OKLAHOMA HOUSING FINANCE AGENCY
Rent Increase Request Form

I, ______________________________, request a rent increase for my rental unit

Print Name of Landlord

located at ____________________________________________  City  Zip Code

Address

occupied by ____________________________________________

Tenant’s Full Legal Name

Current rent: $_______ New rent: $_______ Effective Date: __________________________

Please state the reason for the rent increase. _______________________________________

• OHFA 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 OHFA a copy of the new signed lease.)

• OHFA must receive the rent increase request at least 60 days in advance of the requested effective
date.

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

Landlord Signature ______________________________  Phone # __________________________

Unit Information (all information must be completed; circle all that applies)

Is this a Tax Credit unit? ______ Yes ______ No

If yes, is the Tax Credit development 100% Section 8 assisted? ______ Yes ______ No

Type of Unit: House  Apartment  Mobile Home  Duplex  Townhouse  Condo  Triplex  4 Plex

Year built: ________  Square Footage: ______________

Number of bedrooms: 0 1 2 3 4 5 6 7

Number of bathrooms: 1 1.5 2 2.5 3

Parking provided: 1 Space 2 Spaces 1 Carport 2 Carports 1 Car Garage 2 Car Garage None

Appliances Provided by Owner: Washer  Dryer  Stove  Dishwasher  Microwave  Refrigerator

Washer/ Dryer Hookups  Garbage Disposal

Utilities Paid by Owner: Gas  Electric  Propane  Water  Sewer  Trash

Air Conditioning: Central  Window/Wall Unit  None

Type of Heating: Central  Window/Wall Unit  Space Heater  Baseboard  Floor Furnace  Heat Pump

Other: Lawn care  Fenced Yard  Gated Community  Pest Control  Handicap Access

Ceiling Fan  Security System  Pool  Equipped for Hearing Impaired

Equipped for Sight Impaired 55+ (Age Restricted)

Please mail completed form to: Oklahoma Housing Finance Agency – Rent Increase Request
P.O. Box 26720  Oklahoma City, OK  73126-0720

(6/2020)