



**SECTION 8 – TRADITIONAL CONTRACT ADMINISTRATION (TCA) AND PERFORMANCE-BASED CONTRACT ADMINISTRATION (PBCA) PORTFOLIO**

Project Name: \_\_\_\_\_ HAP Contract #(s): \_\_\_\_\_ MH Proj.#: \_\_\_\_\_

Name of Responsible Party: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_ FAX#: \_\_\_\_\_

Signature (Digital): \_\_\_\_\_ Date: \_\_\_\_\_ DUNS # \_\_\_\_\_

**THE SUBMISSION CANNOT BE PROCESSED UNTIL ALL THE REQUIRED ITEMS HAVE BEEN RECEIVED**

Check Changes	Actions requiring one or more of the following:	Cover Letter	DUNS Number	Contact Listing	Form 1199	Form W-9	HUD APPS	HUD Firm Commitment	HAP Contract Amendment	Management Agreement	AFHMP & LEP
<input type="checkbox"/>	Section 8 HAP assigned to MassHousing portfolio	R	R	R	N/A	R	N/A	N/A	N/A	R	N/A
<input type="checkbox"/>	Change of ownership	R	R	R	R	R	R	R*	R	R	R
<input type="checkbox"/>	Change of management agent	R	R	R	R	R	R	N/A	N/A	R	R
<input type="checkbox"/>	Change of development name	R	R	N/A	R	R	R	R*	R	R	N/A
<input type="checkbox"/>	Change of Bank and/or merger with new account	R	N/A	N/A	R	N/A	N/A	N/A	N/A	N/A	N/A
<input type="checkbox"/>	Change of bank account at the same Bank	R	N/A	N/A	R	N/A	N/A	N/A	N/A	N/A	N/A
<input type="checkbox"/>	Change of ABA routing by Bank	R	N/A	N/A	R	N/A	N/A	N/A	N/A	N/A	N/A

R = Requiring Specific Form or Document | N/A = Not Applicable | \*in lieu of APPS or 2530 approval

- Based on your selection above, please E-mail the required documents (except for the original 1199A form) to: [COBR@masshousing.com](mailto:COBR@masshousing.com) **If a change in bank or account number is required**, an original 1199A form must be received by MassHousing via USPS/UPS/FedEx, – Attention: Quality Assurance.
- **Cover Letter:** This correspondence, on your company’s letterhead, should contain a narrative of your requested action (e.g., change of development name or make payments to a new bank), listing the active DUNS number and HAP contract number.
- **DUNS Number:** An active DUNS number assigned to the development is required by HUD to process all Section 8 HAP payments.
- **Contact Information Form:** This form is provided below as the “Business Relationship Contact Form” and must be completed to facilitate communication with all MassHousing Departments.
- **Direct Deposit Sign-Up Form:** This is also referred to as the 1199A form and is available through this link [Standard Form 1199A](#). This is used by the MassHousing Treasury Department to identify the financial institution and bank account number to which electronic payments are made. The staff at MassHousing are working remotely during the Covid-19 Pandemic so there is no MassHousing staff to receive the original signed 1199A form sent via regular mail. We are asking you to have the CFO or Comptroller sign the 1199A Form and send it with a voided check as a PDF to [COBR@masshousing.com](mailto:COBR@masshousing.com) in the same E-mail with the other documents. We will contact the CFO or Comptroller to confirm the request.
- **Taxpayer Identification Number (TIN) and Certification:** The IRS and HUD require this form, [IRS Form W-9](#), before any payments are issued under the Housing Assistance Payments (HAP) Contract. (Please note that TIN numbers must match the entity named on the form.)

## CHANGE OF BUSINESS RELATIONSHIP

## MASSHOUSING DEBT

- **Previous Participation Certification:** As required in HUD Handbook 4065.1, HUD must review and approve participants in certain types of changes prior to implementation. These changes include change of ownership, change of partners (either general or limited), change of development name, and change of management agent. (For more information regarding the Previous Participation Certificate (APPC) please use this link [APPS Previous Participation Certification \(APPC\)](#))
- **HUD Firm Commitment Letter:** In some instances, a new owner may present a firm commitment letter from a HUD official indicating that the transfer of physical assets (TPA) has been approved, pending the completion of specified action. This may be used as an alternative to an APPS approval.
- **HAP Contract Amendment and/or Assignment and Assumption Agreement:** When a property is sold or transferred to a new owner, HUD must approve the transaction and execute an amendment to the HAP Contract, assigning the rights and obligations of the contract to the new owner. We must receive a copy of the fully executed amendment.
- **Management Agreement:** When a change of ownership, development name, or management agent occurs, HUD requires an executed Management Agreement listing the parties as signatories to the agreement. The new management agent may be required to obtain APPS approval prior to commencement of the contract.
- **Affirmative Fair Housing Marketing Plan and Limited English Proficiency (AFHMP and LEP):** These items are reviewed and processed by MassHousing for developments with a MassHousing debt relationship. Please include a new or revised AFHMP and an LEP Certification.

CHANGE OF BUSINESS RELATIONSHIP  
**Business Relationship Contact Information Form**

MASSHOUSING DEBT

Development Name:		Request Date:	
HAP Contract #:		MH#:	
HUD FHA#:		Effective Date:	
HUD Risk Share #:		Asset Manager:	
General Partner/Owner:			
Principal Contact Person:			
Mailing Address – Street:			
City/State/Zip:			
Phone Number:		FAX Number	
Email Address:			
Website URL:			
Management Agent:			
Principle Contact Person:			
Mailing Address – Street:			
City/State/Zip:			
Phone Number:		FAX Number	
Email Address:			
Website URL:			

CHANGE OF BUSINESS RELATIONSHIP

MASSHOUSING DEBT

Regional Manager:

Mailing Address – Street:

City/State/Zip:

Phone Number:

FAX Number

Email Address:

Website URL:

Site Manager:

Mailing Address – Street:

City/State/Zip:

Phone Number:

FAX Number

Email Address:

Website URL:

Portal Administrator<sup>1</sup>:

Mailing Address – Street:

City/State/Zip:

Phone Number:

FAX Number

Email Address: Website URL:

CHANGE OF BUSINESS RELATIONSHIP

MASSHOUSING DEBT

Sec. 8 Voucher Administrator<sup>2</sup>:

Mailing Address – Street: City/

State/Zip:

Phone Number:  FAX Number

Email Address:

Website URL:

	-BR	-BR	-BR	-BR	-BR	-BR
Bedroom Type:						
Number of Units:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E=Elevator, W=Walkway, TH=Townhouse	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F=Family, E=Elderly, H=Handicapped	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sec. 8 PB Units:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sec. 811 Units:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sec. 8 PBV:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sec. 8 EV:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Workforce Housing:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
LIHTC:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Market:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

For Quality Assurance Use Only			
Subsidy Q/A Received Date	<input type="text"/>	Initial Here	<input type="text"/>

## CHANGE OF BUSINESS RELATIONSHIP

## MASSHOUSING DEBT

Data Change Request Completed	Name:		Initial Here	Date:
Quality Assurance Audit Date	Name:		Initial Here	Date

<sup>1</sup>Portal Administrator: this is the Owner/Agent person assigned to determine who has access to the MassHousing Portal so that they can obtain Debt Service and Escrow billings and year end accounting documents

<sup>2</sup>Sec. 8 Voucher Administrator: This is the person assigned by the Owner/Agent to receive communication regarding voucher payment and special claims processing and other issues related to voucher payments.