Letters to Owners/Agents

Option 2 and 4

< <name>> <<company>> <<address>> <<address>></address></address></company></name>	< <date>></date>
SUBJECT:	Automatic OCAF Rent Increase < <project name="">> <<contract number="">> Rent Comparability Study Expires: <<date>></date></contract></project>
Dear << Owner/	Agent>>:
eligible for an a	ect name>> is in a multi-year Housing Assistance Payments Contract and, as such, is utomatic rent increase to become effective < <rent date="" effective="" increase="">>. The rent s <<0.00>>. The debt service amount used in the calculation of new rents is<<0.00>>.</rent>
the attached Ext	you elect this rent increase, the new rents for << Project name>> will be as indicated on nibit A. Complete, execute and return three (3) forms HUD-92458 Rent Schedule Low o your HUD/PBCA within 10 days of receipt of this package.
Complete the Pr	below which rent increase option is to be applied in the upcoming contract year. roject information section that follows, and return this Notice and any attachments to your thin 10 days of receipt of this package (check one).
	I elect to receive the attached automatic rent increase.
	I elect to receive the attached automatic rent increase, and am submitting a Utility Analysis and recommendation for a change to the Utility Allowances. Supporting documentation is enclosed.
	I request a zero budget-based rent adjustment in lieu of the OCAF adjustment and understand that this will result in renewed funding at current rents. I further understand that the OCAF adjustment for this year may not be recouped retroactively in the future. If applicable, I am submitting a Utility Analysis and recommendation for a change to the Utility Allowances. My signature on this letter certifies that I have reviewed the project's income and expenses and they are at levels that will enable me to continue to provide decent, safe and sanitary housing.
	I request a Budget Based Rent Increase for the upcoming contract year. The required documentation for this rent increase is enclosed. If applicable, I am submitting a Utility Analysis and recommendation for a change to the Utility Allowances.
	Other:

. ,	that the debt service amount of $<<0.00>>$ and the non-section 8 rent is true, accurate and complete to the best of my (our) knowledge and
Project Name:	
Owner Name:	
Owner Signature:	Date:
Should you have any or response to the attention of	questions, please contact our office. It is very important that you send your
	< <signature line="">> <<title>></td></tr></tbody></table></title></signature>

OMB Control #2502-0587 Exp. (10/31/2012)

"Public reporting burden for this collection of information is estimated to average 1 hour. This includes the time for collecting, reviewing, and reporting the data. The information is being collected for purposes of determining rent adjustments and will be used for estimating new rents. Response to this request for information is **required in order to receive the benefits to be derived**. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number. **No confidentiality is assured.**"