

Texas Department of Housing and Community Affairs  
Colonia Self-Help Center Program



**Amendment/Modification Checklist**

This checklist must be submitted for each type of contract change: Performance Statement and/or Budget Amendment or Modification. Check all items that apply. Review Program Rules to determine the type of change to request.

County: \_\_\_\_\_ Contract Number: \_\_\_\_\_

☐ Amendment ☐ Modification Number: \_\_\_\_\_

☐ Submitted cover letter signed by the county judge (required for all contract changes)

**Performance Statement Amendment**

- ☐ Submitted *County Resolution of Support* for the proposed amendment
- ☐ Public hearing advertisement date of publication was at least 72 hours prior to public hearing
- ☐ Re-evaluation of the environmental assessment was completed with no changes required
- ☐ Re-evaluation of the environmental assessment required updating and was cleared by TDHCA
- ☐ Submitted revised Performance Statement, with changes clearly identified
- ☐ Submitted Publisher's Affidavit of Public Hearing Notice with copy of advertisement or full page of the newspaper

**Performance Statement Modification**

- ☐ Modification to adjust beneficiaries to close out the contract (contractually required activities and units were met)
- ☐ Increase in the number of housing units to rehab, reconstruct, or build on undeveloped lots with original funding amount
- ☐ Submitted revised Performance Statement, with changes clearly identified

**Budget Amendment**

- ☐ Submitted Contract Budget Change Form including justification/reason for the budget amendment
- ☐ Line item balances have been checked and revision to budget does not cause any negative balances
- ☐ Funds moving into administration does not exceed 15% limitation
- ☐ Activities have been completed in line items from which funds are being shifted from
- ☐ Transfer of funds does not change the scope or objective of the funded project(s)

**Budget Modification**

- ☐ Cumulative dollar amount, including previous budget modifications, is less than or equal to 10% of the total contract amount
- ☐ Submitted Contract Budget Change Form including justification/reason for the budget modification
- ☐ Line item balances have been checked and revision to budget does not cause any negative balances
- ☐ Activities have been completed in line items from which funds are being shifted from
- ☐ Funds moving into administration does not exceed 15% limitation
- ☐ Transfer of funds does not change the scope or objective of the funded project(s)

**Certification**

The required documentation checked above has been submitted.

Signature of County Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of County Representative: \_\_\_\_\_