Notice to Tenants of Intention to Submit a request to HUD for Approval of an Increase in the Maximum Possible Rents

Date of notice: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

method of delivery: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Take note that on [DATE] we plan to submit a request for approval of an increase in the maximum permissible rents for [Name of Apartment Complex] to the Contract Administrator (CA), Southwest Housing Compliance Corporation (SHCC). The proposed increase is needed for the following reasons:

1.

2.

3.

The rent increases for which we have requested approval are:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Present Rent | | Proposed Increase | | Proposed Rent | |
| Bedrooms | Basic | Market | Basic | Market | Basic | Market |
|  |  | $ | $ | $ |  |  |
|  |  |  |  |  |  |  |
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A copy of the materials that we are submitting to SHCC in support of our request will be available during normal business hours at [address] for a period of 30 days from the date of service of this notice for inspection and copying by tenants of [Name of Apartment Complex] and, if the tenants wish, by legal or other representatives acting for them individually or as a group.

During a period of 30 days from the date of service of this notice, tenants of [Name of Apartment Complex] may submit written comments on the proposed rent increase to us at [address]. Tenant representatives may assist tenants in preparing those comments. (If, at HUD or SHCC’s request or otherwise, we make any material change during the comment period in the materials available for inspection and copying, we will notify the tenants of the change or changes, and the tenants will have a period of 15 days from the date of service of this additional notice (or the remainder of any applicable comment period, if longer) in which to inspect and copy the materials as changed and to submit comments on the proposed rent increase.) These comments will be transmitted to SHCC, along with our evaluation of them and our request for the increase. You may also send a copy of your comments directly to the Contract Administrator at the following address: SHCC, Attn: Contracts Department, 1124 South IH 35 Austin, Texas 78704 Re: [Apartment Complex Name and Project Number].

SHCC will approve, adjust upward or downward, or disapprove the proposed rent increase upon reviewing the request and comments. When SHCC advises us in writing of the decision on our request, you will be notified. If the request is approved, any allowable increase will be put into effect only after a period of at least 30 days from the date you are served with that notice and in accordance with the terms of existing leases.

[Name of Owner of Managing Agent]

[Owner or Project Name] Partnership does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities.

The person named below has been designated to coordinate compliance with the nondiscrimination requirements contained in the Department of Housing and Urban Development’s regulations implementing Section 504 (24 CFR, part 8 dated June 2, 1988).

[Name] [Address] [Telephone/Voice] [Tel;ephone/TTY]