



Tenant Petition: Multiple Grounds

NOTA: SI USTED NO ENTIENDE ESTA PETICIÓN, NO TARDE EN COMUNICARSE CON EL PROGRAMA DE RENTA AL NÚMERO (510) 234-RENT [7368] PARA PEDIR UNA CITA Y RECIBIR UNA EXPLICACIÓN O TRADUCCIÓN.

Overview

Any landlord or tenant of a rental unit protected by the Richmond Fair Rent, Just Cause for Eviction and Homeowner Protection Ordinance may file a petition for a change in the rent pursuant to the City of Richmond's Rent Program regulations.

Check all boxes below that apply. It is recommended that all tenants requesting a change in rent contact the Rent Program staff for assistance or answers to questions.

The Rent Program Regulations are located at: <http://www.ci.richmond.ca.us/3476/Laws-and-Regulations>. Richmond Rent Program staff members are available, in person or by telephone, on the following days and times: Monday to Friday 9:00 a.m. – Noon and 1:00 – 4:00 p.m.

Richmond Property Address

Address

Unit #

Zip Code

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

Grounds for Petition

You will need to check the boxes that apply to your situation and complete the Attachments that go with every box that applies to your situation.

(See Attachment Form for Explanations).

Check

Reason(s)

Form

- | | | |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| <input type="checkbox"/> | Excess Rent or Failure to Refund Security Deposit | Attachment A |
| <input type="checkbox"/> | Decrease in Space/Services; Substantial Deterioration; Failure to Provide Adequate Services; Failure to Comply with Codes or the Implied Warranty of Habitability. | Attachment B |
| <input type="checkbox"/> | Reduction in Number of Tenants Allowed | Attachment C |

Staff Use Only:
Petition No. RC _____

Tenant Information

(Required)

Tenant 1

Name: _____

Mailing Address: _____

Phone*: (_____) _____

Email*: _____

Dates of Occupancy (mm/dd/yyyy):

Start ____/____/____ End ____/____/____

Tenant 2

Name: _____

Mailing Address: _____

Phone*: (_____) _____

Email*: _____

Dates of Occupancy (mm/dd/yyyy):

Start ____/____/____ End ____/____/____

Tenant 3

Name: _____

Mailing Address: _____

Phone*: (_____) _____

Email*: _____

Dates of Occupancy (mm/dd/yyyy):

Start ____/____/____ End ____/____/____

Tenant 4

Name: _____

Mailing Address: _____

Phone*: (_____) _____

Email*: _____

Dates of Occupancy (mm/dd/yyyy):

Start ____/____/____ End ____/____/____

Rent History

What was the Base Rent or Rent Paid by the Tenant on July 21, 2015?

\$ _____

If your Tenancy began after July 21, 2015, what was the rent you paid at the time you first moved in and paid full rent?

\$ _____

What is your Current Rent (the rent your most recently paid)?

\$ _____

**Landlord
Contact
Information**
(required)

Name: _____
Phone: (_____) _____
Business Address: _____
City, State, Zip: _____
Bus. Email: _____

**Property
Manager
Contact
Information**
(if applicable)

Name: _____
Phone: (_____) _____
Business Address: _____
City, State, Zip: _____
Bus. Email: _____

**Tenant
Representative
Information**
(If applicable)

Relationship to Petitioner/Respondent: _____
Organization Name (if any): _____
Name: _____
Phone: (_____) _____
Business Address: _____
City, State, Zip: _____
Bus. Email: _____

Declaration:

I (we) declare under penalty of perjury under the laws of the State of California that the foregoing, and all attached pages, including attached documentation, are true and correct and to the best of my knowledge.

Print Name:	Signature:	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

NOTE: All signatures must be original and all petitioning tenants must sign the Attachments under penalty of perjury.

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 Tenant Petition for Multiple Grounds and Attachment(s) Attachment A Attachment B Attachment C

By: (check appropriate box):

DELIVERING _____ IN PERSON TO THE FOLLOWING INDIVIDUAL:
[PRINT NAME OF LANDLORD(S) AND/OR PROPERTY MANAGEMENT INFORMATION:]*

PLACING _____ ENCLOSED IN A SEALED ENVELOPE WITH FIRST-CLASS POSTAGE FULLY PAID, INTO A U.S. POSTAL SERVICE MAILBOX, ADDRESSED AS FOLLOWS:
[PRINT NAME OF LANDLORD(S) AND/OR PROPERTY MANAGEMENT INFORMATION AND ADDRESS AS SHOWN ON ENVELOPE:]*

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: _____

*** Please note: All documents delivered or sent to the Landlord and/or Property Management, must be filed with or sent to the Rent Program within 2 days.**