## Request to Renew Using Small Area Fair Market Rents (SAFMRs) as Market Ceiling

This form is used for the renewal of Section 8 Housing Assistance Payments contracts as authorized under the Multifamily Assisted Housing Reform and Affordability Act of 1997 (MAHRA), 42 U.S.C. § 1437f note. The public reporting burden for completing this form is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, and gathering and maintaining the data needed. HUD may disclose certain information to Federal, State, or local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. The information collected is required to obtain benefits. Information collected will not otherwise be disclosed or released outside of HUD, except as required and permitted by law. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Project name:	
Contract No(s).	
Project No	
of SAFMRs (or FMRs if the project is not in a SAFMR area)	ider Option 2 of the Section 8 Renewal Policy Guidebook using 90% as a market rent ceiling instead of performing a Rent Comparability are below market rents for similar units in the Section 8 project's
code, county, or MSA in which the project is located. Propos	olished on (mm/dd/yyyy) for, the ZIP sed rents were calculated using the OCAF/budget procedures from OCAF/ budget worksheet is attached. ( <i>Complete columns 1 through</i>
Increase factor from Chapter 4:	

Increase factor from Chapter 4:										
1	2	3	4	5	7	8	9	10	11	12
Units Revie	wing		Sec 8 Contract Rent		Section 8 Gross Rent		Section 8 Gross Rent			
Unit Type	# of Units	Sq. Ft.	Current	Proposed (Col. 4 x factor)	Current (Cols. 4+6)	Proposed (Cols. 5+6)	SAFMR/ FMR	Current (Cols. 2 x 7)	Proposed (Cols. 2 x 8)	SAFMR/ FMR Potential (Col. 2 x 9)
							Totals			
90% of Total FMR Potential <sup>1</sup>										

<sup>&</sup>lt;sup>1</sup> Both the current total and the proposed total must be less than 90 percent of the total SAFMR or FMR potential.

confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §§ 3729, 3802)
Owner name (print or type)
Owner signature
Date (mm/dd/yyyy)

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and accurate. WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including