PAPERWORK REDUCTION ACT CHANGE WORKSHEET

| Agency/Subagency | | OMB Control Number | |
|---|--|--------------------|--|
| U.S. Department of Housing and U Office of Housing, Office of Multifamily Hou | sing Development | 2502-0005 | |
| | Enter only items that change Current record | New record | |
| Agency form number(s) HUD-11701 | | | |
| Annual reporting and recordkeeping hour | | | |
| burden Number of respondents | | | |
| Total annual responses | | | |
| Percent of these responses collected electronically | | | |
| Total annual hours | | | |
| Difference | | | |
| Explanation of difference | | | |
| Program change Adjustment | | | |
| Annual reporting and recordkeeping cost | | | |
| burden (in thousands of dollars) | | | |
| Total annualized Capital/Startup costs | | | |
| Total annual costs (O&M) | | | |
| Total annualized cost requested | | | |
| Difference | | | |
| Explanation of difference | | | |
| Program change | | | |
| Adjustment Other changes** | | | |
| Other changes | | | |
| The attached form, HUD-11701, dated 5-08 has been revised for formatting changes. We have not made | | | |
| any changes that include or exclude any applicants who must use this form. We have not changed the | | | |
| <u>information</u> applicants <u>must submit</u> . | | | |
| The Word file is better than the current PDF version because, most applicants cannot save it with their | | | |

data filled in.

We have also made the following revisions:

- 1. <u>revised the instructions to make them more concise and provided additional background for the applicants;</u> and
- 2. <u>arranged the order of some the boxes to have the most common applicant type listed first</u>.

| Signature of Senior Official or designee: | Date: | For OIRA Use |
|---|-------|--------------|
| **This form cannot be used to extend an expiration date | | |

**This form cannot be used to extend an expiration date. OMB FORM 83-C