Request to Renew Using FMRs as Market Ceiling

Project Name: _____ **Project No:** _____ **Contract No(s):** _____

I am requesting to renew the above Section 8 contract(s) under Option 2 of Notice 99-36 using 75% of FMRs as a market rent ceiling instead of performing a Rent Comparability Study. I believe both the current and proposed Section 8 rents are below market rents for similar units in the Section 8 project's market area.

FMRs used below are from FMR schedule published in _____ for _____, the county or MSA where project is located. Proposed rents were calculated using the OCAF/ budget procedures from Attachment 4 of Notice 99-36. ***The OCAF/ budget worksheet is attached.***

Increase factor from 99-36's Attmt 4: [ ] ***Complete columns 1-4, 6 and 9. Spreadsheeet will compute the***

1	2	3	4	5	6	7	8	9	10	11	12
Units Renewing			**Sec 8 Contract Rent**			**Sec 8 Gross Rent**			**Sec 8 Gross Potential**		
Unit Type	**# of Units**	**Sq. Ft.**	**Current**	**Proposed** (col 4 x factor)	**Utility Allowance**	**Current** (Cols 4 + 6)	**Proposed** (Cols 5 + 6)	**FMR**	**Current** (Cols 2 x 7)	**Proposed** (Cols 2 x 8)	**FMR** (Cols 2
								Total			
								75% of FMR pot'l →			
								Total/ FMR Pot'l			

Both current & proposed potential must be < 75% of FMR potential.

I certify this table is accurate to the best of my knowledge and belief.

Warning: If you knowingly make a false statement on this form, you may be subject to civil penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosure of information, including intentional non-disclosure, is subject to civil money penalty not to exceed

_____ _____ _____

Owner Name **Owner Signature** **Date**

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

"Public reporting burden for this collection of information is estimated to average 1 hours. This includes the time for collecting, reviewing, and reporting the data. The information is being collected for purposes of determining new rents in an assisted property and will be used for that purpose. 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."