## **RENTAL ADJUSTMENT PROCEDURE**

After the anniversary date of the first year of the lease and Housing Assistance Payment (HAP) contract, owners may request an adjustment in the contract rent.

The rental adjustment will only be applied to those tenants who have surpassed the one-year mark of their tenancy. We require a 60-day advance notice in writing to both the tenant and Houston Housing Authority in order to approve the rental adjustment. If proper notice to the client or the Houston Housing Authority is not provided, the rental adjustment cannot be effective on the date requested. Once we receive the proper notice, we will inform you of the new effective date.

Owners and Managers are <u>required</u> to submit **two (2)** documents in order for the Houston Housing Authority to process a rent adjustment, **1) the Houston Housing Authority 'Landlord Rent Adjustment Request Form'** which is available in our front lobby, **2) Tenants acknowledgement of Rent Adjustment Request Form**. This is to be submitted to: Houston Housing Authority, indicate on the outside of the envelope – 'Rent Adjustment Request', or you may drop it off at the Houston Housing Authority's reception desk and receive a receipt.

Each unit will be processed individually for a rental adjustment. If an owner/manager has more than one unit and wants a rental adjustment on several units at the same time, the Rental Adjustment Procedure will be followed for each individual unit. The owner/manager will need to submit both the Houston Housing Authority 'Landlord Rent Adjustment Request Form' and a copy of the written rent increase notice for each client. Group rent adjustments are <u>not</u> allowed.

The rental adjustment request will then go through the Rent Reasonableness Process. Once rents have been approved and deemed reasonable by our market analyst, we will process the rental adjustment request.

HOUSTON HOUSTON HOUSING AUTHORITY Transforming Lives & Communities

2640 Fountain View Drive Houston, Texas 77057 | 713.260.0600 P| 713.260.0547 TTY | www.housingforhouston.com

Owner's Name:     Clinical INFORMATION       Owner's Name:     Clinical Name:       Address:     Address:       Cip:     State:       Zip:     Cip:       Telephone number:     Clinical Name:       Regrest Rent:     Vendor Number:       Image State:     Vendor Number:       Image State:     Vendor Number:       Carce Willing:     Townhouse       Sequer Vesage:     Ven Vendor Number:       Carce Willing:     Number of Madreems:       Image State:     Vendor Number:       Carce Willing:     Number of Madreems:       Place cicle each assently where applicable.     Place State:       Carges     Yes       Not:     Telephone number:       Carges     Yes       Not:     Clinical Number:       Carges     Yes       Main:     Place State:       Carges     Yes       Not:     Clinical Number:       Carges     Yes       Not: <th>OWNER INFORMATION</th> <th></th> <th></th> <th></th> <th>CU</th> <th>INT INFOR</th> <th>M</th> <th>TION</th> <th></th> <th></th> <th></th> <th></th>	OWNER INFORMATION				CU	INT INFOR	M	TION					
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Inclosed Balcony/PatioNstorage Room       Yes       No       Trash Collection         Gated complex/Community       Yes       No       Air Conditioning         Assigned parking, # of spaces       Yes       No       Refrigerator         Assigned parking, # of spaces       Yes       No       Refrigerator         Lawn Care (If serviced by owner)       Yes       No       Refrigerator         Lawn Care (If serviced by owner)       Yes       No       Refrigerator         Leaving Source       Central       Wall       Space       Range / Microwave         Other:	Laundry Facilities/ W & D Hook ups	Yes			Sewer								
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Are all units assisted   Yes   No       Individually Owned:   Yes   No         Comparable #1       Rent Amount       Date Rented         Address of Unit (Include Apt #)       # of Bedroom(s)/Bath(s)         Comparable #2       Rent Amount       Date Rented         Address of Unit (Include Apt #)       # of Bedroom(s)/Bath(s)         Comparable #3       Rent Amount       Date Rented         Address of Unit (Include Apt #)       # of Bedroom(s)/Bath(s)         Comparable #3       Rent Amount       Date Rented         Address of Unit (Include Apt #)       # of Bedroom(s)/Bath(s)         As the Owner, I am aware that:       I am not permitted to live in the unit while I am receiving housing assistance payments.         Are you the parent, legal guardian, child, grandparent, sister, brother, stepparent or stepchild of any member of the tenant family?       Yes   No						ee comparabi	e ua	ita below on	una	ssisted u	inits that are n	i the	
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\$       # of Bedroom(s)/Bath(s)         Comparable #3       Rent Amount       Date Rented         Address of Unit (Include Apt #)       # of Bedroom(s)/Bath(s)         Address of Unit (Include Apt #)       # of Bedroom(s)/Bath(s)         As the Owner, I am aware that:       # of Bedroom(s)/Bath(s)         I am not permitted to live in the unit while I am receiving housing assistance payments.       Are you the parent, legal guardian, child, grandparent, sister, brother, stepparent or stepchild of any member of the tenant family?       Yes         Manager       Owner       Agent       Manager         Signature       Date       Telephone Number         Return this form ONLY if you are requesting a rental adjustment. Attach a copy of your notice of rental adjustment to your tenant.	Address of Unit (Include Apt #)								#	f Bedr	room(s)/Bath(s)		
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Comparable #3       Rent Amount       Date Rented         Address of Unit (Include Apt # )       # of Bedroom(s)/Bath(s)         As the Owner, I am aware that:       # of Bedroom(s)/Bath(s)         I am not permitted to live in the unit while I am receiving housing assistance payments.       Are you the parent, legal guardian, child, grandparent, sister, brother, stepparent or stepchild of any member of the tenant family?       Yes         Mone       Owner       Agent       Manager         Signature       Date       Telephone Number         Return this form ONLY if you are requesting a rental adjustment. Attach a copy of your notice of rental adjustment to your tenant.       Attach a copy of your notice of rental adjustment to your tenant.													
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Revised: 02-11-2011

(HHA Only) Date Received:

2640 Fountain View Drive Houston, Texas 77057 | 713.260.0600 P | 713.260.0547 TTY | www.housingforhouston.com

## TENANT'S ACKNOWLEDGEMENT OF RENTAL ADJUSTMENT REQUEST

## This form is to establish that owner and tenant, by mutual written agreement, have agreed to a request for rental adjustment.

To Tenant: Please review this notice carefully prior to signing the Tenant's Acknowledgement of Rent Adjustment Request below. Your signature indicates that you have been notified of the proposed rental adjustment.

To Owner: On or after the anniversary of the first year or term of the lease and HAP contract, owners may request a rent adjustment. All adjustment requests submitted to the Agency must be requested in writing and include a Tenant's Acknowledgement of Rent Adjustment Request that is signed by the owner and the tenant. Rent adjustments, if determined reasonable by the Authority, are effective the first day of the first month commencing on or after the contract anniversary date or 60 days from the first of the month following receipt of the owner request, whichever is later. In order for the tenant to remain in the unit, the new rent must meet rent reasonableness. If it does not, the Agency will advise the owner of the rental amount that has been deemed reasonable by market rent analysis or allow the owner to submit alternative comparable leases in an effort to negotiate the increased amount. If the owner cannot prove a higher market rent and will not accept a rent amount counter-offered by the Agency, the tenant will be issued a voucher to move to a program acceptable unit.

## Please indicate the following:

Address of Unit	 ZIP	City	State
Current Lease <i>Beginning</i> Date	/		
Current Lease <i>Expiration</i> Date	//		
Is this Lease a Month-to- Month lease?	Yes No		
Current Rent	\$		
Newly Proposed Rent	\$		
Proposed Effective Date	//		

**Confirmation of Tenant:** 

I confirm that I have read this notice and have been informed regarding the increase in rent specified in this notice.

Tenant's Name (print)

Date

Affirmation of Owner:

I affirm the truth of all statements made in this notice. I have also provided a copy of this form to the tenant for their records.

**Owner's Name (print)** 

**Owner's Signature** 

Phone #

**Email Address** 

Date

**Tenant's Signature** 

Phone #