

# Easton Housing Authority

Parker Terrace, North Easton, MA 02356  
508-238-4747 FAX 508-230-9694

## Request for Rent Increase

Please complete this form and the attached Rent Comparison Form. Any applicable documentation must be attached to the completed forms. Please return your request at least sixty days prior to the effective date of the rent increase.

### Part A: Rental Unit Information:

Landlord Information	Tenant Information
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Owner/Agent: \_\_\_\_\_

Tenant: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone # \_\_\_\_\_

Phone # \_\_\_\_\_

### Part B: Rent Increase Information

Current Charged to Family \$ \_\_\_\_\_

Amount Requested Increase \$ \_\_\_\_\_

Effective Date \_\_\_\_\_

### Part C: Reason for Increase

Lease Renewal

Other (please specify) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Owner      Signature

Date

**Part D: Rent Reasonableness Unit & Comparable Unit Information**

Please fill in the requested information for the proposed unit below. If you would like to submit additional information on three comparable units that support your requested rent, please complete the optional columns. The optional comparable units need to be within the immediate neighborhood/ rental market of the proposed unit.

<b>Unit Information</b>	<b>Required Assisted Unit</b>	<b>Unit #1</b>	<b>Unit #2</b>	<b>Unit #3</b>
Unit Address Apt # (be specific)				
Square Feet				
Date Built				
# of Bedrooms				
# of Bathrooms				
Other Amenities				
Utilities Included Ex: Heat/ Gas,				
Monthly Rent				
Subsidized	Yes / No	Yes / No	Yes / No	Yes / No
Administering Housing Authority				

I \_\_\_\_\_ landlord/ property manager,

- Certify that the information that I have provided is correct to the best of my knowledge.
- Understand that I may not charge rent for a Section 8 assisted unit that is in excess of rents currently being charged for comparable unassisted units.
- Understand that if the rent requested is rejected, I must amend the lease to reflect the reasonable rent.
- Understand that I may not charge the tenant for a rent amount not approved by EHA.

\_\_\_\_\_  
Signature of Landlord/ Manager

\_\_\_\_\_  
Date

**PROPERTY LISTING FORM**
**LANDLORD CONTACT INFORMATION**

\*First Name: \_\_\_\_\_  
 \*Last Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 \*Email: \_\_\_\_\_  
 \*Primary Telephone Number: (\_\_\_\_) \_\_\_\_\_  
 Alternate Telephone Number: (\_\_\_\_) \_\_\_\_\_

**PROPERTY LOCATION (STEP 1)**

\*Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Unit Number: \_\_\_\_\_  
 \*City: \_\_\_\_\_ \*State: \_\_\_\_\_  
 \*Zip: \_\_\_\_\_  
 County: \_\_\_\_\_

**PROPERTY INFORMATION (STEP 2)**

<b>*Rent Amount:</b> \$ _____	<b>*Security Deposit:</b> \$ _____ <input type="checkbox"/> Negotiable	<b>*Bedrooms:</b> ____ <b>*Baths:</b> ____	<b>*Date Available:</b> ____/____/____	<b>*Square Footage:</b> _____ <b>*Yr Built:</b> ____	<b>Pets Allowed:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Lot Size:</b> _____
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**\*Property Type:**  House  Townhouse/Villa  Apartment  Condo  Mobile Home  Row House  Duplex  Triplex  4Plex  
 (Check one)

**AMENITIES AND ACCESSIBILITY (STEP 3)**

<b>Indoor:</b> <input type="checkbox"/> Ceiling Fans <input type="checkbox"/> Furnished <input type="checkbox"/> Fireplace <input type="checkbox"/> Cable Included <input type="checkbox"/> Security System	<b>Laundry Type:</b> <input type="checkbox"/> W/D Hook-ups <input type="checkbox"/> Washer <input type="checkbox"/> Dryer <input type="checkbox"/> Onsite Laundry <input type="checkbox"/> Washer/Dryer	<b>Heat Type:</b> <input type="checkbox"/> Baseboard <input type="checkbox"/> Space <input type="checkbox"/> Boiler <input type="checkbox"/> Central <input type="checkbox"/> Heat Pump <input type="checkbox"/> None <input type="checkbox"/> Radiator <input type="checkbox"/> Window/Wall	<b>Kitchen:</b> <input type="checkbox"/> Dishwasher <input type="checkbox"/> Stove <input type="checkbox"/> Garbage Disposal <input type="checkbox"/> Refrigerator <input type="checkbox"/> Microwave	<b>Outdoor:</b> <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Gated Community <input type="checkbox"/> Lawn Care Included <input type="checkbox"/> Trash Removal Included <input type="checkbox"/> Fenced Yard	
<b>Parking:</b> <input type="checkbox"/> 1 Car Carport <input type="checkbox"/> Unassigned <input type="checkbox"/> 2 Car Carport <input type="checkbox"/> Assigned <input type="checkbox"/> 1 Car Garage <input type="checkbox"/> Driveway <input type="checkbox"/> 2 Car Garage <input type="checkbox"/> Street <input type="checkbox"/> 3 Car Garage <input type="checkbox"/> None	<b>Exterior:</b> <input type="checkbox"/> Balcony <input type="checkbox"/> Deck <input type="checkbox"/> Patio <input type="checkbox"/> Porch	<b>Other:</b> <input type="checkbox"/> Age Restricted <input type="checkbox"/> Pest Control Included	<b>Utilities: (Electric Paid By)</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner	<b>Heating Fuel:</b> <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Oil	<b>Heating Fuel Paid By:</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner
<b>Water Type:</b> <input type="checkbox"/> Well Water <input type="checkbox"/> City Water	<b>Water Paid By:</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner	<b>Hot Water Fuel Type:</b> <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane	<b>Hot Water Paid By:</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner	<b>Cooking Fuel Type:</b> <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane	<b>Cooking Paid By:</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner
<b>Sewer Type:</b> <input type="checkbox"/> Septic Tank <input type="checkbox"/> Public Sewer	<b>Sewer Paid By:</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner	<b>Cooling Type:</b> <input type="checkbox"/> Central <input type="checkbox"/> None <input type="checkbox"/> Window/Wall	<b>Cooling Paid By:</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner	<input type="checkbox"/> Accessibility: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Description:</b> _____ _____	