



## 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 [laura.tanner@schousing.com](mailto:laura.tanner@schousing.com)

Project Name:	Contract Number:
Contact Name:	Contact Title:
Contact Phone Number:	Email:

<input type="checkbox"/> <b>Owner Change</b>	<input type="checkbox"/> <b>Management Agent Change</b>
<p>Requested Effective Date: _____</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Mandatory Checklist</li> <li><input type="checkbox"/> Owner/Agent Information Form</li> <li><input type="checkbox"/> Signature Authorization</li> <li><input type="checkbox"/> HAP Assumption Agreement</li> <li><input type="checkbox"/> W-9</li> <li><input type="checkbox"/> Electronic Payment Enrollment Form (STO Form 4) from SC State Treasurer’s office for Direct Deposit (<a href="http://treasurer.sc.gov/media/49359/Evp-Enroll.pdf">http://treasurer.sc.gov/media/49359/Evp-Enroll.pdf</a> ). ***<b>PLEASE NOTE:</b> 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.</li> </ul>	<p>Requested Effective Date: _____</p> <p>Existing Agent Name: _____</p> <p>New Agent Name: _____</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Mandatory Checklist</li> <li><input type="checkbox"/> Owner/Agent Information Form</li> <li><input type="checkbox"/> Signature Authorization</li> <li><input type="checkbox"/> Management Certification</li> <li><input type="checkbox"/> W-9</li> <li><input type="checkbox"/> Electronic Payment Enrollment Form (STO Form 4) from SC State Treasurer’s office for Direct Deposit ***<b>PLEASE NOTE:</b> 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.</li> </ul>
<input type="checkbox"/> <b>Bank Account Change</b>	<input type="checkbox"/> <b>Other Changes</b>
<p>Requested Effective Date: _____</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Mandatory Checklist</li> <li><input type="checkbox"/> W-9</li> <li><input type="checkbox"/> Electronic Payment Enrollment Form (STO Form 4) from SC State Treasurer’s office for Direct Deposit ***<b>PLEASE NOTE:</b> 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.</li> </ul>	<p>Requested Effective Date: _____</p> <p>Signature Changes:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Mandatory Checklist</li> <li><input type="checkbox"/> Owner/Agent Information Form</li> <li><input type="checkbox"/> Signature Authorization</li> </ul> <p style="text-align: center;"><b>No forms required for minor contact changes – staff, email, and/or telephone/fax numbers may be reported by sending an email to <a href="mailto:laura.tanner@schousing.com">laura.tanner@schousing.com</a></b></p>