



REQUEST FOR RENT INCREASE

Chattanooga Housing Authority, Housing Choice Voucher Program
801 N. Holtzclaw Ave., Chattanooga, TN 37404

Each request MUST include the attached form, signed by both landlord and tenant. All approved rent increases will be effective the first day of the month following a 60 day written request to our office. (Ex: A request rec'd on 9/5, increase would be effective 12/1)

PLEASE COMPLETE THE FOLLOWING INFORMATION:

Tenant Name: _____

Unit Address: _____ Apt#: _____

City: _____ State: _____ Zip Code: _____

Type of Unit: Single Family Apartment Duplex Manf/Mobile Home

Number of bedrooms _____ No. Baths _____ 1/2 Baths _____ Yr. Built _____

Square Footage _____ Garage Yes No Carport Yes No

Utilities Included W/rent- Elect Gas Water Sewer Stove Refrig

Current Monthly Rent \$ _____ Proposed New Rent \$ _____ Effective Date _____

RENT REASONABLENESS CERTIFICATION

A rent reasonableness determination will be performed to determine if the proposed rent is reasonable. The rent reasonableness test evaluates the unit on several factors including the overall unit condition, age, size, location, services provided and amenities.

HAP CONTRACT INFORMATION

Print Name of Owner: _____

Owner Address: _____

Telephone: _____ Fax: _____

SS#/Taxpayer ID#: _____ Email: _____

Print Name of Property Manager/Agency: _____

Agency Address: _____

Telephone: _____ Email: _____

Certification: I hereby certify that the foregoing information is correct and no changes will be made without written notice to the Tenant and Chattanooga Housing Authority. Inquiries may be made to certify facts and statements contained herein.

Signature of Owner/Property Manager Title Date

Attached form MUST be completed and signed by both tenant and landlord/property management!



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Tenant Name: _____

Tenant Address: _____ Apt. # _____

City: _____ State: _____ Zip Code: _____

Current Monthly Rent: \$ _____ Proposed New Rent: \$ _____ Effective Date: _____

Dear Chattanooga Housing Authority, voucher holder:

Your landlord/property manager is requesting an increase to your contract rent as stated above. By signing below, you acknowledge that you are aware of this request, and if the rent increase is approved, you, the tenant may be responsible to pay the entire increased portion. If approved, your landlord/property manager will ask you to sign a lease addendum/lease renewal that is required by the Chattanooga Housing Authority (CHA) in order for payment adjustments to be processed. If you choose not to sign this form, or the lease addendum/lease renewal, your landlord/property manager may decide to send you a Notice to Vacate. If this happens, you may turn in a completed Request to Relocate form with CHA, so that you may relocate with your voucher.

Tenant Signature: _____ Date: _____

Tenant Phone: _____ Email: _____

Landord/Property Manager Signature: _____ Date: _____

FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

Approved Monthly Rent\$ _____ Approved By: _____ Eff Date: _____

Rent Reasonableness Certification Attached: Yes ___ No ___ Annual Anniversary Month: _____