



Lake County Housing Authority
33928 North U.S. Highway 45, Grayslake, IL 60030



Rent Increase Request (Email to: reportchange@lakecountyha.org)

Rent increase requestss should be turned in no later than 60 days prior to the anniversary date of the HAP contract.

Date: _____

Landlord/Property Management Name

Tenants Name

Subsidized Unit Street Address

Apt #

City, State, Zip Code

Landlord Mailing Address

City, State, Zip Code

Telephone #

Email Address

Section A:

Current rent amount \$ _____ Requested rent amount \$ _____

Requested effective date _____ (must give LCHA a minimum of 60-day notice prior to the lease renewing)

Section B:

Type of House/Apartment:

Single Family ☐ Detached Semi-Detached/Row House ☐ Manufactured Home ☐

Garden / Walkup ☐ Elevator / High-Rise ☐

Section C:

Has there been a change in utility responsibility? Yes ☐ No ☐

Please fill out the chart below.

The owner shall provide or pay for the utilities and appliances indicated below by an "O". The tenant shall provide or pay for the utilities and appliances indicated below by a "T". Unless otherwise specified below, the owner shall pay for all utilities and appliances provided by the owner.

Item	Specify fuel type			Paid by
Heating	Natural gas <input type="checkbox"/>	Bottle gas <input type="checkbox"/>	Oil Electric <input type="checkbox"/>	
Cooking	Natural gas <input type="checkbox"/>	Bottle gas <input type="checkbox"/>	Oil Electric <input type="checkbox"/>	
Water heating	Natural gas <input type="checkbox"/>	Bottle gas <input type="checkbox"/>	Oil Electric <input type="checkbox"/>	
Other Electric				
Water				
Sewer				
Trash Collection				
Air Conditioning				
Refrigerator				
Range/Microwave				

Owner Signature

Date



UNIT CHARACTERISTICS

This form is to be used for a **new move-in RFTA** (Request for Tenancy Approval **AND** for a **Request for Rent Increase** Packet. Please complete all boxes under "Characteristics" that apply.

Please be advised, in the event the proposed rent must be negotiated based on tenant affordability or rent reasonableness, the landlord/owner will have 1 business day to reach a decision once notified.

Categories	Description	Characteristics
<i>Size & Type</i>	Actual # Bedrooms	
	# Bathrooms	
	# Half-Bathrooms	
	Living Area Sq. Ft.	
	Property Type: e.g. Apt., House, Townhouse, Condo, Duplex, etc.	
<i>Age, Condition And Quality</i>	Year Built	
	Property Condition: Fair or Good	
	Building Quality: e.g. Fair, Good, etc.	
<i>Utilities</i>	Sewer Type: public sewer or septic tank	
	Water Type: city or well	
	Cooling Type: central, window unit or none	
	Heating Style: e.g. central, furnace, baseboard, boiler, radiator or window unit	
<i>Parking</i>	Garage	Street
	Covered Spaces	Open
	Uncovered Spaces	None
	Driveway	
	Unassigned	
<i>Amenities</i>	Indoor Cable Included Dryer W/D Hookups Ceiling Fans Washer Onsite Laundry	
	Kitchen Dishwasher Microwave Stove Garbage Disposal Refrigerator	
	Outdoor Balcony Gated Community Pool	
<i>Maintenance</i>	Trash Removal Included in Rent	
	Lawn Care Included in Rent	
	Pest Control Included in Rent	



Please list any upgrades or improvements to the unit within the last year that would assist in justifying the requested rent increase:
