

TTY

REQUEST FOR RENT INCREASE AND RENT REASONABLENESS STUDY

Date:		
Name of Tenant:		
Address of Tenant:	Unit # (If Applicable):	Zip:
Current Rent: \$ Requested	Rent (including taxes) \$	
 ✓ Scottsdale Housing Agency (with an 60 calendar days prior to implementa 		Il increase requests <u>in writing</u>
Effective Date: (Check expiration of lease, if applicable) Month	Day Y	/ear
Utility Company (circle all that applies) AP	S SRP Southwest Gas City of	Scottsdale
Utilities Included:	D No	
Reason for Rent Increase:		
Name of Landlord:	Telephone:	
Address of Landlord:	City	State Zip Code
Bedroom Size of Unit (circle one) Studio 1	2 3 4	
Please Circle One: Garden Walk Up	Row/Townhouse Single Family	
 Both parties must sign this request. Please be advised we will conduct a rent reasonable survey in the area your unit is located. In the event the rental increase amount is not approved, you will be notified by our agency. A copy of this request must be sent to the tenant copying them of the increase. This form acts as an addendum to the original lease. 		
Owner/Agent Name	Owner/Agent Signature	Date
Tenant/Head of Household	Tenant/Head of Household Signature	Date
COPIES TO:		
 Program Participant (Tenant/Head of Housh Scottsdale Housing Agency 	iold)	
FOR STAFF USE ONLY		
Initial approval of rental increase:	re/Title	Date

