it is true, correct and complete.

Transactions with insufficient funds will not be processed until sufficient funds are received. If fees are being deducted from your account, the full amount of the transaction plus fees must be available before your transaction can be processed.

IRAR Trust Company does not provide tax, legal, or investment advice. It does not endorse or recommend any agent, company, or specific investment. Any information communicated by IRAR Trust Company is solely for educational purposes and should not be construed as tax, legal, or investment advice. Consultations with tax, legal, and investment professionals is advised prior to making any decisions regarding your account.

I have read and understand the disclosure above.

ACCOUNT OWNER SIGNATURE	DATE

Submission Options					
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