REQUEST TO CHANGE MANAGEMENT COMPANY

Any Housing Tax Credit, Bond, TCAP or Credit Exchange Development allocated credit or federal dollars must obtain **PRIOR** approval from KHRC before changing management companies. Only management companies with experience in the program and in good standing with KHRC will be approved. To request a change, the current management company must upload the request form to the Procorem work center. Upload to the following folder: Allocation> Waivers and Requests.

Property Name & Address:	Owner's Name & Address:	Procorem #:
New Management Company's Name &	Prior Management Company's Name &	Anticipated Effective
Address:	Address:	Date (MM/DD/YYYY):

<u>NEW</u> staff that need added to the property's Procorem work center:

Name:	Title:	Phone Number	Email Address:

<u>PLEASE BE AWARE OF THE FOLLOWING:</u> It is the duty of BOTH management companies to determine which company is responsible for submitting the Annual Report and Compliance Fee for <u>the year the change</u> <u>occurred</u>. It is also the duty of BOTH management companies to determine which company is responsible for responding to any current/pending notices issued by KHRC (i.e. Files Inspections, Physical Inspections or Annual Report 60 day notices, Casualty Loss Events, Tenant Complaints/Concerns, etc.)

<u>Procorem Access:</u> KHRC will add the staff listed above to the work center as soon as the change is approved. To accommodate the needs of both the old and new company, KHRC will <u>wait to remove</u> individuals from the old management company until we have been notified via post of who should be removed.

Property Type (Check all that apply): Low Income Housing Tax Credit _____ Bond _____ HOME Rental Units _____ Tax Credit Assistance Program (TCAP) _____ 1602 Program (aka: Credit Exchange Program) _____

This property is in year 16 or later of the Low Income Housing Tax Credit Program _____ Yes ____ No

Please provide KHRC with the names of three other LIHTC properties managed within the state of Kansas along with the date the requested management company began managing.

Property Name:	Management Agent since: (MM/DD/YY)

Owner/Agent's Printed Name:	Signature and Date:
Contact Phone #:	Email Address:

Approved: _____ Yes ____ No

Director, Housing Compliance Division

Date

Note: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statement or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.