



DALZIEL BUILDING • 250 FRANK H. OGAWA PLAZA, SUITE 5313 • OAKLAND, CALIFORNIA 94612-2034

Housing and Community Development Department
Rent Adjustment Program

TEL (510) 238-3721
FAX (510) 238-6181
CA Relay Service 711

**TENANT RESPONSE TO PETITION FOR ADMINISTRATIVE DETERMINATION OF
TRANSITIONAL RENT INCREASE FOR OWNER-OCCUPIED
DUPLEXES/TRIPLEXES**

CASE NUMBER: _____

The Rent Adjustment Program received the attached petition on _____ . Your Landlord is petitioning for approval of a transitional rent increase for owner-occupied duplexes/triplexes.

Transitional Rent Increases: Owner-occupied duplexes/triplexes are now covered by the Rent Adjustment Ordinance (Oakland Municipal Code Chapter 8.22.020 et seq) effective June 4, 2019, pursuant to Ordinance No. 13542 C.M.S. The owners of these newly-covered units may petition for a transitional rent increase in excess of the annual allowable increase if the owner did not increase rents or increased rents less than the CPI rent adjustment limits between 11/7/15 and 11/6/18. The petition must be filed before June 30, 2020, and the owner may not serve a rent increase until the Rent Program issues a decision on the petition. The transitional rent increase will be calculated as follows:

When did the tenancy commence with the current owner?	If no rent increase between commencement of tenancy and November 6, 2018, owner may petition for increase of:	If rent increase was less than the percentages in prior column, owner may petition for increase of:
After 11/6/17	3.4 percent	3.4 percent minus actual increase between 11/7/17 and 11/6/18
Between 11/7/16 and 11/6/17	5.7 percent	5.7 percent minus actual increase
Before 11/7/16	7.7 percent	7.7 percent minus actual increase

Review the attached copy of the petition and complete the following:

- I agree with the information submitted in the owner petition and waive my right to a Hearing.
- I do not agree with the information submitted in the owner petition. (If so, please complete the following).

I moved into the rental unit on _____.

My rent as of 11/6/18 is (initial base rent): \$ _____ / month.

List all rent increases issued after 11/7/15. Begin with the most recent rent and work backwards. If you need more space please attach another sheet.

Date Notice Given (mo./day/year)	Date Increase Effective	Rent Increased	
		From	To
		\$	\$
		\$	\$
		\$	\$
		\$	\$

I request a hearing to contest the proposed rent increase.

What are your reasons for contesting the proposed rent increase? Attached additional sheets if necessary.

Are you current on your rent? Yes No

If you are not current on your rent, please explain. (If you are legally withholding rent state what, if any, habitability violations exist in your unit.)

Verification

I declare under penalty of perjury pursuant to the laws of the State of California that everything I said in this petition and attached pages is true and that all of the documents attached to the petition are originals or are true and correct copies of the originals.

Tenant's Signature

Date

Return the completed form to the Rent Adjustment Program at the following address within thirty-five (35) calendar days of the date on the attached proof of service:

Rent Adjustment Program
250 Frank H. Ogawa Plaza, Suite 5313
Oakland, CA 94612-2034