

RENT CHOICE FORM

Tenant: _____ App #: _____ Account #: _____

Development: _____ Apt: _____

This is to certify that the computation of my rent amount has been explained to me and I have been provided with the choice of Income Based or Flat Rent. Based on the information provided to me, I elect to use the following method:

- Income Based Rent Calculation** \$
(30% of my adjusted annual income)
- Flat Rent Calculations by Bedroom Size:** \$
(Flat rents include utility allowance subsidy)

I understand that, if I experience a **Financial Hardship** in accordance with 24 CFR 960.253. Financial Hardship: Residents who choose flat rents may request to change to an income-based rent at any time if the family is unable to pay the flat rent because of financial hardship. A financial hardship exists for these purposes when a family's income reduced or their deductions are increased to the extent that a income-based rent is lower than the flat rent. I may switch from paying flat rent to income based rent if:

My family has experienced:

- [] Decrease in income:
 [] Loss or reduction of employment
 [] Death in family
 [] Reduction or loss of earnings or other assistance
 [] Other

My family has experienced:

- [] Increase in expenses:
 [] Medical
 [] Childcare
 [] Education
 [] Other

I understand that;

- If I choose the Income Based method, I must report all income changes within 10 days.
- If I choose the Flat Rent method, I may change to Income Based at any time; however, if I choose the Income Based method, I cannot change to Flat Rent until my next annual Re-Certification.

Signature Head of Household

Date

Signature Spouse/Co-Head

Date

Housing Authority Representative

Date