



RENT INCREASE REQUEST

OPPORTUNITY AREA

NON OPPORTUNITY AREA

Email this completed form, development Rent Roll, and Rent Analysis to PRA@thecha.org with "RENT INCREASE" in the subject line. Please prepare a separate sheet for each building and scattered site within the development.

Form must be submitted to CHA 60 days prior to the Contract Anniversary Date

Development Name _____

Development Street Address _____

City, State Zip Code _____

Owner Name _____

Telephone # and Email Address _____

Mailing Address _____

City, State Zip Code _____

Contact Person Name _____

Telephone # and Email Address _____

Drop Box _____

Drop Box _____

*Structure Type _____

**Building Type _____

Year Built/Year Rehab _____

*Structure type definition - Low rise: 3-4 stories including garden apartment, High rise: five or more stories.

** Building Type- E for Elevator or WU for Walk-Up

REQUESTING RENT					OFFICE USE ONLY		
Unit Size	Number of Bathrooms per unit	Current Rent	Apt Square Footage	(A) Requested Rent	(B) FMR <input type="checkbox"/> 110% <input type="checkbox"/> 150%	(C) Average Rent Comp	Contract Rent (lowest of A, B, or C,)
Drop Box	Drop Box	\$		\$	\$	\$	\$
Drop Box	Drop Box	\$		\$	\$	\$	\$
Drop Box	Drop Box	\$		\$	\$	\$	\$
Drop Box	Drop Box	\$		\$	\$	\$	\$

Acknowledgement and Signature:

I certify that the information provided on this form is complete and accurate to the best of my knowledge

Print Name _____ Title _____
 Signature _____ Company _____
 Telephone _____ Fax _____
 Email _____ Date: _____

- For Office Use Only

Date Rent Request Received		Date Submitted for Approval		Rent Increase Effective Date	
Vendor ID #		Property ID#			
Last rent increase	\$	Date of last rent increase			
Recommended by: (Signature)			Approved by: (Signature)		
Name and Title (Please Print)			Name and Title (please Print)		
Date			Date		

CHA attached Exhibit C from the HAP Contract for Utility Responsibilities