TEL: 404-270-2500 HOUSING CHOICE VOUCHER FAX: 404-270-2643 www.dekalbhousing.org

750 Commerce Drive Suite 200 Decatur, Georgia 30030



# **RENT INCREASE FAQs**

# **INCREASING RENT**

## Q. How often can rent be increased?

**A.** After the initial lease term has ended, rent can be increased once every 12 months. No rent increases will be approved during the initial lease term.

## Q. Are there rules regarding the effective date of a rent increase?

**A.** Yes! All rent increases must take place on the first of the month and must be submitted to the Housing Authority of DeKalb County (HADC) at least 60-days prior to the desired effective date. HADC will adjust non-compliant dates to the nearest compliant date.

## Q. Is there a dollar or percentage limit to how much a rent can be increased?

**A.** No! However, all rents are tested using a HUD approved third party service against similar <u>rented/leased</u> units in the area. If requested rent is above the average rent, the rental increase will be denied and a counteroffer will be made for the average rent found. Otherwise, the increase will be approved. The tenant has the option to accept or refuse the increased rent amount and may exercise their right to move as a result.

# **GENERAL INFORMATION**

### Q. Who do I submit my paperwork to?

**A.** If you are solely requesting a rent increase, complete page 2 and submit this entire document to <u>rentincreases@dekalbhousing.org</u>. If your request includes a change of utility responsibility, complete the **Change of Utility Responsibility Form** (in addition to the Rent Increase Request Form). Documents may also be submited via fax to (404) 270-2643 or via mail using the address found at the top of the page.



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# **RENT INCREASE REQUEST FORM**

To request a rental increase for a tenant/unit, please submit this completed form and any supporting documents by e-mail to rentincreases@dekalbhousing.org or via the mail to the address located at the top of this form.

#### **Tenant/Unit Information:**

Tenant		Tenant/Voucher # (Optional)
Street Address		Apt/Unit #
Owner Information:		
Owner/Vender Name (as registered with HADC	)	Owner/Vendor #
Street Address		Apt/Unit #
Email Address		
Requested Rent:		
Requested Rent		t 60 days after submitting this form to the HADC <u>AND</u> must be on the liant effective date will be moved to the nearest, compliant effective

#### Acknowledgement and Signatures:

I certify that the information provided on this form is complete and accurate to the best of my knowledge and that the rent requested is not greater than the rent for any other unassisted unit in the building. **As an owner**, I understand that the request may result in an increase in the tenant's portion of the rent and that <u>the tenant may exercise the right to move as a result</u>. Conversely, **as a tenant** I understand that the request may *not* result in an increase of rent and that <u>the owner may exercise the right to issue the tenant a notice to vacate the unit</u> in accordance to the terms and policies stated in the lease and Housing Assistance Payment (HAP) contract.

Tenant Signature

Date

Owner Signature

Date

August 2017

