OMB Control Number 2502–0587
form HUD–9626; exp. 04/30/2027

Letter to Owners/Agents
Options 1 and 3

This form is used in the adjustment of Section 8 Housing Assistance Payments contract rents as authorized by 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 15 minutes per response, including the time for reviewing instructions, searching existing data sources, and gathering and maintaining the data needed. The information collected is required to obtain benefits. HUD may disclose certain information to Federal, State, or local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. 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.

<<Name>> <<Date>>
<<Company>>
<<Address>>
<<Address>>

SUBJECT: Automatic OCAF Rent Increase
<<Project name>>
<<Contract number>>
Rent Comparability Study Expires: <<Date>>

Dear <<Owner/Agent>>:

<<Project name>> is in a multi-year Housing Assistance Payments Contract and, as such, is eligible for an automatic OCAF rent increase to become effective <<Rent Increase Effective Date>>. The rent increase factor is <<0.00>>. The debt service amount used in the calculation of new rents is <<0.00>>.

Should you elect this rent increase, the new rents for <<Project name>> will be as indicated on the attached Exhibit A. Complete, execute, and return three (3) forms HUD–92458 (*Rent Schedule Low Rent Housing*) to your HUD/PBCA within 10 days of receipt of this package.

Indicate below which rent increase option you are requesting for the upcoming contract funding year. Complete the Project information section that follows, and return this Notice and any attachments to your HUD/PBCA within 10 days of receipt of this package (*check one*).

- I elect the attached automatic OCAF rent increase.
- I elect the attached automatic OCAF 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 **(Not available for Option 3).**
- Other: _____

I/We, the undersigned, certify under penalty of perjury that the information provided above, including the debt service amount of <<0.00>> and the non–section 8 rent potential amount of <<0.00>>, is true and accurate.

_____
Project name

_____
Owner name (print or type)

_____
Owner signature

_____

Date (mm/dd/yyyy)

Should you have any questions, please contact our office. It is very important that you send your response to the attention of _____.

<<Signature Line>>

<<Title>>