



GHA REQUEST FOR RENTAL INCREASE

CITY OF GARLAND HOUSING
210 CARVER SUITE 201B
GARLAND, TX 75040
972-205-3388 FAX

1. LANDLORD INFORMATION (PLEASE PRINT)

DATE OF REQUEST: _____

NAME OF COMPLEX/OWNER: _____

ADDRESS OF COMPLEX/OWNER: _____

TELEPHONE NUMBER: _____ EMAIL ADDRESS: _____

2. TENANT INFORMATION

NAME OF TENANT: _____

ADDRESS OF UNIT: _____

CURRENT RENT AMOUNT: \$ _____ # OF BATHS: _____

PROPOSED RENT AMOUNT: \$ _____ # OF BEDROOMS: _____

3. UNIT AMENITIES

4. VOUCHER SIZE _____

PAID FOR BY

AMENITIES	OWNER	TENANT
HEATING		
COOKING		
HOT WATER		
OTHER ELECTRIC		
WATER		
SEWER		
TRASH		
RANGE		
REFRIGERATOR		

AMENITIES INCLUDED

DISHWASHER		GATED COMM.	
GARBAGE DISPOSAL		POOL	
MICROWAVE		BALCONY	
STOVE		LAWN	
CEILING FANS		PEST CONTROL.	
W/D HOOK UPS			
WASHER		DRYER	

PLEASE EMAIL COMPLETED FORM TO kgorman@garlandtx.gov

GARLAND HOUSING MUST RECEIVE THE UPDATED LEASE WITHIN 15 DAYS OF THE NEW LEASE DATE OTHERWISE FUTURE PAYMENTS WILL BE PLACED ON HOLD