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 LANDLORD IRA PETITION FOR HISTORICALLY LOW RENT (HLR)
Regulation 1280

A landlord is entitled to increase rent ceilings for units with rents that were significantly below market at the inception of rent control. Units that qualify for such an increase must have lawful 1980 rent ceilings below certain minimums, and adjusted current rent ceilings below certain minimums. These minimum amounts are established according to number of bedrooms in the unit, and are found in Appendix A to Regulation 1280 and Table 2 of the petition form. Units for which an initial rent was established on or after January 1, 1999, are not eligible for the HLR increase. Regulation 1280 does not apply to single-family residences or rooms in boarding houses and residential hotels.

You should obtain a rent ceiling history ("RTS print-out") from the Rent Board before filing this petition. You may also find it helpful to review Section 12 of the Rent Stabilization Ordinance and Chapter 12 of the Rent Board Regulations. 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; counselors can also supply an RTS print-out for affected units. Office hours are 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.

To obtain a rent increase for historically low rent, you must mail or bring the following items to the above address:

1. A completed petition signed by the owner;
2. A proof of service stating that each affected tenant 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

Unless a signed Agreement of Parties or Waiver of Right to Hearing (copy attached) is submitted, the Board will mail a Notice of Right to Object to each affected tenant, who has 20 days from the date the notice is mailed to file an objection to the petition. **(Petitions submitted with an Agreement of Parties must still include a proof of service indicating that all affected tenants were served with a copy of the petition.)** If a timely objection is filed, the petition will be scheduled for a settlement conference and hearing. Notice of the time and place of hearing will be mailed to all parties no later than ten days before the scheduled hearing date. If no objection is filed or if each affected tenant signs a waiver of the right to a hearing, an administrative decision will be issued based on the petition, supporting documentation and the Board's records.

Filing an incomplete petition will delay processing.

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PETITION NO. L-_____

LANDLORD PETITION FOR INDIVIDUAL RENT ADJUSTMENT FOR HISTORICALLY LOW RENT (HLR)

Regulation 1280

1. Landlord information: (An owner of record **must** sign the certification on the last page.)

A. **Landlord**: _____

Mailing Address _____

City _____ State _____ Zip _____

Daytime Phone (_____) _____ Fax (_____) _____

Email address _____ @ _____

B. Name of Representative (if any) _____

Mailing Address _____

City _____ State _____ Zip _____

Daytime Phone (_____) _____ Fax (_____) _____

Email address _____ @ _____

2. Property information:

Property Address _____ Zip _____

Are any petitions for this property currently pending? Yes _____ No _____ Unknown _____

Total number of residential units on property, including exempt and owner-occupied units: _____

3. Units for which HLR increase requested:

A. For all units for which an HLR increase is requested, list the unit designation, the beginning date of the current tenancy, rent charged at the beginning of this tenancy and current rent.

Unit Designation	Date Tenancy Began	Beginning Rent	Current Rent

B. To determine whether a particular unit qualifies for a historically low rent increase, complete this worksheet. If line 3 is more than line 4, or line 9 is more than line 8, the unit does not qualify.

Unit designation ►				
1. Number of bedrooms				
2. 1980 rent				
3. 1980 rent* from RTS print-out				
4. 1980 HLR MIN from Table 2				
5. 2014 HLR MIN from Table 2				
6. "Searle" increase from RTS print-out				
7. Total of increases for Capital Improvements, Additional Tenants, Change in Space or Services from RTS print-out				
8. Total of lines 5, 6, and 7				
9. 2014 rent ceiling from RTS print-out				
10. Subtract line 9 from line 8; this is the potential increase				

*To determine the 1980 rent for previously exempt triplexes and four-plexes, reduce the 12/31/81 base rent by 5%.

Table 2

UNIT SIZE	**1980 HLR MINIMUM**	**2014 HLR** MINIMUM
Studio	$171.15	$466.69
1-BR	207.90	528.12
2-BR	244.65	587.24
3-BR	339.15	746.88
4-BR	370.65	800.35

4. **<u>Certification</u>:** (Must be signed by an owner of record.) Each unit included in this petition has been properly registered for at least 30 days and is in compliance with the Ordinance, Regulations and applicable state and local housing, building, health and safety codes. 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 _____

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Petition No. L-_____

AGREEMENT OF PARTIES/WAIVER OF RIGHT TO A HEARING

Property Address: _____ Unit No. _____
(Use a separate form for each unit)

☐ **(This box must be checked for the agreement or waiver to be valid.)** I have received a copy of the petition and supporting documentation, and have no objections to the requested rent ceiling increases. I am satisfied that my unit is in habitable condition.

AGREEMENT OF PARTIES

Assuming the landlord is eligible for a rent ceiling increase in the amount requested:

- ☐ We agree to a maximum increase of $ _____.
- ☐ We agree to an implementation of the increase different from that authorized by the Regulations; specifically: _____
_____
- ☐ I (tenant) waive my right to the phase-in of increases as provided in Regulation 1274(B). *(Rent ceiling increases for increased occupancy are not subject to a phase-in.)*

Note: An agreement that does not conform to the Ordinance and the Regulations will not be approved.

WAIVER OF RIGHT TO HEARING

- ☐ **I give up my right to a hearing** and understand that if all the affected tenants waive their right to a hearing or fail to file an objection, a decision may be issued without a hearing and be based on the petition, supporting documentation and the Board's records.
- ☐ Furthermore, I waive my right to the phase-in of increases under Regulation 1274(B). *(Rent ceiling increases for increased occupancy are not subject to a phase-in.)*

CERTIFICATION: I declare under penalty of perjury under the laws of the State of California that the above assertions are made voluntarily and without financial or other inducement.

LANDLORD SIGNATURE	PRINTED NAME	DATE
TENANT SIGNATURE	PRINTED NAME	DATE
TENANT SIGNATURE	PRINTED NAME	DATE
TENANT SIGNATURE	PRINTED NAME	DATE
TENANT SIGNATURE	PRINTED NAME	DATE

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)