



**Request for Rent Adjustment/Changes in Lease or Rent**

Revision Date: May 21st, 2025

Requests to increase or decrease the contract rent will be considered **once** in a 12-month period. **California law AB1482 limits the amount rent can be increased. See Section 1947.12 of the Civil Code for more information.**

- Read all items carefully and answer all questions.
- Read and sign the owner’s acknowledgement and certification on page 2.
- Attach a copy of the 60-day (or 90-day notice when rents are requested greater than 10 percent) of rent increase with proof of service.
  - o The tenant’s signature on the notice will be considered proof of service, or
  - o A separate Proof of Service document signed by the person who served the notice.
- Include the new lease addendum signed by all parties “if” there are any changes to tenant or owner responsibilities for utilities or appliances.

Owner:	Tenant:
Phone Number:	Unit Address:
Email:	City/Zip:
Office Use Only → Vendor Code: _____ Tenant Code: _____	Office Use → Property Code: _____ Voucher Size: _____

**Check the applicable boxes:**

- PHA Owned
- Change in Contract Rent (Attach the Notice with **proof of service**)
- Change in responsibilities (utilities/appliances)
- The unit is exempt from AB-1482 Exempt (informational link here) <https://fresnohousing.org/wp-content/uploads/2021/09/AB-1482-QA.pdf> (Attach docs)

1. Proposed Rent	2. Effective Date	3. # of Bedrooms	4. # of Bathrooms	5. Sq. Footage	6. Year Built
7. Water Owner Tenant	8. Garbage Owner Tenant	9. Sewer Owner Tenant	10. PG&E/So Cal Owner <input type="checkbox"/> Tenant	11. Stove Owner Tenant	12. Refrigerator Owner Tenant

AMENITIES-Additional Information used in determining rent reasonableness			
<u>Property Condition</u> <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Average <input type="checkbox"/> Above Average <input type="checkbox"/> Excellent	<u>Building Quality</u> <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Average <input type="checkbox"/> Above Average <input type="checkbox"/> Excellent	<u>Unit Type</u> <input type="checkbox"/> Apartment <input type="checkbox"/> Duplex <input type="checkbox"/> House <input type="checkbox"/> Mobile Home <input type="checkbox"/> Town House	<u>Other</u> <input type="checkbox"/> Microwave Provided <input type="checkbox"/> Laundry room on site <input type="checkbox"/> Washer/Dryer Hookup <input type="checkbox"/> Washer/Dryer provided <input type="checkbox"/> Dishwasher <input type="checkbox"/> Garbage Disposal
<u>Cooling System</u> <input type="checkbox"/> Swamp Cooler <input type="checkbox"/> A/C Window/Wall <input type="checkbox"/> A/C Central <input type="checkbox"/> Ceiling Fan <input type="checkbox"/> Other	<u>Parking</u> <input type="checkbox"/> 1-Carport <input type="checkbox"/> 2-Carports <input type="checkbox"/> 1-Car Garage <input type="checkbox"/> 2-Car Garage <input type="checkbox"/> 3-Car Garage	<u>Community</u> <input type="checkbox"/> Gated Community <input type="checkbox"/> Lawn Care <input type="checkbox"/> Pest Control <input type="checkbox"/> Swimming Pool	<u>Upgrades:</u>

Office Notes:

**(See Acknowledgement and Certification on next page)**

Owner Acknowledgement and Certification		
The program requires the PHA to certify that the rent charged to the housing choice voucher tenant is not more than the rent charged for other unassisted comparable units. The owner agrees to reduce the Housing Assistance Payment (HAP) contract rent in accordance with 24 CFR 982.507 if unassisted comparable units in the area result in a lower reasonable rent.		
Owners of projects of more than 4 units must complete the following section for comparable <b>unassisted</b> units leased within the <b>premises</b> in the past 6 months.		
Address and Unit Number	Date Rented	Rental Amount
1.		
2.		
3.		

**Check all applicable boxes before signing below:**

- I hereby certify that I am the owner or duly authorized representative of the subject property. I attest that the requested amendments to the Housing Assistance Payment (HAP) contract are being submitted in accordance with federal, state and local law. I also attest that that all information is true and if all documents listed below are not submitted in accordance with the applicable laws and procedural requirements that the request may be denied.
- I have attached copies of proper notices of rent increases with proofs of service.
- I have included new lease addendums signed by all parties "if" there were any changes to tenant or owner responsibilities for utilities or appliances. Check here if not applicable .
- I have attached Proof of AB1482 Exception, if applicable. Check here if you are not exempt .

\_\_\_\_\_  
Signature of Owner/Agent \_\_\_\_\_  
Date

**Please submit by one of the following methods:**

Email: <a href="mailto:hcvrentadjustments@fresnohousing.org">hcvrentadjustments@fresnohousing.org</a> Fax: (559) 445-8980	Mail: HCV Owner Services 1331 Fulton Street Fresno, CA 93721
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OFFICE USE ONLY			
_____ Date Received	_____ Reviewer's Name	_____ Reviewers Signature	_____ Date Completed

Move in Date:		\$	Old	New
Date Passed HQS:		CR\$		
Rent Requested:		HAP \$		
Rent Approved:		TR \$		
<input type="checkbox"/> Rent Reasonable test results in a lower contract rent		URP \$		
<input type="checkbox"/> Request is disapproved due to incomplete information or improper notice to tenant				
Comments:				

## **Additional Instructions**

- Use the most recent version of the Request for Rent Adjustment form; last revised May 21st, 2025 . The most current version can be found at <https://fresnohousing.org/wp-content/uploads/2025/03/Request-for-Rent-Adjustment-2.2025.pdf>
- One Rent Adjustment form is required for each HCV tenant.
- HAP contract amendments are required:
  - If there are any changes in lease requirements governing tenant or owner responsibilities for utilities or appliances;
  - If there are any changes in lease provisions governing the term of the lease;
  - If the family moves to a new unit, even if the unit is in the same building complex.
- All requests must be submitted to the family and FH at least 60 days prior to the effective date of the proposed rent adjustment unless a 90-day notice is required (when rents are requested greater than 10 percent).
- The amount of the rent to owner following any such agreed change may not exceed the reasonable rent for the unit as most recently determined or re-determined by FH in accordance with HUD requirements.
- If you are EXEMPT from AB1482 the box must be marked and documentation attached to the rent increase request form. If it is not, then the maximum amount approved per AB1482 will be allotted after the rent reasonable evaluation.

You should receive the results of your request within 45-60 days after the request is received. There can be **NO** change in the tenant's portion of rent or housing assistance payment **UNTIL** this process is complete.

## **What is a Rent Adjustment?**

A rent adjustment is a formal request to increase or decrease the existing contract rent. The owner/agent can request that the contract rent be increased or decreased. The following steps must take place before the request can be approved:

1. The owner/agent must submit a **COMPLETED** Rent Adjustment form to Fresno Housing (FH)
2. The unit must have passed Housing Quality Standard Inspection within the last twelve months.
3. The effective date of the change will be the first day of the month. Effective dates cannot fall in the middle of the month.
  - a. Examples: 60 Day Notice served December 10<sup>th</sup>, 2023; effective 2/10/2024; rent adjustment effective date will be 3/1/2024.
4. In order for the rent adjustment to be effective in a timely manner, Fresno Housing must receive the documents within 10 business days from the date notice was served to the tenant. Requests received after 10 days will be processed in the order they're received and may not be approved for the requested effective date.

## **What happens when my rent adjustment is disapproved?**

If the request was disapproved, **ALL** documents will be returned to you with a letter stating why the increase was disapproved. Here are a few reasons why the request would be disapproved:

- An outdated request form was submitted.
- The Rent Adjustment form was turned in without a 60-day notice or proof of service was not attached.
  - The tenant's signature on the notice will be considered proof of service, or
  - A separate Proof of Service signed by the person who served the notice.
- The 60-day notice is turned in without the Rent Adjustment form.
- The unit has not passed an HQS inspection within the past 12 months.
- The Rent Adjustment form is incomplete, i.e. not all boxes are complete, missing signature, etc.
- The tenant is in the transfer process or moved completely from the unit.
- The unit is at maximum rent based on comparable units within the area and the rent cannot be negotiated.
- The tenant has lived in unit for less than one (1) year.

If you have questions, you may call Owner Services at (559)443-8400 ext. 5622, or email at [\*\*hcvrentadjustments@fresnohousing.org\*\*](mailto:hcvrentadjustments@fresnohousing.org)