HUD-9900 Attachment A – Screening for Ineligible Participants

OMB Control Number: 2502-0573

Expiration Date: 4/30/2024

PAPERWORK BURDEN DISCLOSURE NOTICE

The reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This collection of information is required to obtain or retain benefits. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

Privacy Advisory:

Authorities: The Department of Housing and Urban Development has the authority to collect social security numbers authorized by the Housing Community Development Act of 1987 42 U.S.C 3543(g). The Office of Housing Counseling is responsible for administration of the Department's Housing Counseling Program, authorized by 106 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701x), as amended. Housing Counseling Program regulations at 24 CFR Part 214. **Principal Purpose:** The mission

of the Office of Housing Counseling (OHC) is to provide individuals and families with the knowledge they need to obtain, sustain, and improve their housing. Agencies that are eligible, meet program requirements, and provide the information requested on the form HUD-9900, and form HUD 9900a may be approved to provide Comprehensive Housing Counseling Services that aid in the homeownership process.

Disclosure: The information will not be disclosed outside HUD without your consent except to civil, criminal, or regulatory investigations or prosecutions, or to a Member of Congress or a congressional office in response to an inquiry or as otherwise required by law. All information requested on the form HUD-9900, and form HUD 9900a is required to evaluate new applicants against Housing Counseling Program eligibility requirements only. A social security number may be requested to validate an individual's identity associated with this application if the information submitted cannot be confirmed by the minimum requirements. If the information is not provided, the agency may not be considered for approval into HUD's Housing Counseling Program. This application is designed to be completed by applicants who are seeking approval to be a HUD-Approved Housing Counseling Agency. Housing counseling required by or provided in connection with HUD programs must only be provided by HUD certified housing counselors working for participating agencies approved to provide such housing counseling by HUD's Office of Housing Counseling.

HUD-9900 ATTACHMENT A

Agency Name:	
Address:	
City, State, Zip Code	

Name of Counseling Staff and Title	Duites - Brief Description	Length of employment	ls staff member full-time, part-time or volunteer	Physical Home Address	Contact Telephone Number
Sample - John Davis, Program Director	management & oversight of counseling program	6 yrs	Full-time	1234 Anytown St, Happytown, WY 82001	307-555-1234
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HUD-9900 ATTACHMENT A

Agency Name:				
Address:				
City, State, Zip Code				
Name of Board Member and Title	Employer Name	Duties - Brief Description	Physical home address	Contact Telephone Number
Sample - Carol Morris, President	Westside Financial Services	Vice President, marketing operations	123 Windy West Road Chugwater, WY 12345	307-555-1212