

**RENT INCREASE REQUEST**  
**TO TAMPA HOUSING AUTHORITY**

|                              |  |
|------------------------------|--|
| Tenant                       |  |
| Street Address               |  |
| City, State, Zip code        |  |
| Current Rent                 |  |
| Requested Rent               |  |
| Bedroom Size                 |  |
| Effective date (Reexam Date) |  |

- Are there any similar market rate units in the same complex? Yes / No  
If yes, what is the asking rent? \_\_\_\_\_
- Is this unit a tax credit unit? Yes / No
- Is this unit subsidized with any other federal funding? Yes / No  
If yes, what type? \_\_\_\_\_
- Are there any **utility responsibility changes** with this request? Yes / No  
If yes, please check **tenant paid utilities** for the upcoming changes:  
 Electric     Water     Sewer     Trash     Gas

**Remember:** All rents must be rent reasonable and comparable to other rents of like properties in the neighborhood. The Tampa Housing Authority will review each request and determine if it can be approved based upon specific comparable data and HUD’s rent reasonableness criteria. It is also important to remember that an increase in the total rent may have a direct impact upon the tenant’s rent.

The THA will promptly notify you if your requested rent cannot be approved. Otherwise, your new rent will be included in a revised calculation of both the tenant portion of rent and THA’s Housing Assistance Payment. You will receive a document reflecting those changes.

If you have any questions regarding this process, please contact your Housing Counselor. Thank you for participating in the THA’s Housing Choice Voucher Program.

Please email request to the housing counselor assigned to the family. This information can be found at [www.thafl.com](http://www.thafl.com)

|                       |  |
|-----------------------|--|
| 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 requesting an increase of \$\_\_\_\_\_ to the contract rent (“Rent”) for the property you lease located at address listed above. The increase will be effective the first day of \_\_\_\_\_, 20\_\_ (“the Effective Date”).

A copy of this request is also being submitted to the Tampa Housing Authority for approval. Therefore, if approved by the THA, the new rent 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 the 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**