



Department of Health and Human Services  
HOUSING AUTHORITY OF THE CITY OF LONG BEACH  
1500 Hughes Way Ste A-150  
Long Beach, CA 90810  
Tel 562 570-6985  
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## 60 Day Rent Increase Form

**Instructions:** Email completed forms to [LBHARentInquiries@longbeach.gov](mailto:LBHARentInquiries@longbeach.gov) for further processing.

**Note to Owners and Property Managers:** All rent increases are subject to a rent reasonableness evaluation and the provisions outlined in the following legislation:

- California AB 1482 – Tenant Protection Act of 2019
- AB 1482 – Table of Maximum Allowable Rents for Californian and/or local Consumer Price Index

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Date	
Tenant Name	
Address	
# of Bedroom(s)	
# of Bathroom (s)	
Current Rent	
Proposed Rent	
Proposed Effective Date	

Owner/Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Current Email Address: \_\_\_\_\_

Tenant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

