Texas Department of Housing and Community Affairs

HOME Program Contract System Access Request Form

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| --- | --- |
| Contract Organization Name: | Organization Phone Number: |
| Physical Address (street, city, zip):      ,      , | |
| Mailing Address:      ,      , | Email: |
| HOME Contract **OR** RSP Agreement Number: |  |

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| *Note: Individuals that need access to the TDHCA Contract System must have their own email address and account to maintain confidentiality and to meet security authorization and authentication measures. Email addresses and accounts may not be shared.* |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Contract ExecutionIndividual authorized to execute a contract on behalf of Contract Administrator. Also has authority to enter and approve project set-ups and draw requests. | | | | | | | |
| Name: | | | | | | | Title: |
| Phone: | | | Fax: | | | | Email: |
|  | | |  | | | |  |
| **I certify that all individuals identified in this document are authorized to perform the functions as specified.**  **\_**     **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_**     **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  Signature of Authorized Administrator RepresentativeDate | | | | | | | |
| Primary Contact Individual authorized to act as the primary contact. This may be the signature authority listed in the above section, or the primary contact role may be designated to another employee. The primary contact may not be the consultant. | | | | | | | |
| Name: | | | | | | Title: | |
| Phone: | | Fax: | | | | Email: | |
|  | |  | | | |  | |
| **Data Entry and Approval Authorizations**  Individuals authorized to enter and approve project set-ups or draw requests.  *Note: An individual who enters an activity set-up or draw request cannot be the same individual who approves that transaction.* | | | | | | | |
| **Name 1**: | | | | | Add  Remove | | Title: |
| Phone: | | | | | | | Email: |
|  | | | | | | |  |
| **Name 2**: | | | | | Add  Remove | | Title: |
| Phone: | | | | |  | | Email: |
|  | | | | | | |  |
| **Consultant Information and Authorization**  *Note: Consultants may enter data into TDHCA Contract System and approve set-ups and/or draw requests.* | | | | | | | |
| Organization Name and Address:       ,       , | | | | | | | |
| Phone: | Fax: | | | | | | Email: |
| Individual Authorized to  Perform Data Entry: | | | | Add  Remove | | | Title:  E-mail: |
| Contract Administrator Authorizes:  (check box(s) that apply) | | | | set-up activity  enter draw request | | | approve set-up activity  approve draw request |
|  | | | | | | |  |
| Individual Authorized to  Perform Data Entry: | | | | Add  Remove | | | Title:  E-Mail: |
| Contract Administrator Authorizes:  (check box(s) that apply) | | | | set-up activity  enter draw request | | | approve set-up activity  approve draw request |
|  | | | | | | |  |

**WARNING: TITLE 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and**

**willingly making false or fraudulent statements to any department of the United States Government.**