

City of Berkeley

Rent Stabilization Program

2125 Milvia Street, Berkeley, CA 94704

Phone: (510) 981-7368 [981-RENT] Fax: (510) 981-4910

E-mail: rent@cityofberkeley.info • Web: rentboard.berkeleyca.gov

For Office Use Only

Date: _____

Initials: _____

TENANCY REGISTRATION FORM FOR PARTIALLY COVERED UNITS

(Instructions provided on back)

Please file this form **only** for tenancies in:

Single-family homes, condominiums, and dwelling units that received a Certificate of Occupancy after 1980.

Berkeley Rental Property Address: **PLEASE PRINT LEGIBLY or TYPE**

_____	_____	_____	_____	_____
Street Number	Street Name	Unit #	# of Bedrooms	# of Units/Prop.

Owner/Agent Information (If new owner or agent, please also complete an Amended Registration Statement):

OWNER: Check if new owner/address

AGENT/MANAGER: Check if new agent/address

Name: _____

Name: _____

Address: _____

Address: _____

City, State, ZIP: _____

City, State, ZIP: _____

Phone: (____) _____

Phone: (____) _____

Email: _____

Email: _____

Send all future correspondence and bills to: **OWNER**

AGENT/MANAGER

Current Tenancy Information:

Beginning date of this tenancy: ____/____/____ Number of Tenants: _____ Initial Rent: \$ _____

Current Rent (if different): \$ _____ Date of Last Rent Increase: ____/____/____

Housing Services: Check the Housing Services provided or paid by the Owner for the individual unit.

Storage Gas Electricity Water Garbage Parking Laundry Access Heat
Appliances Other _____

Does Lease Prohibit Smoking? Yes No **Effective date of smoking prohibition:** ____/____/____

Prior Tenancy Information: Ending date of prior tenancy: ____/____/____ Voluntary vacancy? _____

Termination by Owner _____ Other (explain): _____

Check one: I am the owner or the owner's agent. I am the tenant (please attach lease agreement).

Declaration: I hereby declare under penalty of perjury that all the information in this Tenancy Registration Form is true and correct to the best of my knowledge and belief.

PRINT Name

Signature

Date

Tenancy Registration for Partially-Covered Units

This form is required ONLY for rental units subject to BMC 13.76.050(O):

- **Single-family homes, where the current tenancy began after Dec. 31, 1995**
- **Condominium units**
- **Dwelling units built after 1980 that have received a Certificate of Occupancy**

A Tenancy Registration form must be filed for all non-exempt units annually. The property is deemed out of compliance with registration requirements until filing is completed. (Regulation 1013(K))

Information on this form is used to update the Rent Stabilization Program's records to reflect the current tenants' rent, the number of tenants, and the services included with the rent.

If this unit was previously exempt and is now subject to registration requirements as provided by BMC 13.76.050(N) or BMC 13.76.050(O), a registration fee will be due. You may call our Registration Unit (510) 981-4920 for more information.

If the owner fails to timely file Tenancy Registration information or if the tenant disagrees with the information on the Tenancy Registration form filed by the owner, the tenant may file this form setting forth the required information. The tenant should attach copies of the written rental agreement(s) or other documents showing the correct information.

INSTRUCTIONS FOR COMPLETING THIS FORM

Berkeley Property Address - Write the complete mailing address for this unit. Provide the number of bedrooms in this unit and the total number of units on this property in the appropriate places.

Owner and Agent Information - Provide the name, telephone number and email address of the owner and the owner's authorized representative, if applicable. If the owner's address is different than the address in the Rent Board's records, or if this is a new owner, please check "New owner/address" and file an Amended Registration Statement. If this is a new agent, check "New agent/address." If you list both an owner and an agent, please let us know to whom to send all future notices, correspondence and bills by marking an "X" to select Owner or Agent.

Current Tenancy Information - Indicate the NUMBER of tenants, the DATE the tenant(s) moved in and the total monthly rental payment for the unit. Also check the boxes for the HOUSING SERVICES paid by the owner. As of May 1, 2014, B.M.C. 12.70 prohibits smoking in 100% of multi-unit housing with two or more units. This ordinance requires that leases for all tenancies starting after May 1, 2014, include prohibitions on smoking. Please indicate whether or not the current lease prohibits smoking in the unit, and the date that the prohibition on smoking took effect.

Declaration – The person completing the form must certify under penalty of perjury that all information provided is true and correct.

NOTE: Tenant names and other tenant information will be kept confidential in accordance with the Information Practices Act of 1977.