

**Special Claims
Schedule**

**U. S. Department of Housing
and Urban Development**

OMB Approval No. 2502-0182
(Exp. 06/30/2016)

Office of Housing
Federal Housing Commissioner

Instructions Follow guidelines in HUD Handbook 4350.3, Rev. 1 Chapter 9	Project Name	FHA Project No.	Section 8 / PAC / PRAC Contract No.			

Head of Household Name Last, First, Initial	Unit Number	Type and Amount of Claim (\$)				
		Unpaid Rent from HUD 52671-A	Tenant Damages from HUD 52671-A	Rent-Up Vacancies from HUD 52671-B	Regular Vacancies from HUD 52671-C	Debt Service from HUD 52671-D
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Totals						

I certify: (a) the above amounts have been computed in accordance with all instructions and requirements prescribed by HUD and the applicable Section 8 / PAC / PRAC Contract; (b) all prerequisites to and conditions for the assistance claimed have been met; and (c) all required documentation will be retained in the project's files for 3 years.

Owner's printed name, signature, date and phone no.

HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties (18 U.S.C. Sections 1001, 1010, 1012; 31 U.S.C. Sections 3729, 3802).

HUD/Contract Administrator Review

Claim approved.

Claim adjusted. Reason:

Claim denied. Reason:

Official's name, signature, and date