



Wayne E. Pollard
Director of Housing

TARRANT COUNTY
HOUSING ASSISTANCE OFFICE

Telephone: (817) 531-7640
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Rent Increase Request Form

I, _____, request a rent increase for my rental unit.
Print Name of Landlord

Located at _____
Address City Zip code

Occupied by _____
Tenant's Name

Current Rent: \$ _____ Requested Rent: \$ _____ Lease End Date: _____

Please state the reason for the rent increase: _____

Unit Information (check all that apply)

Type of Unit: ☐ House ☐ Apartment ☐ Duplex ☐ Manufactured/Mobile

Year Built: _____ Square Footage: _____

Number of Bedrooms: _____ Number of bathrooms: _____

Utilities Included: ☐ Electric ☐ Gas ☐ Propane ☐ Water ☐ Sewer ☐ Trash

TCHAO will not approve a rent increase where the requested effective date is during the initial term of the contract or during the term of a renewed lease. (If the landlord offers the tenant a new lease and the tenant accepts, the landlord must send TCHAO a copy of the new signed lease.)

TCHAO must receive the rent increase request at least **60 days** in advance of the requested effective date. **NOTE: If the request is made after the 1st of the month, and if approved, the earliest effective date will be the first of the month following at least 60 days.**

TCHAO will not process a rent increase request received more than **120 days** in advance of the requested effective date.

Signature: _____ Date: _____

RETURN FORM TO:

E-MAIL: TCHAOlandlord@tarrantcountytx.gov

MAIL: 2100 Circle Drive, Ste. 200, Fort Worth, TX 76119

FAX: (817) 850-2329

Office Use ONLY!

Date of Last Rent Increase: _____

Rent Reasonable: ☐ Yes ☐ No

Approved: ☐ Yes ☐ No If yes, amount approved: \$ _____

Signature: _____ Date: _____
TCHAO Representative

