Rent Increase and Utility Changes – Required Documents

We continue to value your contribution to providing affordable housing to our clients and our community through Columbus Metropolitan Housing Authority’s (CMHA) Housing Choice Voucher Program. In an effort to inform our landlords and streamline our process CMHA has created this informational sheet to provide assistance regarding our rent increase and utility change process.

All increases and/or utility changes are subject to processing within 60 days after CMHA receives the appropriate documents. Request for rent increases and/or utility changes must be submitted to CMHA 60 days prior to the proposed effective date. Please ensure that you provide proper notification to your tenants and all of the required documentation to CMHA. In the event you fail to submit all of the necessary documents to CMHA all of the original documentation will be returned to you with a letter explaining why we are unable to process your request. All requests will need to be resubmitted and this may change the effective date of your request.

**Required Documents For Rent Increases**

- Rent Review Request Form *(form HCV-1039)*
  - Please ensure that this form is completed in its entirety.
- A copy of the 60 day notice provided to the tenant regarding the proposed rent increase.
  - The notice must specifically state the effective date and the proposed rent amount.
- A current copy of the rent roll if applicable (all properties with 20 or more units must submit a rent roll).

Upon receipt of the required documents CMHA will run a Rent Reasonableness report to determine the new contract rent amount. If a rent increase is not approved, owners must wait an additional six months before submitting a new rent increase request. Only one increase will be approved in a 12-month period.

**Please Note:** If the Rent Reasonableness determination results in a downward change in rent, your contract rent amount may be subject to a reduction.

**Required Documents For Utility Changes (water and sewer only)**

- Rent Review Request Form *(form HCV-1039)*
  - Please ensure that this form is completed in its entirety.
- A copy of the 60 day notice provided to the tenant regarding the change in utility responsibilities.
  - The notice must specifically state the effective date of the utility change.
- Lease addendum (signed by the landlord and the tenant).
  - The addendum must specifically state the effective date and list the change in responsibility of the utilities.

Upon receipt of the required documents CMHA will run a Rent Reasonableness report to determine the new contract rent amount.

If the landlord wishes to change the responsibility of any other utility a new request for tenancy approval and lease must be submitted to CMHA.

If any questions or concerns arise please contact the Inspections Department at rrlandlordinquiries@cmhanet.com
Rent Review Request Form

Tenant Name: __________________________________________________________  Client ID #: ____________________

Unit Address: ___________________________________________________________  City: ________________________  Zip: _______________

Move in Date: __________________________________________________________  Landlord/Vendor ID#:______________________________

Owner Name: __________________________________________________________  Owner Phone: ______________________________________

Owner Address: _________________________________________________________  City: ________________________  Zip: _______________

Unit Specifics

Current Rent: ______  Requested Rent: ______  Type: (House, Apt, Town/Row, Duplex, Condo) ________________________

Number of Bedrooms: ________________  Year Built: _______________  Approx. Sq. Ft.:______________  Bathrooms:__________

Circle One:     Rent Increase      Utility Change    Effective Date of Increase/change: ______________________________________

Unit Amenities

(place a ✓ next to all amenities that apply):

Washer: ______  Dryer:_______  Washer/Dryer Hookups:_____  Onsite Laundry Facility:___  Stove: (Gas ______ Electric _____)

Dishwasher: ___  Microwave: _____  Refrigerator:_______  Garbage Disposal:______  Ceiling Fan:_______  Pool:______

Air Conditioning: None___  Window____  Central___

Parking: Driveway _____  Street: _____  Assigned: _____  Unassigned: _____  Garage: (1 Car____  2 Car ____)

Gas: Gas Heat______ Electric Heat_____  Hot Water: Gas Heated Hot Water_____  Electric Heated Hot Water_____

Utility Responsibilities

(place a “T” if the tenant pays or an “L” if the landlord pays)

Electric: ______  Gas: ______  Water: ______  Sewer: ______  Trash: ______

Please Note: If the Rent Reasonableness determination results in a downward change in rent, your contract rent amount may be subject to a reduction. Please submit all documents via mail or fax to CMHA – Inspections Department

Mail:     880 E. 11th Avenue, Columbus, OH 43211     or    Fax To : 614-294-2686

For CMHA Use Only

Rent Request Approved (Yes/No):__________  Utility Change Approved (Yes/No):__________

Rent Reduced (Yes/No):__________  Amount of new Rent: $ ________

CMHA Representative: ___________________________ Date: _________________________

HCV-1039-Rent Increase Request Form (02/01/2016)