PAPERWORK REDUCTION ACT

**CHANGE WORKSHEET**

|  |  |  |
| --- | --- | --- |
| **Agency/Subagency**  **Department of Housing and Urban Development Office of Public and Indian Housing** | | **OMB Control Number**  **2577-0300** |
| **Enter only items that change**  **Current Record New Record** | | |
| **Agency form number(s)** | **HUD-50093**  **HUD-50094**  **HUD-50095**  **HUD-50096** |  |
| **Annual reporting and record keeping**  **hour burden** |  | |
| **Number of respondents** | **194** | **194** |
| **Total annual responses** | **974** | **974** |
| **Percent of these responses**  **collected electronically** | **100** | **100** |
| **Total annual hours** | **537.5** | **537.5** |
| **Difference** |  | **0** |
| **Explanation of difference** Program Change |  |  |
| **Adjustment** |  |  |
| **Annual reporting and record keeping cost burden (in thousands of dollars)** |  | |
| **Total annualized capital/startup**  **costs** | **NA** | **NA** |
| **Total annual costs (O&M)** |  |  |
| **Total annualized cost requested** |  |  |
| **Difference** |  |  |
| **Explanation of difference**  **Program Change** |  |  |
| **Adjustment** |  |  |
| **HUD-50093: Changed the form title to “Shortfall Program Improvement Plan”**  **HUD-50094: Removed text at top of the form and changed the form title of the form to “Shortfall Budget.”**  **HUD-50095: Made edits to the form title. Added field for “PHA Requested Lower Amount.” Made text updates to the Shortfall Tier 1 and Shortfall Tier 2 certification text to improve clarity.**  **HUD-50096: Changed references to the Notice 2021-12 to say the “current Shortfall notice.” Renumbered the list supporting documents.** | | |
| **Signature of Senior Officer or**  **designee:** | **Date:** | **For OIRA Use** |

**\*\*This form cannot be used to extend an expiration date**

**OMB 83-C**