



FORT WORTH
HOUSING AUTHORITY
"INVESTING IN THE COMMUNITY"

Rent Increase/Change in Utilities Request

Date:

Apartment or Owner Name:

Vendor Number:

Address of Unit:
(please include zip code)

of Bedrooms: # of Baths: Sq Footage:

Client Name:

Current Unit Contract Rent: Requested Unit Rent:

Requested CHANGE in payment of utilities ☐

Tenant CURRENTLY PAYS: (check all that apply)

Electric: ☐ Water: ☐ Gas: ☐ Trash: ☐ None: ☐

CHANGE to tenant pays: (check all that apply)

Electric: ☐ Water: ☐ Gas: ☐ Trash: ☐ None: ☐

Please note: Rent increases or changes in utility payments will not be processed unless you return a new signed lease with correct and accurate information as noted in the Rent Increase letter you will receive. Failure to provide the requested documents within the specified timeframe or failure to provide accurate information will result in denial of the requested rent increase or utility change.

Rent Increase: Approved ☐ Denied ☐

Approved Contract Rent: Start Date:

Inspector:

