



## National Housing Trust Fund Annual Rent Approval Form 2022

National Housing Trust Fund (HTF) (Fed Reg. 92-746) requires Participating Jurisdictions (PJs) to review and approve rents annually for all multi-family NHTF-assisted properties during their affordability period. **To comply with 24 CFR 92.252, projects must submit this completed form with the current approved utility allowance chart and current HTF published 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/>. The 2013 Home Final Rule relating to Utility Allowances can be located at <https://www.kyhousing.org/Partners/Inspections-and-Compliance/Compliance/Documents/Utility%20Allowance%20Policy.pdf>.

Completed form should be emailed to [multifamilycompliance@kyhousing.org](mailto:multifamilycompliance@kyhousing.org).

Project Name: \_\_\_\_\_ Award # (TDCS): \_\_\_\_\_

Project Address: \_\_\_\_\_

Project Completion Date: \_\_\_\_\_ County: \_\_\_\_\_

HTF Funding Agreement Date: \_\_\_\_\_ Effective Date of 2022 Limits: 6/15/2022

Directions: (A) Enter bedroom size and choose whether the unit is Low or High HOME (B) Enter total rent charged (C) Enter current utility allowance. 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. (D) HUD's published rent limit for unit size.

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 Limit (30%)	VLI HTF Limit (50%)	Proposed Rent (B)	U/A (C)	Gross Rent (B+C)	Published Rent Limit (D)
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**\*A copy of the current utility allowance chart or KHC utility allowance approval must be included 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 NHTF units located within your project:**

**Total NHTF units only in project:** \_\_\_\_\_ **# of ELI HTF Units (30%):** \_\_\_\_\_ **# of VLI HTF (50%):** \_\_\_\_\_

**Total # of Rent 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. Best practice suggests no rent increases over \$50.00 per unit to prevent undue hardship on residents.
- 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 Housing Trust Fund 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. <https://www.kyhousing.org/Legal/Pages/Suspension-and-Debarment-Policy.aspx>.
- Please ensure you are utilizing the current year HTF Rent Limit chart prior to submitting request to KHC.

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: \_\_\_\_\_