Special Claims Schedule

U. S. Department of Housing and Urban Development
Office of Housing
Federal Housing Commissioner

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

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