

Rent Increase Request

HUD regulations state that all requests for rent increases or a new lease agreement must be submitted in writing to the Public Housing Authority at least 60 days prior to the effective date of the increase/lease agreement. You or a subsequent agent cannot change the rent amount once this form is received in our office. Please complete this form in its entirety and submit by email to the City of Phoenix Housing Department at section8landlord@phoenix.gov or assigned Housing Program Representative. Failure to complete and sign the required form may result in a denial of your rental increase.

Owner/Property Name						
Contact Email						
Contact Phone						
Reason for Request Standard Rent Increase Decrease Change in Utility Responsibility						
Type of Unit						
Single Family Detached Apartment/Condominium Townhouse						
Tenant Name						
Unit Address Apt#						
City ST Zip						
Current Rent						
Square Footage						
Number of Bedrooms Number of Bathrooms						
Electric Provider SRP APS						
Requested Rental Amount						
Condition of Unit						
Year Constructed						
Check box for amenities provided by landlord						
Washer Dishwasher Washer/Dryer hookups Gated Community Dryer Microwave Garbage Disposal Pool Stove Refrigerator Ceiling Fan						

 Services prov 	ded				
Landscaping		Pes	st Control	Pool Maintenance	
2. Parking and E	xterio	r Features			
Carport (1 car) Carport (2 car) Garage (1 car)		Garage (2 c Garage (3 c Assigned	ar) 🔲 E	Open Parking Balcony Porch	Deck Patio
Utility Information (ch	eck b	oxes)			
Does the information below - The owner shall provide - The tenant shall pay for t	or pay f	or the utilities and	appliances indicate	ed by a "O".	No
Item	Spec			Paid By	
Heating		Natural Gas	Electric		
Cooking		Natural Gas	Electric		
Water Heating		Natural Gas	Electric		
Other Electric		Natural Gas	Electric		
Water/Sewer/Trash					
Refrigerator	Appl	liance provided			
Range/Microwave					
For Multi-housing Units that the rent charged to the unassisted comparable unassisted units within the Address and unit number	ne Hou nits. C e prem	sing Choice Voud complete the follo	cher tenant is not wing section for r	more than the rent ch most recently leased co	arged for other
			Date Rented	Rental amount	4
1.					_
2.					
3.					
I certify that the information the rent requested is not greathat the request may result exercise their right to move must thoroughly evaluate m market-rate units in the vicin request to change the rent request to increase the redetermined at any time if the for other comparable unassistant.	eater that It in an I	an the rent for any of increase in the test including this rent st including comparts and the subject unit. This int. 2) A decrease unt. I also understing Department find	other unassisted unant's portion of increase request, ring the requested s could result in on in the current renand that the rent for	nit in the building or area the rent and that the te I understand that the Ho rent to rents charged for e of three outcomes 1) A t amount or 3) An appr or this unit may be reduce	a. I understand nant may using Department r comparable, A denial of the roval of my ed or re-
Owner Signature				 Date	