

WARREN HOUSING AUTHORITY

HOUSING CHOICE VOUCHER PROGRAM

RENT INCREASE REQUEST FORM

Landlord Name: _____

Address: _____

Date: _____

I hereby request a rent increase for _____ for the property located at
Tenant Name

_____ in the amount of _____ effective _____.
Address **amount** **1st of month 60 days
from request date.**

RENT INCREASE PROCESS:

1. Landlord submits Rent Increase Request to Warren Housing Authority
2. Warren Housing Authority determines rent reasonableness using Nelrod Rent Reasonableness
3. Warren Housing Authority notifies landlord and tenant in writing of approval or denial of rent increase.
4. **IF APPROVED:** Warren Housing Authority will make rent increase effective for 1st of the month following 60 days from WHA's receipt of the request.
5. **IF DENIED:** Warren Housing Authority will advise the landlord on the reasonable rent for the unit and allow the landlord to resubmit a modified Rent Increase Request.
6. A Notice of Rent Adjustment will be sent to the Participant and Landlord notifying both parties of the new Tenant Rent and HAP amounts.

Please do not hesitate to contact Warren Housing Authority with any questions or concerns.

Landlord Signature: _____

Date: _____

OFFICE USE ONLY

RECEIVED BY: _____

DATE: _____

WARREN HOUSING AUTHORITY

FAIR MARKET RENT AMENITIES CHECKLIST: FOR RENT INCREASES

Unit Address: _____

Landlord Name: _____ Phone: _____

Landlord Mailing Address: _____

Effective Date: _____

Basics:

Unit Size: _____

Bathrooms: _____

Current Monthly Rent: \$ _____

Requested Monthly Rent \$ _____

Year Built _____ Completely Renovated Yes / No Year Renovated _____

ELECTRIC INCLUDED **HEAT INCLUDED** **WATER INCLUDED** **GAS INCLUDED**

Please note in the Town of Warren, Sewer and Trash collection are provided by the owner as they are included in the owner's property taxes

Owner Provided Appliances:

Refrigerator Range/Stove Air Conditioning Microwave (*Efficiency Units Only*)

Owner Provided Amenities:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Basement/Attic | <input type="checkbox"/> Business/Fitness Center | <input type="checkbox"/> Cable/Internet Ready | <input type="checkbox"/> Carpeting |
| <input type="checkbox"/> Ceiling Fan | <input type="checkbox"/> Central A/C Unit | <input type="checkbox"/> Ceramic Tile Floors | <input type="checkbox"/> Clubhouse |
| <input type="checkbox"/> Covered and/or off Street Parking | <input type="checkbox"/> Deck/Balcony/Patio/ Porch | <input type="checkbox"/> Dishwasher | <input type="checkbox"/> Elevator |
| <input type="checkbox"/> Garbage Disposal | <input type="checkbox"/> Energy Eff. Cert. Unit | <input type="checkbox"/> Fenced | <input type="checkbox"/> Garage |
| <input type="checkbox"/> Modern Appliances | <input type="checkbox"/> Handicap Accessible | <input type="checkbox"/> Hardwood Floors | <input type="checkbox"/> Laundry Facilities |
| <input type="checkbox"/> Refrigerator | <input type="checkbox"/> Playground/Courts | <input type="checkbox"/> Pool | <input type="checkbox"/> Range |
| <input type="checkbox"/> Window/Wall AC Unit | <input type="checkbox"/> Security System | <input type="checkbox"/> Storage | <input type="checkbox"/> Washer/Dryer Hookups |
| | <input type="checkbox"/> Working Fireplace | <input type="checkbox"/> Yard Sprinkler System | |

Other Amenities: Please List: _____ _____ _____

Housing Services:

- Package receiving for tenants Free basic cable or wi-fi Elderly transportation
 Lawn upkeep or snow removal (for single family units only) Children Day Care Center

Maintenance Services: Owner provides **on-site** maintenance Owner provides **off-site** maintenance