

## HOUSING AUTHORITY OF THE CITY OF LAREDO



Section 8 Housing Choice Voucher Program 2000 San Francisco Ave. Laredo, TX 78040 Phone: (956)722-0221 ● Fax: (956)753-4113 E-mail: section8@larha.org

## **REQUEST FOR RENTAL CHANGE**

Participating landlords in the Housing Choice Voucher Program may request a rental change after the initial year lease term. In order to be approved, this form must be completed with landlord signature. This form must be submitted to LHA for approval **60 days prior to the anniversary date** for the consideration and does not provide an "automatic approval" for the rental increase requested.

LHA will determine if the requested rent is reasonable by comparing your rent to those of equivalent units in the private market. If LHA determines your proposed rent is not reasonable, LHA must deny your request. If the rent comparable study results in an amount lower than your current rent, LHA must decrease the rent amount in accordance with HUD regulations.

TO BE COMPLETED BY THE OWNER/LANDLORD					
City:	State:	Zip code:	-		
-	Number:		-		
What is the current ren What is requested new	t for unit? \$ rent for unit? \$				

Reason(s) for requesting this rental increase: (Please provide a brief explanation and supporting documentation for the request)

- □ Increased of cost insurance premiums
- □ Increase in property tax rates
- Other

PleaseExplain):\_\_\_\_\_

By executing this request, I certify that the unit is in decent, safe and sanitary condition and the participant is in compliance with the terms and condition of the lease agreement.

Landlord/Owner/Agent Signature			Date	
		LHA Official use or	nly	
Rent Increased	🗆 Re	nt Decreased	Rent Denie	d
Unit type:	Year built:	Unit Size:	Anniversary Date	e: / /
Processed by: Notes:			tract rent: \$	per month