

CITY OF BERKELEY
RENT STABILIZATION BOARD
2125 Milvia Street, Berkeley, CA 94704
TEL: (510) 981-7368 (981-RENT) TDD: (510) 981-6903 FAX: (510) 981-4940
E-MAIL: rent@ci.berkeley.ca.us INTERNET: www.ci.berkeley.ca.us/rent/

INSTRUCTIONS FOR FILING TENANT PETITION FOR INDIVIDUAL RENT ADJUSTMENT (IRA)

GENERAL INFORMATION

Any tenant of a rental unit covered by the Berkeley Rent Stabilization Ordinance may file this petition to request a rent ceiling adjustment and/or a refund of rent overcharges. (Tenants in single-family homes whose tenancies began on or after January 1, 1996, **may not be** covered by all provisions of the Ordinance; contact a Rent Board counselor for assistance in making this determination.) Tenants in the same unit should file one petition. Tenants in different units at the same rental property should file their petitions at the same time, so that the petitions can be consolidated.

This IRA petition may be filed for one or more of the following reasons:

1. Illegally High Rent (including Failure to Refund Security Deposit).
2. Failure to Refund Security Deposit Interest.
3. Decrease in Living Space or Housing Services; Substantial Deterioration; Failure to Provide Adequate Services; Failure to Comply with Codes or the Warranty of Habitability.
4. Reduction in Number of Tenants Allowed.

You should indicate all grounds that apply, because you may be precluded from filing a subsequent petition to request a rent adjustment for a claim that exists now. You may find it helpful to review B.M.C. section 13.76.120 and Chapter 12 of the Regulations before filing a petition. Copies of the Ordinance and Regulations are available at the Rent Board's office, the Berkeley Public Libraries and on the Internet (<http://www.ci.berkeley.ca.us/rent/>). Rent Board counselors are available to answer questions about the petition process, in person or by telephone at the number listed above, Mondays, Tuesdays, Thursdays and Fridays, 9:00 a.m. to 4:45 p.m., and Wednesdays, 12:00 p.m. to 6:30 p.m.

FILING AN IRA PETITION

To obtain a rent ceiling adjustment, you must mail or bring the following items to the above address:

1. A completed petition, consisting of two pages of general information and the Schedule(s) required by the ground(s) checked in Section 2 on page 1, signed by all petitioning tenants;
2. A copy of any documentation that supports your claim or is required by the relevant schedule(s);
3. A proof of service stating that the landlord was served a copy of the petition and documentation either by first-class mail or in person.

A completed proof of service is required each time documents related to the petition are filed.

AFTER A PETITION IS FILED

The landlord is mailed a Notice of Right to Object and has 20 days to file an objection to the petition. If the landlord files a timely objection, the petition is scheduled for a combined settlement conference and hearing. Notice of the time, date and place of hearing, and information about the hearing process, will be mailed to all parties no later than ten days before the scheduled date of the hearing. If the landlord does not file an objection, the petition may be decided based on the evidence submitted and the Board's records. If additional documentation is required, the petitioner is notified and provided an opportunity to correct the deficiency.

Filing an incomplete petition will delay processing.

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PETITION NO. T- _____

TENANT PETITION FOR INDIVIDUAL RENT ADJUSTMENT

1. **Property Address:** _____ Unit No. _____
 Zip _____ No. of Bedrooms _____

Is this a single-family home? Yes ____ No ____ *If yes, and your tenancy began on or after January 1, 1996, contact a Rent Board counselor before filing this petition to determine if the Rent Board has jurisdiction over your claims.*

2. **Grounds for Petition:**

Check the reason(s) for filing this petition in the spaces below AND complete the corresponding Schedule(s). **Check all grounds that apply; you will be precluded from obtaining a rent ceiling reduction on additional grounds through the hearing date.** Provide supporting information as indicated in the schedules. References to regulations are to the Board's Regulations.

- 1. Illegally High Rent (Includes Failure to Refund Security Deposit) (Regulation 1271).....Schedule A
- 2. Failure to Refund Security Deposit Interest (Regulation 702).....Schedule B
- 3. Decrease in Space/Services; Substantial Deterioration; Failure to Provide Adequate Services; Failure to Comply with Codes or the Warranty of Habitability (Regulation 1269).....Schedule C
- 4. Reduction in Number of Tenants Allowed (Regulation 1270).....Schedule D
- 5. Other.....Attach explanation.

3. **Tenant Information (required):**

Name (Print)	Daytime Phone	Dates of Occupancy	
		Start	End

Email: _____ @ _____
 Email: _____ @ _____
 Email: _____ @ _____
 Email: _____ @ _____

Mailing Address: (If different from the unit address)

NOTE: Your mailing address and any subsequent changes of address will be part of the official record of the case and a matter of public record.

4. **Landlord:** List the owner(s) of the building and the person to whom you pay your rent.

Name _____ Daytime Phone _____

Address _____ City _____ State _____ Zip _____

Landlord Email (if known): _____ @ _____

Name _____ Daytime Phone _____

Address _____ City _____ State _____ Zip _____

5. **Tenant Representative:** Person or organization authorized to represent you, if any:

Name _____ Daytime Phone _____

Address _____ City _____ State _____ Zip _____

Representative's Email: _____ @ _____

6. **Consolidation:** If another petition was recently filed for the same property, and you know the petition number or unit designation, please provide that information. _____

7. **Certification:** I declare under penalty of perjury of the laws of the State of California that the information in this petition, and in all schedules, attachments and forms, is true and correct to the best of my knowledge and belief.

Signature _____ Date _____

Printed Name _____

Signature _____ Date _____

Printed Name _____

Signature _____ Date _____

Printed Name _____

Signature _____ Date _____

Printed Name _____

NOTE: All signatures must be original and all petitioning tenants must sign the Certification section of the petition.

PROOF OF SERVICE

I AM A RESIDENT OF _____ COUNTY AND WAS, AT THE TIME OF SERVICE, OVER EIGHTEEN YEARS OF AGE. ON _____ (DATE), I SERVED ONE COPY OF THE FOLLOWING DOCUMENT(S): _____

BY: (CHECK APPROPRIATE BOX)

DELIVERING THE DOCUMENTS IN PERSON TO THE FOLLOWING INDIVIDUAL(S):
[PRINT NAME OF EACH PARTY SERVED:]

PLACING THE DOCUMENTS, ENCLOSED IN A SEALED ENVELOPE WITH FIRST-CLASS POSTAGE FULLY PAID, INTO A U.S. POSTAL SERVICE MAILBOX, ADDRESSED AS FOLLOWS:
[PRINT NAME AND ADDRESS AS SHOWN ON ENVELOPE OF EACH PARTY SERVED:]

I DECLARE UNDER PENALTY OF PERJURY OF THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.

(SIGNATURE)

(DATE)

(PRINTED NAME)