

NAME: **Date Modified**

DESCRIPTION: System generated date of modifications to the family's information

TYPE: Date

SIZE: 8

COMMENTS: MMDDCCYY format; May be different from the effective date of action

EDITS: Fatal: • Cannot be blank
Fatal: • MMDDCCYY format

FIELD NUMBER: 3

POSITION: 7-14

LINE REFERENCE NO: n/a

NAME: **HA State**

DESCRIPTION: State in which the HA is located

TYPE: Alpha

SIZE: 2

COMMENTS: Use postal state codes (exception for Islands)

EDITS: Fatal: • Cannot be blank
Fatal: • Must be a valid state code

FIELD NUMBER: 4

POSITION: 15-16

LINE REFERENCE NO: 1b.

NAME: **HA Number**

DESCRIPTION: HA number assigned to the HA by HUD

TYPE: Numeric

SIZE: 3

COMMENTS: Number HUD uses to recognize the HA in that state. For Section 8, this HA number must have active units

EDITS: Fatal: • Cannot be blank
Fatal: • Must be a valid 3 digit HA number that exists in MTCS
Warning: • 1b plus 1c must equal owner HA ID in header record, unless vendor sends data or HA ID is in authorization table

FIELD NUMBER: 5

POSITION: 17-19

LINE REFERENCE NO: 1c.
