

Approval of Rent Schedule FOR ALL COH DESIGNATED UNITS	Housing and Community Development Department	
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Name:	Contract Number: FC #:	Effective Date: Notable: In-case of rent increase for existing tenants, a 30-days notice to tenant(s) must be issued.
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Part A - Apartment Rents

	(A) <u>Unit Type</u>	(B) <u># of Units</u>	(C) <u>Actual Rent</u>	(D) <u>Utility Allowances</u>	(E) <u>Rent + UA (C+D=E)</u>	(F) <u>HUD Max. Rent Limits</u>
Low						
Subtotal:		() Low units				
High						
Subtotal:		() High units				
Total Designated Units: ()						
Market						
Total no. of all category units:						

Are the designated units also Layered with Tax-Credit program? (**Yes or NO**):

Important: In-case of layered units, the lowest rent-limits shall be adopted from both programs.

Notes:

Part B - Utilities

Utilities: For each item please enter E = electric, G = gas, or ABP = all bills paid for the type of service.

Heating_____ Hot Water_____ Lights, etc._____ Cooling_____ Cooking_____

Owner/Owner's Representative	Date	HCDD Approval	Date
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