

Mandatory Checklist for Reporting Owner/Agent Changes for Properties currently assigned to SC Housing

Please complete this checklist and attach it to the completed forms so that we can process your changes timely. Please email forms to Bonnie.Roberts@schousing.com

Contract Number:

Contact Name:	Contact Title:
Contact Phone Number:	Email:
□ Owner Change	☐ Management Agent Change
Requested Effective Date:	Requested Effective Date:
	Existing Agent Name:
☐ Mandatory Checklist	New Agent Name:
☐ Owner/Agent Information Form	
☐ Signature Authorization	☐ Mandatory Checklist
☐ HAP Assumption Agreement	☐ Owner/Agent Information Form
□ W-9	☐ Signature Authorization
	☐ Management Certification
	□ W-9
(http://treasurer.sc.gov/media/49359/Evp-Enroll.pdf).	
***PLEASE NOTE: This completed form is sent to SC Housing.	
We will process it through the financial department, then forward to the SC State Treasurer's office.	***PLEASE NOTE: This completed form is sent to SC Housing.
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forward to the SC State Treasurer's office.	We will process it through the financial department, then forward to the SC State Treasurer's office.
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□ Bank Account Change Requested Effective Date: □ Mandatory Checklist	We will process it through the financial department, then forward to the SC State Treasurer's office. Other Changes Requested Effective Date: Signature Changes:
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□ Bank Account Change Requested Effective Date: □ Mandatory Checklist □ W-9	We will process it through the financial department, then forward to the SC State Treasurer's office. Other Changes Requested Effective Date: Signature Changes: Mandatory Checklist
□ Bank Account Change Requested Effective Date: □ Mandatory Checklist □ W-9 ***PLEASE NOTE: This completed form is sent to SC Housing.	We will process it through the financial department, then forward to the SC State Treasurer's office. Other Changes Requested Effective Date: Signature Changes: Mandatory Checklist Owner/Agent Information Form Signature Authorization
□ Bank Account Change Requested Effective Date: □ Mandatory Checklist □ W-9	We will process it through the financial department, then forward to the SC State Treasurer's office. Other Changes Requested Effective Date: Signature Changes: Mandatory Checklist Owner/Agent Information Form Signature Authorization No forms required for minor contact changes – staff,
□ Bank Account Change Requested Effective Date: □ Mandatory Checklist □ W-9 ***PLEASE NOTE: This completed form is sent to SC Housing. We will process it through the financial department, then	We will process it through the financial department, then forward to the SC State Treasurer's office. Other Changes Requested Effective Date: Signature Changes: Mandatory Checklist Owner/Agent Information Form Signature Authorization

Project Name: