

ICDBG IMPLEMENTATION TRAINING FOR GRANTEES — Secure Systems & eLOCCS

OFFICE OF NATIVE AMERICAN PROGRAMS



SECURE SYSTEMS AND ELECTRONIC LINE OF CREDIT CONTROL SYSTEMS (eLOCCS)

- eLOCCS is accessed through the HUD internet portal called **Secure Systems**
- Secure Systems is the “bank building” to HUD’s subsystems (eLOCCS) “the vault”
- There are **two security components** Grantees must complete to access eLOCCS:
 - **Secure Systems Registration** (Overseen by Real Estate Assessment Center (REAC))
 - **eLOCCS User** complete [HUD-27054E Access Authorization Form](#) (Overseen by Office of the Chief Financial Officer)



eLOCCS: SECURE SYSTEMS vs. eLOCCS



Secure Systems

is the bank building



eLOCCS

**is the vault
inside of the bank**



eLOCCS: GRANTEE REGISTRATION PROCESS

Register Organization as a Business Partner

Only done once per organization; wait 24 hrs. to proceed

Register as Coordinator or User

After receive Coordinator ID, Coordinator will register new User; User ID will be available for the Coordinator within 24 hrs.; the Coordinator can search for it in Secure Systems by Name in User Maintenance

Coordinator Assigns eLOCCS Roles to Registered Users & Submits 27054E to Area ONAP

New Coordinator assigns role to themselves first before Users; existing Coordinators will assign roles to the new User and provide the ID; User emails form 27054E to their AONAP

Area ONAP Approves & Sends Form to OCFO Security

OCFO Security Creates Account Entry in eLOCCS or Returns Form for Corrections

User Receives Autogenerated Access E-mail from HUD-LOCCS



eLOCCS: GRANTEE REGISTRATION PROCESS (cont.)

If you are new to eLOCCS, then you must:

- ✓ **Register as new Business Partner**
- ✓ **Register in Secure Systems**
- ✓ **Direct Deposit Signup**, Standard Form 1199a ([form-1199a.pdf](#))
- ✓ **LOCCS Access Authorization Security**, Form HUD-27054 ([27054E eLOCCS Access Form](#))



eLOCCS: SIGNING-UP AS A BUSINESS PARTNER

**Business Partner Registration
HUD Multifamily**

For Coordinator or User Registration go to the [Secure Systems Registration page](#).

TIN:	<input type="text"/>	(no dashes)
or		
SSN:	<input type="text"/>	(no dashes)
Confirm TIN/SSN:	<input type="text"/>	(no dashes)
<input type="checkbox"/> Check if SSN is used as TIN for Sole Proprietor or Revocable Trust		

This only needs to be done once; you can check if your organization has been registered by entering the TIN [Here](#)



**Business Partner Registration
HUD Multifamily**

All fields marked with an asterisk(*) are mandatory

* Company Name:	<input type="text"/>
TIN:	<input type="text" value="830261946"/>
* Legal Structure:	<input type="text"/>
* Type of Ownership:	<input type="text"/>
Physical delivery address	
* Address:	<input type="text"/>
* City:	<input type="text"/>
* State:	<input type="text"/>
* Zip Code:	<input type="text"/> - <input type="text"/>
* Country:	<input type="text" value="USA"/>
If country not United States	
Territory:	<input type="text"/>
* Postal Code:	<input type="text"/>
* Phone:	<input type="text"/>
Fax:	<input type="text"/>
* E-mail:	<input type="text"/>
Cell Phone:	<input type="text"/>

If your organization has not been registered, you will fill-out this information and submit; it will take 24 hours to process



eLOCCS: SIGNING-UP IN SECURE SYSTEMS

Application Type	<input type="radio"/> Coordinator	<input type="radio"/> User
First Name:	<input type="text"/>	
Middle Initial:	<input type="text"/>	
Last Name:	<input type="text"/>	
Social Security Number:	<input type="text"/>	
Organization Information:		
<ul style="list-style-type: none">• Provide the name of the HUD-registered Organization or Individual you represent• Provide the Tax Identification Number or Social Security Number of the HUD-registered Organization or Individual you represent. Do not enter dashes.• Specify whether the HUD-registered entity you represent is an Organization or an Individual		
Organization/Individual Name::	<input type="text"/>	
TIN/SSN:	<input type="text"/>	
Organization	<input type="radio"/>	Individual <input type="radio"/>
Provide your e-mail address.		
<ul style="list-style-type: none">• Include your e-mail user name, the @ sign and [servicename.com/edu/org/net/etc.]. For example: jsmith@aol.com, johndoe@adv.org, hfdb84a@prodigy.com.		
E-mail Address:	<input type="text"/>	

In Secure Systems there are two ID types available to register

- Coordinator/Approving Official
- User – Most People

Correct Application Type must be chosen by Coordinator/User

Secure Systems Registration: [Here](#)

Note: This portal is for global use not limited to PIH customers

REAC Technical Assistance:

PIH-REAC Technical Assistance Ctr.

Phone: 1-888-245-4860

Fax: 202-485-0280

Mon. thru Fri., 7am - 8:30pm EST

eLOCCS: ASSIGNMENT OF ROLES IN SECURE SYSTEMS

- ▶ The Coordinator must assign LOCCS Roles to the Grantee's user ID in order for the User to see and sign into eLOCCS from the Secure Systems Main Menu:
 - ❖ In Secure Systems, the Coordinator would search the User ID (or search on by another Search Criteria) and assign the '**QRY**' and '**ADM**' LOCCS roles in Maintain User Profiles – Roles in Secure Systems User Maintenance to establish the eLOCCS link
 - ❖ To do this, Coordinator, must first assign the Coordinator Role in Maintain User Profile Actions and assign the '**QRY**' and '**ADM**' LOCCS roles in Maintain User Profile – Roles in Secure Systems User Maintenance to themselves
- ▶ Refer to Appendix A Step 1 and Step 2 in pgs. 23-30 of eLOCCS Registration Guide: [Here](#)



eLOCCS: ACCESS AUTHORIZATION FORM

27054E eLOCCS Access Form (hud.gov)

Send the completed form **via Secured Email** to the area ONAP for signature – they will securely send the form to the CFO's Office once it has been reviewed and signed



eLOCCS Access Authorization Form		U.S. Department of Housing and Urban Development		OMB Approval No. 2535-0102 (exp. 08/31/2026)	
<p>See Instructions, Public Burden, and Privacy Act statements before completing this form.</p> <p>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, Reinstate 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.</p> <p>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.</p>					
1. Type of Function(s) 1. New User 2. Reinstate User 3. Terminate User 4. Change Secure Systems ID		5. Add or Remove Program Area(s) 6. Add or Remove Tax-ID Number(s) 7. Name/Address Change 8. Other:		2a. Secure Systems ID Mandatory (Special Instructions for Termination included in instructions)	
3. Authorized User's Name Last Name First Name MI		Title (mandatory)		2b. New Secure Systems ID (If changing Secure Systems ID) Office Telephone Number (include area code and extension if applicable)	
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, Reinstate 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 Last Name First Name MI		Title		7. Notary (must be different from the user and approving official) Seal, Signature, and Date Notarized (mm/dd/yyyy)	
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) Last Name First Name MI			Title		
H-ID			Office Telephone Number (include area code)		
HUD Program Office Point of Contact's Signature (must be legible)			Date (mm/dd/yyyy)		
<small>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). Review officers are obsolete. Form HUD 27054E (12/2022)</small>					

eLOCCS: SF 1199a – DIRECT DEPOSIT SIGN-UP FORM

[Standard Form
1199A - Direct
Deposit Sign-Up
Form \(gsa.gov\)](#)

This form will also
need to be sent to
your area ONAP

[Here](#) for instructions

DIRECT DEPOSIT SIGN-UP FORM

DIRECTIONS

- To sign up for Direct Deposit, the payee is to read the back of this form and fill in the information requested in Sections 1 and 2. Then take or mail this form to the financial institution. The financial institution will verify the information in Sections 1 and 2, and will complete Section 3. The completed form will be returned to the Government agency identified below.
- A separate form must be completed for each type of payment to be sent by Direct Deposit.
- The claim number and type of payment are printed on Government checks. (See the sample check on the back of this form.) This information is also stated on beneficiary/annuitant award letters and other documents from the Government agency.
- Payees must keep the Government agency informed of any address changes in order to receive important information about benefits and to remain qualified for payments.

SECTION 1 (TO BE COMPLETED BY PAYEE)

A NAME OF PAYEE (<i>last, first, middle initial</i>)		D TYPE OF DEPOSITOR ACCOUNT <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS	
ADDRESS (<i>street, route, P.O. Box, APO/FPO</i>)		E DEPOSITOR ACCOUNT NUMBER	
CITY	STATE	ZIP CODE	F TYPE OF PAYMENT (<i>Check only one</i>)
TELEPHONE NUMBER AREA CODE		<input type="checkbox"/> Social Security <input type="checkbox"/> Supplemental Security Income <input type="checkbox"/> Railroad Retirement <input type="checkbox"/> Civil Service Retirement (OPM) <input type="checkbox"/> VA Compensation or Pension	
B NAME OF PERSON(S) ENTITLED TO PAYMENT		<input type="checkbox"/> Fed. Salary/Mil. Civilian Pay <input type="checkbox"/> Mil. Active <input type="checkbox"/> Mil. Retire. <input type="checkbox"/> Mil. Survivor <input type="checkbox"/> Other (<i>specify</i>)	
C CLAIM OR PAYROLL ID NUMBER		G THIS BOX FOR ALLOTMENT OF PAYMENT ONLY (<i>if applicable</i>)	
Prefix	Suffix	TYPE	AMOUNT
PAYEE/JOINT PAYEE CERTIFICATION I certify that I am entitled to the payment identified above, and that I have read and understood the back of this form. In signing this form, I authorize my payment to be sent to the financial institution named below to be deposited to the designated account.		JOINT ACCOUNT HOLDERS' CERTIFICATION I certify that I have read and understood the back of this form, including the SPECIAL NOTICE TO JOINT ACCOUNT HOLDERS.	
SIGNATURE	DATE	SIGNATURE	DATE
SIGNATURE	DATE	SIGNATURE	DATE

SECTION 2 (TO BE COMPLETED BY PAYEE OR FINANCIAL INSTITUTION)

GOVERNMENT AGENCY NAME	GOVERNMENT AGENCY ADDRESS
------------------------	---------------------------

SECTION 3 (TO BE COMPLETED BY FINANCIAL INSTITUTION)

NAME AND ADDRESS OF FINANCIAL INSTITUTION		ROUTING NUMBER	CHECK DIGIT
		DEPOSITOR ACCOUNT TITLE	
FINANCIAL INSTITUTION CERTIFICATION I confirm the identity of the above-named payee(s) and the account number and title. As representative of the above-named financial institution, I certify that the financial institution agrees to receive and deposit the payment identified above in accordance with 31 CFR Parts 240, 209, and 210.			
PRINT OR TYPE REPRESENTATIVE'S NAME	SIGNATURE OF REPRESENTATIVE	TELEPHONE NUMBER	DATE

Financial institutions should refer to the GREEN BOOK for further instructions.

THE FINANCIAL INSTITUTION SHOULD MAIL THE COMPLETED FORM TO THE GOVERNMENT AGENCY IDENTIFIED ABOVE

GOVERNMENT AGENCY COPY

1199-207

eLOCCS: EXAMPLE OF AUTOGENERATED APPROVAL E-MAIL

Dear [REDACTED]

Your request for eLOCCS access (HUD-27054e) has been processed.

To activate your access, please login to Secure Systems and access eLOCCS **before DECEMBER 10, 2024**. (Failure to activate your access by this date will require submission of a new HUD- 27054e.)

On your first access to eLOCCS, you will be prompted to create:

- 3 Security questions and answers

These will be used to unsuspend yourself if you fail to access eLOCCS for more than 90 days.

If you sign onto Secure Systems and do NOT see the 'Line of Credit Control System (eLOCCS)' link in the main menu:

You do not have LOCCS roles assigned to your Secure Systems ID.

- Request that your Coordinator (approving official designated on HUD form 27054e) retrieve your user ID in Secure Systems and assign the 'QRY' and 'ADM' LOCCS roles to your ID
- Have your Coordinator refer to the eLOCCS Registration Guide.
- If you do not know your System Coordinator, contact REAC Technical Assistance Center at 1-(888) 245-4860

Please be reminded that it is prohibited to let another individual use your Secure System credentials to access eLOCCS functionality. Any user discovered sharing access may have his or her eLOCCS access permanently terminated.

Sent to Approving Official, User, and HUD program office contact listed on HUD-27045e



eLOCCS: LOGIN

User Login [faq](#) | [help](#) | [search](#) | [home](#)

Secure Systems
Single Sign On

User ID

Password

[Forgot your password?](#) Click the link to reset your password and for other useful information.

ATTENTION: This computer system, and all the systems associated with this system for User Authorization and Authentication, are protected by a computer security system; unauthorized access to these systems is not permitted; and usage may be monitored.
NOTE: There is an inactivity timeout of 30 minutes. Please save your work periodically to avoid being logged out. Please also note that there is a 4 hour session timeout, after which, you will need to re-authenticate. You can then resume where you left off.
Content updated June 15, 2007

U.S. Department of Housing and Urban Development
451 7th Street S.W., Washington, DC 20410
Telephone: (202) 708-1112 TTY: (202) 708-1455 [Home Site](#)

Log into
Secure Systems

[Secure
Systems
External Login
\(hud.gov\)](#)

Main Menu [faq](#) | [help](#) | [search](#) | [home](#) | [logout](#)

Secure Systems

Welcome SHAWN DUTHIE

system administration

- Business Partners Maintenance
- User Maintenance

systems

Systems

- [Financial Assessment Submission - PHA \(FASPHA\)](#)
- [Line of Credit Control System \(eLOCCS\)](#)
- [Mark-to-Market \(M2M\)](#)
- [Multifamily Delinquency and Default Reporting System \(MDDR\)](#)
- [Public Housing Assessment System: Scores and Status \(NASS\)](#)
- [Physical Assessment Subsystem \(PASS\)](#)
- [Quality Assurance Subsystem \(QASS\)](#)

Then select
**Line of Credit
Control System
(eLOCCS)**

eLOCCS: USER LOGIN FOR FIRST TIME, SET SECURITY QUESTIONS



HUD IT policy requires all systems (including eLOCCS) to disable access if the user has not signed in for over 90 days.

Should your eLOCCS access be suspended for inactivity, you will have the opportunity to clear the suspension by answering 1 of 3 pre-selected personal security questions. Take care in selecting your questions and answers. If you are not able to answer any of the 3 security questions correctly, your eLOCCS access will be terminated, and you will need to submit a HUD 27054e to your HUD program officer for reinstatement.

eLOCCS requires the below 3 Security questions/answers to be on file for all users.

- Once entered, you can review or change your questions/answers any time from the [Your Profile] link.
- You may choose to provide a question/answer pair of your own by selecting the last question (with the icon).
- The [Continue] button will be enabled only after all 3 questions/answers have been entered.
- The [Cancel] button will return you to the Secure Systems menu.

Your Questions (uncheck checkbox to remove question)	Your Answers (maximum 20 characters)
1) <input checked="" type="checkbox"/> What is your oldest siblings middle name?	smith
2) <input checked="" type="checkbox"/> In what city/town was your 1st job?	smith
3) <input checked="" type="checkbox"/> The first name of your spouse/significant others father?	smith

Click on the checkbox to select the question.

<input type="checkbox"/> What was the make and model of your 1st car?
<input type="checkbox"/> What was the name of your elementary school?
<input type="checkbox"/> What city/town did you meet your spouse/significant other?

<input type="checkbox"/> What was the first name of your favorite childhood friend?
<input type="checkbox"/> What was your 1st pet's name?
<input type="checkbox"/> Where was your favorite place to visit as a child?



eLOCCS: ADDITIONAL INFORMATION

- ❖ Users are assigned to an **Approving Official** when they submit their **HUD-27054E** form with that Approving Official listed on it or submit a **Change of Approving Official Form**
- ❖ Approving Officials must recertify their Users **every quarter**
- ❖ Approving Officials without Users assigned to them will be **terminated** by eLOCCS system which is a HUD standard protocol for LOCCS
- ❖ Approving Officials can be changed with a **Change of Approving Official Form**
- ❖ **Reach-out to your area ONAP - We are here to help!**



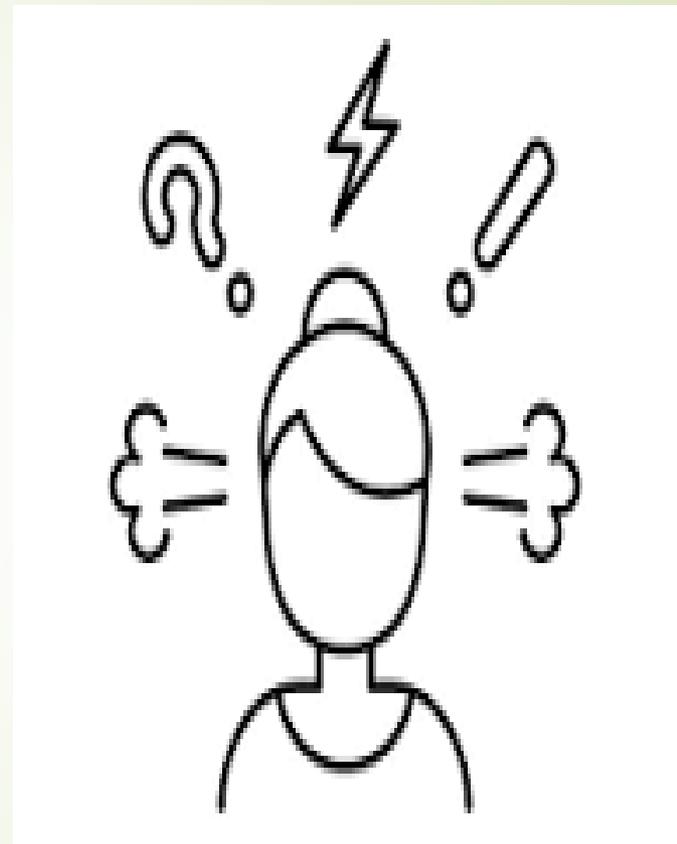
eLOCCS: DOCUMENT LINKS

Resource	Link
HUD-27054E eLOCCS Access Authorization Form	27054E eLOCCS Access Form
HUD Form 27054E eLOCCS Approving Official Checklist (EXTERNAL)	Approving Official Checklist
Change of LOCCS Approving Official/Coordinator Form	Change of Official Form.pdf
90 Day Suspension Removal for LOCCS Approving Official	90 Day Suspension Form.pdf
eLOCCS Getting Started Guide (Rev. October 2024)	eLOCCS Getting Started Guide



OVERWHELMED?!? NEED HELP???

- **Contact your Area ONAP**
- Your GMS is here to help guide you towards solutions & understanding
- Additional Training & Technical Assistance may also be available



https://www.hud.gov/program_offices/public_indian_housing/ih/codetalk/training

HUD CONTACTS: AREA ONAP POCs

All Area ONAP Offices and Contact Information is listed on the ONAP Codetalk website:

[ONAP and Tribe Contacts.pdf](#)

Bookmark this link on your computer so you have a quick and easy way to reach-out for help or guidance going forward



QUESTIONS?

thank you

