

## **Housing Authority of the City of Austin**

1124 South IH 35, Austin, Texas 78704 (512) 477-1314 Fax (512) 494-0686 www.hacanet.org

## **RENT CHANGE REQUEST FORM**

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Required Tenant Information: (One form per tenant rent adjustment)						
Name:						
Address:						
City , State				Zip Code		
Current Rent	\$	NEW Proposed Rent	\$			
No. of Bedrooms		No. of Bathrooms				
Additional Information:						
During the initial lease term, the owner must not change the rent.						
After the initial occupancy period, subsequent requests for rent adjustments must be consistent with and in						
accordance with the lease between the owner and the family. The owner and family must first negotiate the rent for						
a unit.						
• All rent increase requests are subject to a rent reasonableness analysis. Rent increases will not be approved unless						
any failed items identified by the most recent HQS inspection have been corrected.						
• HACA will determine whether the requested increase is reasonable within <b>10</b> business days of a "Passed" HQS						
inspection, or if no inspection is due, within 14 business days of receipt of the request. The owner will be notified of						
the determination by EMAIL or in writing.						
<ul> <li>After the initial occupancy period, rent requests received 60 to 180 days before the Annual effective date</li> </ul>						
are e	ffective with the upcoming <u>Annual Reexamination</u> .					
o Rent	<ul> <li>Rent requests received less than 60 days before the Annual effective date and after are effective 60 days</li> </ul>					
after	the request date and then the 1st of the following month					
<ul> <li>For Additional information regarding HACA's Housing Quality Standards Policies, Chapter 8 (www.Hacanet.org/HQS)</li> </ul>						
Attach supporting unassisted units with market rates /comparables documentation to this form to assist in the rent						
reasonableness analysis. This is optional but recommended.						
Print or Type Name of <u>Owner/Owner Representative</u>						
Signature						
Business Address						
Telephone Number		Date (mm/dd/yyyy)				

**Owner/Owner Representative EMAIL**