



**REQUEST FOR APPROVAL  
RENT AND/OR UTILITY ALLOWANCE INCREASE**

Date Submitted: \_\_\_\_\_

Community Name: \_\_\_\_\_

Community Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Gross Rent includes the tenant- paid portion of rent *plus* utility allowances for each HOME/NSP financed development from Community Development and Housing Dept.

<b>CHANGE IN RENT</b>					
Number of Bedrooms	1	2	3	4	5
Current Rent	\$	\$	\$	\$	\$
Proposed Rent	\$	\$	\$	\$	\$

<b>CHANGE IN UTILITY ALLOWANCE</b>					
Number of Bedrooms	1	2	3	4	5
Current Utility Allowance	\$	\$	\$	\$	\$
Proposed Utility Allowance	\$	\$	\$	\$	\$

**Attach SOURCE of Proposed Rent and/or Utility Allowance Increase.**

Submit Request to:

County of San Bernardino

**Cynthia Perez S, ECD Technician - Community Development & Housing Department**

Phone: 909-387-4326 | Fax: 909-387-4415 - Via email to: [cynthia.perez@cdh.sbcounty.gov](mailto:cynthia.perez@cdh.sbcounty.gov)

For County use only:	
<input type="checkbox"/> Approved _____ <div style="text-align: center;">Signature and Date</div>	Denied _____ _____