

# HOME RENTAL HOUSING RENT INCREASE REQUEST

PROJECT NAME & ADDRESS: \_\_\_\_\_

INCREASE REQUEST DATE: \_\_\_\_\_

PROPOSED EFFECTIVE DATE: \_\_\_\_\_

**Gross Rent = Unit Rent+UA+Non-Opt Charges**  
*Gross Rent must not exceed applicable HOME Limit*

	Unit Type	BR Size	No. of HOME Units of this size	Unit Type (Low/High)	Current Unit Rent		Proposed Unit Rent	Applicable UA	Non-Opt Charges	Proposed Gross Rent
EXAMPLE	Apt	1BR	4	Low	440		450	30	20	500

\*\*\*Attach Completed Utility Allowance Source Document\*\*\*

DESCRIPTION OF NON-OPTIONAL CHARGES: \_\_\_\_\_

If units are also receiving Federal or Local **Project-Based Rental Assistance** and proposed gross rents exceed the High HOME limit, **ALL** conditions below **MUST** be met.

- Are units designated as Low HOME? Yes No
- Are units occupied by households whose incomes are at or below 50% AMI? Yes No
- Are tenants' total payments (TPR+UA+Non-Opt Charges) not more than 30% of their adjusted income? Yes No

**ALLOW AT LEAST 60 DAYS TO PROCESS YOUR REQUEST AND UPON RECEIPT OF APPROVAL, TO GIVE THE TENANT THE REQUIRED NOTICE PER THE TERMS OF THE LEASE.**