OMB Approval No. 2577-0300 (Exp. 03/31/2025)

Paperwork Reduction Act burden statement:

Public Reporting Burden for this collection of information is estimated to average 1 hour 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden to the Reports Management Officer, REE, Department of Housing and Urban Development, 451 7th Street SW, Room 8210, Washington, DC 20410–5000. When providing comments, please refer to OMB Approval No. 2577-0300. 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. The information is collected in accordance with 24 CFR Part 990 and annual Appropriations laws, including Full-Year Continuing Appropriations and Extensions Act, 2025 (Public Law 119-4). Participants appealing their eligibility or the published Shortfall funding eligibility award amount are required to complete this form. HUD uses the information provided to review the participants' appeal and Shortfall funding eligibility. The information requested does not lend itself to confidentiality.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing CY 20__ Shortfall Funding Eligibility Amount Appeal

PHA Name: _		
PHA Number:		
	fere	r: enced agency is applying for Shortfall funds and has submitted accurate and al data to the U.S. Department of Housing and Urban Development (HUD).
As specified in	the	e Shortfall Notice, please submit the following items to submit your appeal:
Upload Upload Upload	1)	a re-calculation of Operating Reserves assuming HUD approves the amount of the requested appeal
	2)	a copy of the accepted FDS the PHA used to calculate Shortfall eligibility
	3)	an indication of the corrected entries and financial information
Upload	4)	for PHAs that will submit a revised financial statement to HUD, a written concurrence from the PHA's auditor
Upload	5)	a signed statement (signed pdf is acceptable) by the PHA's Executive Director certifying that the submitted information is accurate
Upload	6)	other documentation to support appeal outside of the above categories
Justification fo	or A	ppeal:
PHA Contact Name Phone Number		