



Alteration/Renovation (A/R) Information

OMB No.: 0915-0285. Expiration Date: 4/30/2026

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration ALTERATION/RENOVATION (A/R) INFORMATION	FOR HRSA USE ONLY	
	Grant Number	Application Tracking Number

Note(s)

- If you did not request to use EH funding for minor alteration/renovation on Form 1B, this section does not apply to you. If you are requesting funding for minor alteration/renovation (with or without moveable equipment), you must complete the Alteration/Renovation (A/R) Project Cover Page and Other Requirements for Sites forms in EHBs for each site where minor alteration/renovation is proposed. The Alteration/Renovation (A/R) Information page will prepopulate selected sites from scope.
- For each site(s) where alteration/renovation will take place, answer 'Yes' to Are you requesting federal one-time funding for minor alteration/renovation at this site?
- Click on the [*Update*] link for each site to complete the Alteration/Renovation (A/R) Project Cover Page and the Other Requirements for Sites for each site.

Select site

Site Name	Physical Address	BPHC Site ID	Are you requesting federal one-time funding for minor alternation/renovation at this site?	Status	Options
<i>(Data from Form 5B: Select Site(s) from Scope)</i>	<i>(Data from Form 5B: Select Site(s) from Scope)</i>	<i>(Data from Form 5B: Select Site(s) from Scope)</i>	Yes/No		<i>Update</i>

Public Burden Statement: Health centers (section 330 grant funded and Federally Qualified Health Center look-alikes) deliver comprehensive, high quality, cost-effective primary health care to patients regardless of their ability to pay. The Health Center Program application forms provide essential information to HRSA staff and objective review committee panels for application evaluation; funding recommendation and approval; designation; and monitoring. The OMB control number for this information collection is 0915-0285 and it is valid until 4/30/2026. This information collection is mandatory under the Health Center Program authorized by section 330 of the Public Health Service (PHS) Act ([42 U.S.C. 254b](#)). Public reporting burden for this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.

Instructions

This form is connected to Form 1B: Funding Request Summary. If you selected “minor A/R with equipment” or “minor A/R without equipment” on Form 1B: Funding Request Summary, you will use this Alteration/Renovation (A/R) Information form to show which of your selected sites will have minor A/R.

Your list of sites is pulled from Form 5B: Select Site(s) from Scope. If you want to do minor A/R at a site you do not see on this list, you must go back to Form 5B: Select Site(s) from Scope and add the site there. You can only use EH funds to conduct minor A/R at sites where you will expand hours.

- Select ‘yes’ for each site where minor A/R is proposed.
 - Click on the Update button for each site to complete the required A/R forms.
 - You are required to complete the A/R Project Cover Page and Other Requirements for Sites for each site where minor A/R is proposed.
- Select ‘No’ for each site where minor A/R is not proposed.