



**REQUEST FOR AMENDMENT**  
COMMUNITY HOUSING AND GRANTS MANAGEMENT DIVISION  
SFN 62773 (10/26)

|                                                                                                                                                                                                            |      |                  |      |                       |               |             |                 |        |          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------------------|------|-----------------------|---------------|-------------|-----------------|--------|----------|
| Recipient Name                                                                                                                                                                                             |      | Address          |      |                       |               |             | City            | State  | ZIP Code |
| Instrument Number                                                                                                                                                                                          |      | Amendment Number |      | Approved Grant Period |               |             | Date of Request |        |          |
| Type of Amendment<br><input type="checkbox"/> Special Condition <input type="checkbox"/> Budget Revisions <input type="checkbox"/> Scope of Work <input type="checkbox"/> Extension of Time – Revised Date |      |                  |      |                       |               |             |                 |        |          |
| Explanation for Request (attach additional page if necessary)                                                                                                                                              |      |                  |      |                       |               |             |                 |        |          |
| Housing<br><input type="checkbox"/> Approved Number of Units <input type="checkbox"/> Revised Number of Units                                                                                              |      |                  |      |                       |               |             |                 |        |          |
| Effect of Request                                                                                                                                                                                          |      |                  |      |                       |               |             |                 |        |          |
| Approved Budget                                                                                                                                                                                            | CDBG | HOME             | ESPG | HOPWA                 | Other Federal | State/Local | Private         | Other* | Total    |
|                                                                                                                                                                                                            |      |                  |      |                       |               |             |                 |        |          |
|                                                                                                                                                                                                            |      |                  |      |                       |               |             |                 |        |          |
|                                                                                                                                                                                                            |      |                  |      |                       |               |             |                 |        |          |
|                                                                                                                                                                                                            |      |                  |      |                       |               |             |                 |        |          |
|                                                                                                                                                                                                            |      |                  |      |                       |               |             |                 |        |          |
| Administration                                                                                                                                                                                             |      |                  |      |                       |               |             |                 |        |          |

|       |  |  |  |  |  |  |  |  |  |
|-------|--|--|--|--|--|--|--|--|--|
| Total |  |  |  |  |  |  |  |  |  |
|-------|--|--|--|--|--|--|--|--|--|

\*Source of Other Funds

| Additions and Deletions | CDBG | HOME | ESPG | HOPWA | Other<br>Federal | State/Local | Private | Other* | Total |
|-------------------------|------|------|------|-------|------------------|-------------|---------|--------|-------|
|                         |      |      |      |       |                  |             |         |        |       |
|                         |      |      |      |       |                  |             |         |        |       |
|                         |      |      |      |       |                  |             |         |        |       |
|                         |      |      |      |       |                  |             |         |        |       |
|                         |      |      |      |       |                  |             |         |        |       |
|                         |      |      |      |       |                  |             |         |        |       |
| Administration          |      |      |      |       |                  |             |         |        |       |
| Total                   |      |      |      |       |                  |             |         |        |       |

\*Source of Other Funds (if different from budget)

| Revised Budget | CDBG | HOME | ESPG | HOPWA | Other<br>Federal | State/Local | Private | Other* | Total |
|----------------|------|------|------|-------|------------------|-------------|---------|--------|-------|
|                |      |      |      |       |                  |             |         |        |       |
|                |      |      |      |       |                  |             |         |        |       |

|                                                   |  |  |  |  |  |  |  |  |  |
|---------------------------------------------------|--|--|--|--|--|--|--|--|--|
|                                                   |  |  |  |  |  |  |  |  |  |
|                                                   |  |  |  |  |  |  |  |  |  |
|                                                   |  |  |  |  |  |  |  |  |  |
| Administration                                    |  |  |  |  |  |  |  |  |  |
| Total                                             |  |  |  |  |  |  |  |  |  |
| *Source of Other Funds (if different from budget) |  |  |  |  |  |  |  |  |  |

**SUBMITTED BY (CHIEF ELECTED OFFICAL)**

|           |      |       |      |
|-----------|------|-------|------|
| Signature | Name | Title | Date |
|-----------|------|-------|------|

**REGIONAL COUNCIL CONCURRENCE**

|           |      |       |      |
|-----------|------|-------|------|
| Signature | Name | Title | Date |
|-----------|------|-------|------|

**ACTION TAKEN (NDHFA USE ONLY)**

|                                                                        |      |       |      |
|------------------------------------------------------------------------|------|-------|------|
| <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved |      |       |      |
| Signature                                                              | Name | Title | Date |