REQUEST FOR A HAP CONTRACT GREATER THAN 5 YEARS

Project Name:_____

Section 8 Contract #:

I hereby request a project-based Section 8 Housing Assistance Payment renewal contract with a term of _____years (maximum allowed term is 20 years), and certify to the following (please check boxes):

() I commit to preserving this property as affordable, assisted housing for the full term of the contract.

() The above listed project's owner and/or management agent is currently not in default of any business agreements with HUD.

Comments in support of request (optional):

Owner's Signature	Owner's Name (print)	Title	Date

WHEDA CONCURRENCE

WHEDA has reviewed the owner's request for an extended term contract and recommends a renewal of ______ years.

WHEDA Official's Signature	WHEDA Official's Name (print)	Title	Date

HUD APPROVAL

The field office has reviewed the owner's request for an extended term contract and approves a term of ______ years.

HUD Official Signature	Title	Date
Multifamily Midwest Region		