



Request for Rental Increase

Please submit the request by mail, in person, email or fax to: Attn: Rent Increase

Request • 2001 Gandy Blvd. N, St. Petersburg, FL 33702 •

Rentincreaserequest@stpeteha.org Email • (727) 328-6699 Fax

(Request must be received at least 60 days prior to the lease end date to be considered for approval)

Part I. Owner Information

Owner: _____ Agent: _____

Address: _____ City/State/Zip: _____

Phone: _____

Owner/Agent Signature: _____ Date: _____

Part II. Tenant Information

Name: _____

Unit Address: _____

City/State/Zip: _____

Lease Effective Date: ____/____/____

Requested Rent: \$_____

Current Rent: \$_____

Part III. Unit Information (Be sure to use information as stated on the Property Appraiser's website: www.pcpao.org)

Unit Type: (Circle one)	Size/Year:	Amenities: (Circle all that apply)	Community Features: (Circle all that apply)	Utilities Paid by: (Circle who pays)
Single Family	Number of Bedrooms: _____	Dishwasher	Gated Community	Electric: Landlord
Apartment	Number of Bathrooms: _____	Microwave	Fitness Center	Tenant
Townhouse	Sq. Ft: _____	Garbage Disposal	Pool	Water: Landlord
Hi-rise	Year built: _____	Granite Counters	Fenced Yard	Tenant
Duplex		Washer/Dryer	Balcony	Sewer: Landlord
Mobile Home		Central Air	Cable TV	Tenant
		Ceiling Fan(s)	Laundry Facilities	Trash: Landlord
				Tenant

Part IV. St. Petersburg Housing Authority Use Only

Rent Increase Approved? ☐ Yes ☐ No (Based on Rent Reasonableness) Increase Amount Requested: \$_____

Effective Date of Increase: ____/____/____

New Contract Rent: \$_____

% above FMR _____

% below FMR _____

Inspector: _____ Supervisor: _____

Date: ____/____/____

Date: ____/____/____