Petition to Determine Exempt Status

Information for Filing a Petition to Determine Exempt Status of a Rental Unit

From time to time, a property owner may wish to determine if their Rental Unit is either partially exempt from the Richmond Rent Ordinance with respect to Rent Control or fully exempt from Just Cause for Eviction. (Richmond Municipal Code 11.100.050 and Richmond Rent Board Regulation, Chapter 2 Sections 201-202). Landlords of rental units in the City of Richmond must enroll in the Richmond Rent Program and pay the annual Rental Housing Fee.

A landlord who believes a rental unit is partially or fully exempt may request an administrative determination of exemption. A landlord whose exemption claim is administratively denied can challenge the administrative determination by filing this Petition to Determine Exempt Status no more than thirty (30) days after the administrative decision is communicated.

A hearing will be scheduled no more than ten (10) days after receipt of the Petition for a date as soon as possible within the Hearing Unit calendar. A request to continue or reschedule the hearing dated no less than five (5) calendar days prior to the hearing may be granted upon a showing of good cause.

Richmond Rent Program Services Analysts are available to answer questions about the petition process, in person or by telephone at (510) 234-RENT [7368], Monday – Friday from 9:00 a.m. to noon and 1:00 p.m. to 4:00 p.m.

Please provide the following information for each Rental Unit for which an exemption is claimed:

1. A completed petition by an owner of record or agent;
2. A proof of service as to how a copy of the petition was provided to the tenant(s); and
3. Any other document that supports your claim of exemption.

A completed proof of service is required each time documents related to the petition are filed and served on the other parties.

After the hearing, the Hearing Examiner will issue a written decision, a copy of which will be mailed to the parties. The Hearing Examiner’s decision can be timely appealed to the Richmond Rent Board if received within 35 days of the decision.
Petition to Determine Exempt Status of a Rental Unit

Property Address: _________________________________________ Unit: __________________

☐ Interpretation will be needed in the following language (Spanish or Other __________).

A. Total number of residential units on the property: ______________.

B. Number of residential units on the property that are partially or fully exempt: ________________.

C. Grounds for Petition:

The rental unit(s) listed in B above is/are partially or fully exempt from the Richmond Fair, Just Cause for Eviction & Homeowner Protection Ordinance because (check all grounds that apply and, where required, list all applicable units):

### Fully Exempt Claims

☐ The property is a Single Family Home with an added Small Second Dwelling Unit, with permits, and the first unit is owner-occupied;

☐ The Tenant and Landlord share a kitchen and/or bath and the property is the Landlord’s primary residence;

☐ The Rental Unit is a in a hotel, motel, inn, tourist home, rooming & boarding house that is rented primarily to transient guests for fewer than 14 days;

☐ The Rental Unit is in a hospital, convent, monastery, extended medical care facility, asylum, or non-profit home for the aged, or it is a dormitory owned and operated by an accredited institution of higher education; or

☐ The Rental Unit is a Temporary Tenancy which applies only to single-family homes and condominiums for a maximum period of up to twelve (12) months. The Landlord and Tenant must agree to the Temporary Tenancy at the start of the lease, and such an agreement may not be renewed.

### Partially Exempt Claims

☐ The property is a Single Family Home;

☐ The property is a Condominium;

☐ The Subsidized Unit has a Section 8 Tenant, Shelter Plus Care occupant, it qualified for Low-Income Housing Tax Credits, it is Richmond Housing Authority owned/operated, the Landlord accepted a Housing Choice Voucher and/or it qualified as a Section 202 property designated for older adult

☐ The property qualifies as New Construction, built after February 1, 1995, with permits & a Certificate of Occupancy.
Please provide the current addresses (business or residence) and contact information for all owners:

<table>
<thead>
<tr>
<th>Landlord #1 Information</th>
<th>Name: ___________________________ Phone: (______) ____________________</th>
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<tbody>
<tr>
<td></td>
<td>Business Address: __________________________________________________________________</td>
</tr>
<tr>
<td></td>
<td>City, State, Zip: __________________________________________________________________</td>
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<tr>
<td></td>
<td>Business E-mail: __________________________________________________________________</td>
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</tbody>
</table>

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<thead>
<tr>
<th>Landlord #2 Information</th>
<th>Name: ___________________________ Phone: (______) ____________________</th>
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<tbody>
<tr>
<td></td>
<td>Business Address: __________________________________________________________________</td>
</tr>
<tr>
<td></td>
<td>City, State, Zip: __________________________________________________________________</td>
</tr>
<tr>
<td></td>
<td>Business E-mail: __________________________________________________________________</td>
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<tr>
<th>Agent Information (if applicable)</th>
<th>Name: ___________________________ Phone: (______) ____________________</th>
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<tbody>
<tr>
<td></td>
<td>Business Address: __________________________________________________________________</td>
</tr>
<tr>
<td></td>
<td>City, State, Zip: __________________________________________________________________</td>
</tr>
<tr>
<td></td>
<td>Business E-mail: __________________________________________________________________</td>
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Units & Tenants/Occupants Covered by this request:

<table>
<thead>
<tr>
<th>Unit #:</th>
<th>Tenants/Occupants</th>
</tr>
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<tbody>
<tr>
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Additional information in support of your exemption claim (attach additional pages, if necessary):

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

Declaration:

I declare, under penalty of perjury under the laws of the State of California, that the information in this Petition, including any attachments, is true and correct to the best of my knowledge and belief.

Owners

Signature: ____________________________________________ Dated: __________________

Printed Name: ____________________________________________

Signature: ____________________________________________ Dated: __________________

Printed Name: ____________________________________________

Signature: ____________________________________________ Dated: __________________

Printed Name: ____________________________________________

Signature: ____________________________________________ Dated: __________________

Printed Name: ____________________________________________

Signature: ____________________________________________ Dated: __________________

Printed Name: ____________________________________________

PLEASE PROVIDE A COPY OF ANY SUPPORTING DOCUMENTATION FOR THIS PETITION.
PROOF OF SERVICE

I AM A RESIDENT OF ________________________________ COUNTY AND WAS, AT THE TIME OF SERVICE, OVER AGE EIGHTEEN. ON ____________________________ (DATE), I SERVED ONE COPY OF THE

Petition to Determine Exempt Status of a Rental Unit

BY: (CHECK APPROPRIATE BOX):

☐ DELIVERING THE OBJECTION FORM IN PERSON TO THE FOLLOWING INDIVIDUAL:

[PRINT NAME OF TENANT(S) AND/OR TENANT’S REPRESENTATIVE:]*

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

☐ PLACING THE OBJECTION FORM, ENCLOSED IN A SEALED ENVELOPE WITH FIRST-CLASS POSTAGE FULLY PAID, INTO A U.S. POSTAL SERVICE MAILBOX, ADDRESSED AS FOLLOWS:

[PRINT NAME OF TENANT(S) AND/OR TENANT’S REPRESENTATIVE AND ADDRESS AS SHOWN ON ENVELOPE:]*

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

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

Signature: _______________________________ Date: __________________

Printed Name: _______________________________
RICHMOND HOUSING RIGHTS CLINIC

Free legal assistance for Richmond residents (landlords & tenants)

Have you received an eviction or rent increase notice?
Do you need legal assistance in an eviction case?
Do you need help completing a Rent Adjustment Petition?

Mondays 9 AM - 12 PM
Catholic Charities Richmond Service Center
217 Harbour Way, Richmond, CA 94804

Space is Extremely Limited
RSVP to Bay Area Legal Aid: (510) 233-9954

We cannot guarantee everyone assistance - priority given to urgent deadlines as determined by HRC staff
Ayuda legal gratuita para los residentes de Richmond (propietarios e inquilinos)

¿Ha recibido un aviso de desalojo o aumento de renta?
¿Necesita ayuda legal en un caso de desalojo?
¿Necesita ayuda para completar una petición para un ajuste de renta?

Los lunes de 9 AM - 12 PM
Catholic Charities Richmond Service Center
217 Harbour Way, Richmond, CA 94804

Espacio limitado
Confirme su asistencia con Bay Area Legal Aid:
(510) 233-9954

No podemos garantizar asistencia a todos - se da prioridad a plazos urgentes según se determine por el personal de la clínica