



REQUEST FOR RENT APPROVAL (MRVP Mobile Only): For New Lease-Ups and Rent Increases

(Increases only: Attach a copy of the original notice sent to the tenant)

Upon receipt of this form, Metro Housing|Boston will determine if the requested rent is reasonable by comparing rents of equivalent units in the private market. We will notify you in writing regarding the outcome of your request within thirty (30) days.

Mobile Rent Increase Eligibility Requirements:

1. The tenant must be notified in writing, and a copy of the request must be submitted to Metro Housing|Boston at least 60 days, but not more than 120 days, prior to the rent increase effective date.

2. Only one rent increase can be approved within any 12-month period and not during the initial lease term.

If the above criteria are not met, a rent increase cannot be considered at this time.

Please complete this form and send with any attachments to: Metro Housing|Boston, 1411 Tremont Street, Boston, MA 02120, Attn: Owner Services. You can also fax (617) 532-7563, or email <u>Ownerservices@metrohousingboston.org</u>. If you have any questions, you may call the Owner Services Team at (617) 425-6765.

1	Type of request (select app):	Now loopo up	Dent Inc					
1.		New lease-up		ease				
2. 3.	What is the requested rent for the unit? \$ Number of habitable bedrooms:							
3. 4.	Tenant Name:	-						
 5.	Rental Unit Address:			Unit #·	Citv/State/Zi	n.		
6.		Unit #:City/State/Zip: Property Manager (if different):						
7.	-	City/State/Zip:						
8.		ner's/Property Manager's Phone Number: Email: Email:						
9.		Single Family Detached						
	□ Row House/Town House □ Low-Rise (3 or 4 stories) □ High-Rise (5 or more stories) □ Multi-fa							
10.	Please complete the table below by indicating the fuel type and payment responsibility for each utility (required):							
	Utility Type	Fuel Type			Payment Responsibility			
	Heating fuel	🗆 Gas 🛛	Oil 🗆	Electric	□ Owner	□ Tenant		
	Cooking fuel	🗆 Gas 🗆	Oil 🗆	Electric	□ Owner	□ Tenant		
	Hot Water	🗆 Gas 🗆	Oil 🗆	Electric	□ Owner	□ Tenant		
	Other Electricity				□ Owner	□ Tenant		
	Water				□ Owner	□ Tenant		
11.	11. (Increase only) Will the payment responsibility for the utilities change?							
12. Question 12 (a-d) is optional but will aid in performing a more accurate market analysis.								
	a. Please indicate which of the following features and amenities are included in the rent: 🗆 Central AC 🗆 Refrigerator							
	🗆 Microwave 🛛 Assigned parking space 🖓 Parking garage 🖓 In-unit washer & dryer 🖓 W/D hook-up 🖓 Dishwasher							
	□ Other (specify):							
	b. How many bathrooms are in the unit? \Box 1 \Box 1.5 \Box 2 \Box Other:							
	c. What is the square footage of the unit? sq. ft.							
	d. What year was the property originally built? (if there have been recent renovations, attach documentation)							
(Increase Only) Tenant Notification (You must select at least <u>one</u>):								
I (the tenant) have acknowledged the notice of rent increase, and by signing I certify that the owner has notified me within the required timeframe.								
	Tenant Signature: Date: I (the owner) have attached a copy of the rent increase notice sent to the tenant at least sixty (60) days prior to the lease renewal. The tenant does <u>not</u> need to sign a rent increase request if they are properly notified <u>and</u> Metro Housing Boston receives a copy.							
By executing this request, I am certifying that the information above is true and correct:								

Signature of Owner or Property Manager: _____