

HOUSING AUTHORITY OF THE COUNTY OF COOK

175 W. JACKSON BLVD, SUITE 350
CHICAGO IL 60604-3042
(312) 663-5447

Rent Increase Request Form

Vendor number:		Client Number:	
Landlord Name:		Client Name:	
Landlord Address:		Client Address:	
Landlord City, State, Zip:		Client City, State, Zip:	

The policy regarding rent increases is as follows:

- The owner must not change the rent during the initial lease term. Subsequent requests for rent adjustments must be consistent with the lease between the owner and the family. After the initial occupancy period, the owner may request a rent adjustment in accordance with the owner's lease. Rent increases will not be approved unless any failed items identified by the most recent HQS inspection have been corrected.
- The owner and family first negotiate the rent for a unit and submit the negotiated rent to the assigned housing specialist. If the rent request submitted is greater than the payment standard in effect, the client will be contacted for notification of the effect to their rent portion. Payment Standards are subject to change at any time. Any amount requested over the payment standard will remain the client's rent portion regardless of any future income changes.
- **All rent increase requests are subject to a rent reasonableness test and may be denied.** Increase over 5% are subject to additional review and may not be approved. The HACCC may request owners to provide information about the rents charged for other units on the premises if the premises include more than 4 units. In evaluating the proposed rents in comparison to other units on the premises, the HACCC will consider unit size and length of tenancy in the other units.
- **All rent increases will be effective the first of the month 60 days after the HACCC's receipt of the owner's request or on the date specified by the owner, whichever is later.**

Date of Request:	
Current Rent Amount:	
Proposed Rent Amount:	
Renewal Month:	

By signing this document I agree to the proposed rent amount. I have read and understand the policy as it is written above. I understand that this is only a request and is subject to Housing Authority approval. I understand that the increased rent amount may increase the amount the tenant pays and not the amount of the subsidy payment.

Landlord's Signature

Client's Signature

For Housing Authority Use only:	Rent increase Approval Amount:	Effective Date:	Reviewed by:
Date Stamp by Mail Room:			