

Request for Waiver of Housing Directive

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

OMB Approval No. 2502-0029
(Expires 04/30/2020)

1. Field Office	2. Program and DAS (e.g., multifamily development)
-----------------	--

3. Waiver Requested by (person, entity, HUD employee)

4. Waiver Item (directive number, date, page, paragraph, etc.)
--

Relief Sought

5.	☐ Yes (skip No. 6) ☐ No (go to No. 6)	If previously approved, give Counsel's name and date of approval.
----	--	---

6. Counsel Determination. The Waiver Proposal **does not conflict** ☐ **conflicts** ☐ with statutory or regulatory provisions (cite rule or provision)

Counsel (signature)

Date

7. Employee Justification (attach additional pages if necessary)

Field Office Concurrence

Name	Title	Date
------	-------	------

8. ☐ Granted ☐ Not Granted	Housing Director (signature)	Date 07/24/2026
---	------------------------------	-------------------------------

Comments

Public reporting burden for this collection of information is estimated to average xx minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Distribution: (includes waivers granted and denied)

Original to Field Office;

One copy to each of the following:

Director, Organizational Policy, Planning and Analysis Division, Room 9116, HUD Headquarters, HRO

Assistant General Counsel, Multifamily Mortgage Division, HUD Headquarters, Room 9230, CAHAA

And one copy to either of the following:

Office of the Deputy Assistant Secretary for Single Family Housing, Room 9282, HUD Headquarters, HU

Office of the Deputy Assistant Secretary for Multifamily Housing, Room 6106, HUD Headquarters, HT