

**LOCCS/VRS HOPE VI Program
or Choice Neighborhoods
Program Payment Voucher**

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB approval No 5 2577-0166 (exp.01/31/2021)

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time to review instructions, search existing data sources, gather and maintain the data needed, and complete and review the collection of information. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

HUD uses the Line of Credit Control System/Voice Response System (LOCCS/VRS) to process requests for payments to HOPE VI and Choice Neighborhoods Grantees. Grant recipients fill out this voucher form with all the necessary information prior to making a telephone call using a touch tone telephone to initiate the drawdown process. The Grantee will be prompted to enter the information and to confirm information that is spoken back by the VRS simulated voice. This information is required to obtain benefits under the HOPE VI or Choice Neighborhoods Programs. The information requested does not lend itself to confidentiality

1. Voucher Number 058	2. LOCCS Prgm. Area URP	3. Period Covered by this Request (mm/yyyy) from: to:	4. <input type="checkbox"/> 1 = Partial Disbursement <input type="checkbox"/> 2 = Final Disbursement
5. Voice Response No. (5 digits, hyphen, 5 more)	6. Grantee Name	7. Not applicable	
8. HOPE VI Grant Number	6a. PHA's TIN	7a. Not applicable	

9. Line Item No.	Type of Funds Requested	Amount (dollars) * (cents)
1405	Support Services	*
1408	Management Improvement and HOPE VI / Community + Supportive Services	*
1409	Evaluation	*
1410	Administration	*
1430	Fees & Costs	*
1440	Site Acquisition	*
1450	Site Improvement	*
1460	Dwelling Structures	*
1465	Dwelling Equipment - Non-Expendable	*
1470	Non-Dwelling Structures	*
1475	Non-Dwelling Equipment	*
1480	Critical Community Improvements	*
1485	Demolition	*
1495	Relocation Costs - Residents	*
1496	Relocation Costs - Non Residents	*

10. Voucher Total \$ _____

I certify the data reported and funds requested on this voucher are correct and the amount requested is not in excess of immediate disbursement needs for this program. In the event the funds provided become more than necessary, such excess will be promptly returned, as directed by HUD.

11. Name & Phone Number (including area code) of the Person who Completed this form	12. Name & Title of Authorized Signatory (type or print clearly)	
	13. Signature	14. Date of Request

Warning: I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §3729, 3802)

Privacy Statement: Public Law 97-255, Financial Integrity Act, 31 U.S.C. 3512, authorizes the Department of Housing and Urban Development (HUD) to collect all the information (except the Social Security Number (SSN)) which will be used by HUD to protect disbursement data from fraudulent actions. The purpose of the data is to safeguard the Line of Credit Control System (LOCCS) from unauthorized access. The data are used to ensure that individuals who no longer require access to LOCCS have their access capability promptly deleted. Failure to provide the information requested on the form may delay the processing of your approval for access to LOCCS.