

New Rent Program Service Fee Application

Please read instructions on reverse PRIOR to completion

Mail completed applications to:

City of Oakland Business Tax, 250 Frank H. Ogawa Plaza, Suite 1320, Oakland, CA 94612

Telephone: 510.238.3704

TTY: 510.238.3254

<u>All</u> residential rental proper To obtain a NEW BUSI <u>http</u>	NESS TAX		LICATION,	please visit their				
Property Ownership Informati	on (must r	natch informati	ion on Alama	da County Bocord	c):			
LAST NAME	FIRST NAME			MIDDLE INITIAL				
1a.								
1b.								
1c.								ACCT#:
2. Rental Start Date (MM/DD/YY):	4. Renta	Location:						AC
//20	Oakland, CA 946							
3. Dwelling Type (check one):								
🗆 SFR 🗌 Duplex 🗌 Triplex	(as shown on the Alameda County records): units are on this property							
Condominium/Townhouse								
Multiple-unit Dwelling:	reason code: A: B: C: D: E: F:							
4 or more Units				form for explanation				
Contact Information:	•							
7. Mailing Name:	Attention:							CODE
								APN/USE CODE:
Mailing Address:								APN,
8. Daytime Phone Number:	9. Contact	t Phone Numbe	er:	10. Website Addr	ess:			
()	()						
11. Contact Email(s):								:SI
CHECK THIS BOX IF YOU WISH TO OPT OUT OF PAPER CORRESPONDENCE – VALID EMAIL IS REQUIRED								INITIALS:
Rent Adjustment Program Fee								-
12. Number of Units:Enter unit count from LINE 512.								
13. Number of Exempt Units: Ent			ter total exer	pt units from LINE 6	13.	-		
14. TOTAL Number of Units Subject to the Fee: SUBTRACT LINE 13 from LINE 12 14. =						=		
15. Rent Program Service Fee Due: Amount on Line 14 x \$68.00 = 15.								-YPE:
16. Penalty (<i>if paid 31+ days after Start Date</i>): See instructions to calculate penalty percentage 16 .								РАҮ ТҮРЕ:
17. Interest (if paid 31+ days after Start Date): [Total Rent Program Fee + Penalty] x 1% (per month) 17.								
18. Total Due ADD Lines 15, 16 & 17; make check payable to "City of Oakland RAP" Total:								ΓA
Acknowledgement:								FUR UFFICE USE UNLY DATE:
I declare under penalty of perjury that to my knowledge all information contained on this form is true and complete.								ICF U
Signature			Title	-				TE:
					/_	/20	202	DAT

INSTRUCTIONS FOR COMPLETING THE NEW RENT PROGRAM SERVICE FEE APPLICATION:

Please complete a SEPARATE FORM for each property you are registering.

- 1. Enter the name(s) of the property owner(s) according to the Alameda County Tax Records.
- 2. Indicate the first day you began renting or leasing to paying tenants (not necessarily the date you purchased this property).
- 3. DWELLING TYPE: Check the appropriate box, describing the number of units on the property.
- 4. Enter the Rental Property address <u>exactly</u> as shown on your Alameda County property tax bill.
- 5. Enter the TOTAL number of *residential* units as shown on the Alameda County tax records. Include all owner- and/or family-occupied units and any residential unit(s) that are off the housing market.
- 6. EXEMPT UNITS: If your property qualifies for any of the six (6) listed Exemptions, please indicate the

number of qualifying unit(s) on the appropriate Lines A, B, C, D, E and/or F (put the *total* number of exempt unit(s) on Line 6 AND on Line 13). Please refer to the Exemption table below to determine the Exemption(s) that you *may* qualify for.

- 7. Enter your mailing name and 'Attention' with a street address or PO Box to whom and where renewal forms and correspondence is to be sent.
- 8. Enter your daytime phone number.
- 9. Enter your contact or cell phone number.
- 10. If you have a website for your property, please provide it on this line *(optional)*.
- 11. Please provide your email address(es) on this line *(optional).*

EXEMPTIONS (Oakland Municipal Code Section 8.22.030A) (You may be required to submit written proof of your Exemption)

- A. Owner-occupied unit(s).
- B. A dwelling unit that is off the rental housing market for the entire fiscal year (attach explanation of the reason why the unit(s) is/are not on the rental market.
- C. An accommodation in a motel, hotel, inn, tourist house, rooming house or boarding house, that is not occupied by the same tenant for thirty (3) or more consecutive days.
- D. Most healthcare facilities.
- E. A unit which is newly construction and has received a certificate of Occupancy on or after January 1, 1983. To qualify for this Exemption, the dwelling unit(s) must be entirely newly constructed OR was created from space that was formerly entirely non-residential. Please attach a copy of the Certificate of Occupancy and Certificate of Exemption or other proof to substantiate your claim for this Exemption.
- F. Every unit in multi-unit properties that are divided into three (3) or less units are exempt from the Fee *only* if the owner of record has occupied one of the units as his/her principal residence for at least two (2) years.
- 12 Enter the TOTAL number of units from Line 5.
- 13. Enter the TOTAL number of exempt units from Line 6 (definition of Exemptions are in the table above).
- 14. TOTAL UNITS SUBJECT TO FEE: Subtract the amount on Line 13 from the amount on Line 12.
- 15. Calculate the total due: [Amount on Line 14 x \$68.00] = the RAP Fee you owe. Enter this amount on Line 15.
- 16. PENALTY is assessed on the RAP Fee if it's paid 31 or more days after the rental start date. Penalty is calculated at: **10%** (if payment is 1-30 days late), **25%** (if payment is 31-60 days late) or **50%** (if payment is 61 or more days late).
- 17. INTEREST is calculated at: [Total of RAP Fee + Penalty] x 1% per month (from rental start date to date of payment).
- 18. PAYMENT ENCLOSED—Add Lines 15, 16 and 17 and put the total on Line 18. Please remit this payment.

CREDIT CARD PAYMENTS—We no longer accept credit cards on the application. If you wish to pay by Visa, Mastercard, Discover or ATM/debit card, you must do so in person in our office.

REMINDER!! The Rent Program Services Fee is an *annual* fee and must be renewed every year on or before March 1. It is your responsibility to notify our office if you do not receive the annual renewal declaration and/or to update your account.

Be sure to sign and date this form. Remit your payment along with this application to:

Hours of Operation: Monday, Tuesday, Thursday & Friday: 8:00 a.m. – 4:00 p.m. Wednesday: 9:30 a.m.–4:00 p.m.