

Chicago Low-Income Housing Trust Fund - Budget Revision Request Form

Organization / Landlord Name: _____	Contact Name: _____	TOTAL # Units in Bldg _____
Property Address: _____	Contact Phone: _____	# of those Units Vacant Today: _____
Heat included as part of the Rent? _____		

Annual Budget Revision Request

					CURRENT TOTAL RENTS			TENANT INFORMATION				PROPOSED RENTS			
Tenant Name	Unit #	# Bdrms	Move In Date		Current Total Rent	Current Tenant Share	Current Subsidy	Tenant Yearly Income	Tenant Monthly Income	Tenant Family Size	Very Low (VL) or Extremely Low (EL)	Proposed Total Rent	Proposed Tenant Share	Subsidy Portion	Proposed Tenant Housing Cost Percentage of Total Income
A	EXAMPLE: John Doe	101	2	1/1/11	\$ 750	\$ 170	\$ 580	\$ 8,400	\$ 700	5	EL	\$ 800	\$ 225	\$ 800	32.1%
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															

CURRENT APPROVED ANNUAL SUBSIDY:	REVISED ANNUAL SUBSIDY REQUEST:
---	--

As part of my Rental Subsidy Program Agreement, I understand that any changes to the rent cost (including gross rent, tenant share, and subsidy share) MUST be approved by the Chicago Low-Income Housing Trust Fund PRIOR to change. If applicable, any approved change MUST be communicated to the appropriate service provider. IF NOT APPLICABLE WRITE N/A.

Signed: _____

NAME OF SERVICE PROVIDER NOTIFIED: _____

Date: _____

Date of Notification: _____

Chicago Low-Income Housing Trust Fund - Rent Roll

Organization / Landlord Name: _____

Property Address: _____

RENT ROLL									
	Bldg Address / Entry Way	Unit #	# Bdrms	Gross Rent	Heat Included?	Any other Utilities included?	Last Time Unit Decorated? (Only for Trust Funded Units)	Any Other Subsidy attached to Unit / Agency?	Other Comments
Example:	7522	101	2	\$ 800	YES	Gas Cooking	May, 2016	CHA / Section 8	New Furnace
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

Signed: _____

Date: _____

Please attach a listing of any other comparable apartments that would validate the rent rate increase request.