

## Modification Request Form – Rental Project

Project #:	Project name:	
Date:	Project address:	
Member name:		
Member contact:		
Address:		City/State:
Phone:	Fax:	Email:
Type of Modification requested:  Resident family income targeting Number of units  Amount of AHP subsidy Other:		
Description of modification being requested – "good cause" explanation why request is being made:		
Is this modification being requested in connection with a disbursement request? ☐ Yes / ☐ No		
Has documentation justifying this been reviewed? Please attach.		☐ Yes / ☐ No
Is there good cause for this modification?		☐ Yes / ☐ No
I have reviewed the requested modification and certify that the above is true. I have attached supportive documentation for each point identified above.		
In addition to the modification request form, the following is required for modification consideration:		
1.) Updated Pro forma	2.) Updated total development budget	
3.) Updated Sources & Uses  4.) Updated project completion timeline		completion timeline
Member contact signature	Date	
	<del></del>	
Printed name	Title	
Project sponsor/owner signature	Date	
Printed name	Title	