



NHTF Program - Annual Rent Approval Form-2020

NHTF (Housing Trust Fund) (Fed Reg. 92-746) requires Participating Jurisdictions (PJ's) to review and approve rents annually for all multi-family NHTF assisted properties during their affordability period. **To comply with current regulations, you must submit this completed form, along with the current approved utility allowance chart and current HTF rent limits within 30 days of the release of the NHTF Rent Limits each year.** HUD published NHTF Rent Limits may be accessed at: <https://www.hudexchange.info/programs/htf/htf-income-limits/> You can locate the 2013 Home Final Rule relating to Utility Allowances at <http://www.kyhousing.org/Asset-MGMT/Documents/Utility%20Allowance%20Policy.pdf>. You must submit this information by emailing it to multifamilycompliance@kyhousing.org. Please email all questions to multifamilycompliance@kyhousing.org.

Project Name: _____ Award # (TDCS): _____

Project Address: _____

Project Completion Date: _____ County: _____

HTF Funding Agreement Date: _____

Directions: (A) Enter bedroom size and choose whether the unit is ELI or VLI (B) Enter total rent charged (B) Enter current utility allowance (c). The "Gross Rent" columns will auto-calculate if completed electronically. If you are not requesting a rent increase, please certify that by duplicating the "Current Rent Structure" in the "Proposed Rent Structure". column. HUD's published rent limit for unit size column. (D)

Current Rent Structure						Proposed Rent Structure						NHTF Rent
BR Size (A)	ELI - HTF Limit (30%)	VLI-HTF Limit (50%)	Current Rent (B)	U/A (C)	Gross Rent (B+C)	BR Size (A)	ELI-HTF (30%)	VLI-HTF (50%)	Rent (B)	U/A (C)	Gross Rent (B+C)	Pub. Rent Limit (D)
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				
	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>				



***You must include a copy of the current utility allowance chart or KHC utility allowance approval along with the current published rent limits. If the requested documents are not included in the Rent Approval packet, the project will be considered out of compliance per regulations.**

Please list below the total number of NHTF units located within your project: _____

NHTF Rent Limits applicable per project: _____% Effective date of NHTF Rent Limits: _____

NO# of 30% ELI-HTF units: _____ NO# of 50% VLI-HTF units: _____

Total # of Rental Assisted units: _____ Are assisted units: PBRA TBRA

By signing below, I certify that the information submitted on this form is true and correct and that I am aware of the following:

- KHC reserves the right to request additional information to support the need for rent increases.
- Any and all rent increases require a thirty (30) day written notice to tenants.
- Failure to receive KHC approval and/or provide tenants with proper notice of rental increases may require a reduction in rent and restitution paid to affected tenants.
- This document is exclusively intended for HOME Investment Partnerships Program and Housing Trust Fund (HTF) use only.
- Owners who fail to submit the Annual Rent Approval Form are subject to a finding and/or being placed on KHC's Suspension and Debarment List. <http://www.kyhousing.org/Documents/SuspensionandDebarmentPolicy.pdf>.

Comments: _____

Signature: _____ Date: _____

Printed Name: _____ Title: _____

Phone: _____ Email: _____

KHC Staff Use Only:

APPROVED INCREASE APPROVED NO INCREASE DENIED

Reviewed By: _____ Date: _____

Approved By: _____ Date: _____

Comments: _____