**Paperwork Reduction Act**

# Change Worksheet

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| Agency/Subagency:**U.S. Department of Housing and Urban Development** | OMB Control Number:**2535-0102** |
| Enter only items that change | Current Record | New Record\*\* |
| Agency form number(s):      |       |       |
| **Annual reporting and keeping hour burden** |  |  |
| Number of respondents |       |       |
| Total annual responses |       |       |
| Percent of these responses collected electronically |     % |     % |
| Total annual hours |       |       |
| Difference |  |       |
| Explanation of differenceProgram changeAdjustment |  |            |
| **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 differenceProgram changeAdjustment |  |            |

Other change: \*\*

1. Page 1-2, Changed signature fields to electronic signature fields (#5, #6, #8, #11)
2. Page 2, #9 – Removed checkbox for “Add or Remove Program Area(s)”
3. Page 2, #10 – Revised title in blue text
4. Page 2, #10 – Removed checkbox for “Add or Remove Tax-ID Number(s)”
5. Page 2, #10 – Added “(s)” at the end of “Program Area ID” and “Program Area Name”
6. Page 3 - #6 – Updated and added text on “Approving Official”
7. Page 3 - #10 – Updated and added text on “Multiple Organizations”