



Planning & Development  
BESO Program

# Building Emissions Saving Ordinance (BESO) Upgrade Deposit Form

**Purpose:** If the Seller does not obtain a BESO Certificate of Compliance before close of escrow, this form must be completed and submitted by the Title Company with check(s) totaling \$5,000 to the BESO Team. All signatures required, electronic signatures are accepted.

**Buyer Responsibility:** Within two (2) years of the transfer recordation date, the Buyer must:  
1. Complete resilience upgrades totaling six (6) credits per BMC Chapter 19.81 and BESO Administrative Regulations.  
2. Obtain a BESO Certificate of Compliance ([berkeleyca.gov/BESO](http://berkeleyca.gov/BESO)).

**Acknowledgment:** Failure to obtain a Certificate of Compliance within two (2) years (unless extended) will result in deposit forfeiture and may lead to enforcement under BMC Chapters 1.20 and 1.28.

**Deposit instructions to the City of Berkeley:**

1. SELLER and BUYER must each provide \$2,500 for a combined BESO upgrade deposit of \$5,000.
2. Set up escrow account in name of the BUYER.
3. Refund the \$5,000 deposit to the BUYER upon completion of the required upgrades and documentation and submission of a refund request form.

<b>Assessor's Parcel #:</b> _____	<b>Date of Sale:</b> _____
<b>Escrow #:</b> _____	<b>Property Address:</b> _____
<b>Buyer Deposit Account and Contact Information</b>	
Name(s) as it should appear on account and refund check: _____	
Mailing Address: _____	
City: _____	State: _____ Zip: _____
Email: _____	Phone: _____

By checking this box, I agree that electronic signatures shall have same force and effect as hard copy signatures.

**Seller Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Buyer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Escrow Agent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Escrow Agent Phone #:** \_\_\_\_\_

**Escrow Agent Email:** \_\_\_\_\_

**Title Company:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Mail this form and checks made payable to City of Berkeley to:**  
  
City of Berkeley  
ATTN: BESO Deposit  
1947 Center St, 1<sup>st</sup> Floor  
Berkeley, CA 94704

*FOR OFFICE USE ONLY*  
BESO Deposit ID: \_\_\_\_\_ Check 1 #: \_\_\_\_\_ Check 2 #: \_\_\_\_\_  
FUND\$ Account #: \_\_\_\_\_ Deposit Refunded: \_\_\_\_\_