

RENT INCREASE REQUEST TO TAMPA HOUSING AUTHORITY

Date				
Tenant				
Street Address				
City, State, Zip code				
Current Rent:	\$	Requested rent: \$		\$
Number of Bedroom:		Number of Bathroom:		
Unit type (select one)	☐ Single Family Detached (House) ☐ Mobile Home		☐ Low-Rise/Apartment/Garden☐ High-Rise	
	☐ Row House / Town Hous	e / Duplex	☐ Other:	
Year built		Square Foo	tage:	
Effective date (Reexam Date)				
	reasonable and comparable g Authority will review each red HUD's rent reasonableness e a direct impact upon the to if your requested rent cannot both the tenant portion of rethose changes. g this process, please contact program. Please email/fax	ming changes Trash to other mar equest and d criteria. It is a enant's rent. ot be approve ent and THA' t the Housing	ket rents of lik etermine if it on also important ed. Otherwise, s Housing Assist	can be approved based to remember that an your new rent will be stance Payment. You ank you for participatir
Owner/Manager				
Owner Street Address				
City, State, Zip code				
Phone & email				
Signature				

NOTICE TO INCREASE RENT TO FAMILY (TENANT)

Tenant	
Street Address	
City, State, Zip code	
Date	
Dear Tenant:	
This notice is to inform you that I am r	equesting an contract rent ("Rent") increase from \$ (current rent)
to \$ (<i>new rent</i>) for	the property you lease located at address listed above.
	g submitted to the Tampa Housing Authority for approval. Therefore, if
	for your Lease Agreement on the Effective Date will be
\$	
NOTE: This change MAY also increase	your portion of the contract rent under the Housing Choice Voucher
Program. If you decide to terminate t	he Lease Agreement, you must provide proper notice to both the THA and
the owner AS OUTLINED IN THE LEASE	
Owner/Manager	
Owner Street Address	
City, State, Zip code	
Phone & email	
Signature	

CC: Tampa Housing Authority