



## HUD Form 27054E Checklist Business Partners (Only)

OFFICE OF THE CHIEF FINANCIAL OFFICER

This document provides a checklist for Business Partners Approving Official to complete the HUD Form 27054E.  
For the latest form visit <https://www.hud.gov/sites/dfiles/OCHCO/documents/27054E.pdf>

### 1. Secure Systems Actions

All Business Partner users must first obtain a Secure Systems User ID and password to log into Secure Systems/eLOCCS. [Click for directions.](#)

If you are a eLOCCS **Approving Official** within your organization, register as a "Coordinator" for Secure Systems. [Click here.](#)

If you are a eLOCCS **User** within your organization, register as the "User" for Secure Systems. [Click here.](#)

The **Secure Systems Coordinator** must ensure the following steps prior to submission of HUD Form 27054E to your HUD Program Officer with Secure Systems eLOCCS Roles Module..

<b>Coordinator*</b>	<b>User(s)</b>
Assign Actions <b>ADM</b> and <b>QRY</b> :	Assign Actions <b>ADM</b> and <b>QRY</b> :
Confirm no other roles assigned:	Confirm no other roles assigned:

### 2. HUD Form 27054E Elements

**Block 1 Type of Function Check**  
Appropriate Function 1-8 If function 8 did you type in reason?

#### Block 2a Secure System ID:

User's Secure System ID:

#### Block 2b New Secure System ID

New Secure System ID:  
N/A:

#### Block 3 User Name

Last:  
First:  
MI:

#### Office Telephone Number

Area Code, Number, Extension:

#### Mailing Address:

Street, Suite, City, State, Zip:

#### Email Address:

Does email address include name of applicant?  
Ensure Generic email is not used:

#### Block 4 Number of Authorization Pages

Number:  
Number added to top of page 2:

#### Block 5 Authorized User Signature

Wet and Legible Signature:  
Date (same as AO and Notary):

#### Block 6 Approving Official

Last:  
First:  
MI:  
Title\*\*:  
Secure System ID:  
Complete Mailing Address:  
Office Phone Number:  
Wet and Legible Signature: Date  
(same as User and Notary):

#### Block 7 Notary

Different than AO:  
Seal:  
Date (same as User and AO):  
Wet and Legible Signature:

#### Block 8 HUD POC

To be filled in by the assigned HUD Program Officer.

#### Block 9 (Single Property) or Block 10 for Multiple:

Reason indicated in Block 1 written exactly the same:  
Organization Tax ID:  
Organization Name:  
Program Area ID:  
Program Area Name:  
Add or Remove only if User already an Active User\*\*\*:  
Dropdown menu item Query or Draw:

#### Block 11 a-b Initials

User / AO Initials:  
Dates (same as page one):

#### Block 11 c Initials

To be filled in by HUD Program Officer

**NOTES:**

\*Coordinator in Secure Systems is synonymous with Approving Official in the eLOCCS System.

\*\*Approving Official Title must be on the approved list from page 3 of HUD Form 27054E and a higher level than the User

\*\*\*Add or Remove Programs Block is not to be checked unless the person is an ACTIVE USER in LOCCS and needs to remove a program that they no longer need access to or need to add a program area that they do not have. See instructions on page 3 of the HUD Form 27054E for more information.