



RENT INCREASE REQUEST (RIR)
PLEASE ONLY SUBMIT ONE

The Denver Housing Authority must receive at least 60 days' advance notice of the rent increase request.
(Example Effective Date: DHA receives RIR on March 15, 2020; the RIR will not be effective before May 1, 2020)

Today's Date: _____

Owner Name:	Tenant Name:
Owner Address MUST include the zip code:	Tenant Address MUST include the zip code:
Owner Telephone Number:	Tenant Telephone Number:
Owner Signature:* (required)	Owner, please provide a copy of the Rent Increase notice that was given to your tenant.
Current Contract Rent: \$	Requested Contract Rent: \$
Date of LAST Rent Increase:	Requested effective date:

Rent Increase Approvals Are Based on Rent Reasonableness (RR):

The rent to owner **will not exceed** the reasonable rent as determined/re-determined by DHA.
The rent to owner for an HCV participant should not exceed the rents charged to unassisted tenants in comparable units who have been in the property for approximately the same amount of time. Rent Increase requests that do not meet Rent Reasonableness will not be approved.

Increasing the rent does not require a new lease.

DHA does not require a new lease unless there is a change in utility/appliance responsibility, appliance type (i.e. from Gas to Electric) or a change in the lease term.

Please select one of the following:

No New Lease (e.g. Leasing Month to Month) <input type="checkbox"/>	Lease Renewal (No Change to Utility/Appliance Responsibility/Appliance Type. Provide Lease Renewal) <input type="checkbox"/>	New Lease (Change in Lease Terms, Appliance, Utility/Appliance Responsibility) <input type="checkbox"/>
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If New lease/lease renewal document(s) are required prior to the rent increase effective date.

This (RIR) may be submitted using any of the following methods:

E-Mail: S8Landlords@denverhousing.org (preferred)

Mail: DHA, Attention: HCV Division, PO BOX 40305, Denver, CO 80204-0305

FAX: (720) 932-3002 **In Person:** HCV Department, 1401 Mariposa St, Denver, CO 80204

***** **(To be completed by the Denver Housing Authority)** *****

(RIR) – Meets RR (Yes/No)	Approved (RIR) Amount: \$	Approved Effective Date:	Last Inspection Passed (Yes/No)	Approving Manager:
HP Negotiated Rent Amount: \$	Approved Negotiated Rent Amount: \$	Approved Effective Date:	Last Inspection Passed (Yes/No)	Approving Manager:

