

eLOCCS Access Authorization Form

U.S. Department of Housing
and Urban Development

OMB Approval No. 2535-0102
(exp. 08/31/2026)

See Instructions, Public Burden, and Privacy Act statements before completing this form.

BUSINESS PARTNER (grantees) - **Please review the guidance on PAGE 3 for completion of HUD form 27054E.** There is a MANDATORY REQUIREMENT for a NOTARY, signature & seal, for ALL forms submitted requesting "New User, Reinstatement User, and Changing Secure Systems ID". Once completed - Send HUD form 27054E via Secured Email to the HUD Program Officer assigned to your organization. **All fields must be typed in except for signatures and initials.**
HUD PROGRAM OFFICER - Please review all applications for accuracy then submit HUD form(s) 27054E, secured via WinZip, to the designated INTERNAL email address provided for 27054E HUD FORMS.

1. Type of Function(s)		2a. Secure Systems ID		2b. New Secure Systems ID	
1. New User	5. Add or Remove Program Area(s)	Mandatory (Special Instructions for Termination included in instructions)		(If changing Secure Systems ID)	
2. Reinstatement User	6. Add or Remove Tax-ID Number(s)				
3. Terminate User	7. Name/Address Change				
4. Change Secure Systems ID	8. Other:				
3. Authorized User's Name			Title (mandatory)		Office Telephone Number (include area code and extension if applicable)
Last Name	First Name	MI			
Complete Mailing Address			Personal/Business email must contain the name of the applicant; Generic emails are not accepted		
4. Authorizations (see next page) Required for New User, Reinstatement User, Revise Authorization and Terminate user functions. Attach one or more authorization pages as needed. Record the number of attached pages to the right. The Approving Official and HUD Program Office POC should initial each page.					Number of Authorization Pages Attached
5. Authorized User's Signature (must be legible)					Date (mm/dd/yyyy)

I authorize the person identified above to access eLOCCS via HUD's Secure Systems.

6. LOCCS Approving Official Name		Title		7. Notary (must be different from the user and approving official) Seal, Signature, and Date Notarized (mm/dd/yyyy)		
Last Name	First Name	MI				
Personal/Business email must contain the name of the applicant; Generic emails are not accepted			Secure Systems User ID (mandatory)			
Complete Mailing Address			Office Telephone Number (include area code)			
Approving Official's Signature (must be legible)			Date (mm/dd/yyyy)			
8. HUD Program Office Point of Contact's Name (HUD Program Officer must be registered in LOCCS Web as a user)				Title		
Last Name	First Name	MI				
H-ID				Office Telephone Number (include area code)		
HUD Program Office Point of Contact's Signature (must be legible)				Date (mm/dd/yyyy)		

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. **WARNING:** Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties (18 U.S.C. §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. §§ 3729, 3802).

