

# HOME & HTF Rent Update Form

Email completed form to [homerentupdate@ihcda.in.gov](mailto:homerentupdate@ihcda.in.gov).

Property Name \_\_\_\_\_

Award # \_\_\_\_\_

\_\_\_\_\_ This property intends to change the charged rent amounts.

County \_\_\_\_\_

\_\_\_\_\_ This property has one of the following funding in addition to HOME

UA Method \_\_\_\_\_

\_\_\_\_\_ RHTC

\_\_\_\_\_ Section 8 (Housing Choice Vouchers)

\_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ Rural Development

\_\_\_\_\_ Project Based Section 8

\_\_\_\_\_ This property does NOT intend to change rent amounts.

## FILL OUT BELOW CHART

Set-Aside	30% 0BR	30% 1BR	30% 2BR	30% 3BR	30% 4BR	40% 0BR	40% 1BR	40% 2BR	40% 3BR	40% 4BR
Current Rent										
Proposed Rent										
Utility Allowance										
Total										
Set-Aside	50% 0BR	50% 1BR	50% 2BR	50% 3BR	50% 4BR	60% 0BR	60% 1 BR	60% 2 BR	60% 3 BR	60% 4 BR
Current Rent										
Proposed Rent										
Utility Allowance										
Total										

Name \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Email Address \_\_\_\_\_

THIS SECTION TO BE COMPLETED BY IHCD

\_\_\_\_\_ Approved \_\_\_\_\_ Denied

Name \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



We encourage and support the nation's affirmative housing program in which there are no barriers to obtaining housing because of race, color, religion, sex, national origin, handicap or familial status.

