



RENT INCREASE REQUEST MUST BE E-MAILED TO:
GVILLAMORENO@GLENDALEAZ.COM

REQUEST FOR RENT INCREASE [] DECREASE []

Before you submit your rent increase request, be advised that if the rent increase is denied, and the current rent charged is not deemed reasonable, you will be required to lower your current rent.

Your request must be submitted no less than 60 days before the annual recertification date (lease start date)

Date: _____

Tenant Name: _____

Landlord/Owner/Manager Name: _____

Tenant Address: _____

Landlord/Owner/Manager Address: _____

Landlord/Owner/Manager Email Address: _____

Form box containing instructions: If you are requesting a rental increase this year, complete the following FORM MUST INCLUDE RENT LESS CONCESSIONS - DO NOT INCLUDE WATER, SEWER OR TRASH. Current Rent: \$ _____ Requested Rent \$ _____ Date of Annual Recertification: _____ GHA will not grant a request for rent increase at any time other than the annual recertification date. **** If you sign a new lease and the rent increase is not approved, you will be required to modify and re-sign the lease. ****

By your signature below, you acknowledge you have properly notified the tenant of this request to raise the contract rent.

Landlord/Owner Signature: _____ Date _____

APARTMENT COMPLEXES- Owner's Certification. Program regulations require the PHA to certify that the rent charged to the housing choice voucher tenant is not more than the rent charged for other unassisted comparable units. When submitting a rent increase request, you must provide current rent roll or 1st page of lease of 3 comparable units. Your request will not be processed if the proper documentation is not provided.

FOR COMMUNITY HOUSING DIVISION USE ONLY

REQUESTED RENT APPROVED YES ___ NO ___
GHA Representative _____ Date _____

RENT INCREASE DENIED DUE TO UNTIMELY REQUEST
GHA Representative _____ Date _____