

REC. ONLY

APP. ONLY

City of Berkeley

Rent Stabilization Program

2000 Center Street, Suite 400, Berkeley, CA 94704
Phone: (510) 981-7368 (981-RENT) Fax: (510) 809-3921

REGISTRATION STATEMENT FOR PARTIALLY COVERED UNITS

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

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

Use this form to register partially covered rental units for the first time, or to make changes to the status of a partially covered unit that has previously been registered. This form may also be used for any change in ownership, management, or mailing address for a property with partially covered units. This form must be completed and submitted, and the fee paid, **within sixty (60) days** of the change in status.

Berkeley Property Address:

Street Number	Street Name	Zip	Number of Units on the property
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PART I. OWNERSHIP INFORMATION

Complete this section if you are a new owner or are registering a property for the first time. List all owners of record (as reflected by the Alameda County Recorder's Office) and each owner's percentage of ownership.

1. Date of purchase, or title transfer: _____

2. The names of all owners of record, and the percentage of ownership for each owner must be listed for all changes in ownership.

Name	%	Name	%
a) _____	_____	c) _____	_____
b) _____	_____	d) _____	_____

PART II. MAILING ADDRESS AND PRIMARY CONTACT

Complete this section and select either an owner or one agent to receive all correspondence from the Rent Stabilization Program. Bills and correspondence may only be sent to one property; therefore please **CHECK ONLY ONE BOX** to select the billing contact:

Billing Contact: Owner Agent / Manager

OWNER:

AGENT / MANAGER:

Name: _____ Agency Name: _____

Address: _____ Address: _____

City, State, ZIP: _____ City, State, ZIP: _____

Phone: _____ Phone: _____

Email: _____ Email: _____

PART III. UNIT STATUS CHANGE FOR PARTIALLY COVERED UNITS

- Complete this section if you have not yet registered your partially covered property or when you are changing the status of any previously registered partially covered unit.
- This form must be completed and the fee paid within 60 days from the date a unit is rented to avoid the assessment of a penalty.

A. Registration of Partially Covered Units

(If new tenancy, a *Tenancy Registration for Partially Covered Units* form is also required.)

Unit Designation	# of Bedrooms	Date Rented	Rent Per Month	Unit Designation	# of Bedrooms	Date Rented	Rent Per Month
			\$				\$
			\$				\$
			\$				\$

B. Claim of Exemption

All claims of exemption are subject to verification. If you are unclear whether an exemption applies to your unit, you should consult with a housing counselor. You may be liable for fees and possibly penalties if your units are determined, at any time, to be ineligible for the exemption you claim.

If you are claiming an exemption for more than 3 units, please use an additional form.

Unit Designation	Exemption Designation *See list	Date of Exemption	If Owner Occupied, Owner's Name
1)			
2)			
3)			

*** List of common Exemption Designations:**

Status

OWNER OCCUPIED
 OWNER USE
 NOT AVAILABLE FOR RENT
 OCCUPIED RENT-FREE

Designation

Unit is owner-occupied (must be on the deed of record).
 Unit is used by owner for personal use and is not used as a rental unit
 This unit is not occupied by an owner or tenant, and is not available to be rented.
 This unit is provided to the tenant by the owner, rent-free, AND does not require any service(s) from the tenant in exchange for the rent-free privilege.

**OTHER

**If you use this designation, you must explain why the unit is exempt.

**Explanation _____

I declare under penalty of perjury that the above information is true and correct to the best of my knowledge and belief.

 Signature

 Date