

REC. ONLY

APP. ONLY

# City of Berkeley

## Rent Stabilization Board

2000 Center Street, Suite 400, Berkeley, CA 94704  
Phone: (510) 981-7368 [981-RENT] Fax: (510) 809-3821

E-mail: [rentregistry@berkeleyca.gov](mailto:rentregistry@berkeleyca.gov) • Web: [rentboard.berkeleyca.gov](http://rentboard.berkeleyca.gov)

### TENANCY REGISTRATION FORM 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.**

**Berkeley Rental Property Address:**

<b>Street Number</b>	<b>Street Name</b>	<b>Unit #</b>	<b># of Bedrooms</b>	<b># of Units/Prop.</b>

**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:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

***Does Lease Include Automatic Renewal of Extension Provision?*** Yes  No

***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 \_\_\_\_\_

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

***For tenancies that started on or after December 20, 2024, Notice of Tenant Rights was provided at the start of the tenancy to the tenant(s)*** Yes  No

**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**
- **Newly constructed residential units that received a Certificate of Occupancy after 1980.**

A Tenancy Registration form must be filed for all non-exempt units with fifteen (15) days of the start of a new tenancy and 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 the "New owner/address" box. If this is a new agent, check the "New agent/address" box. 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.

**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.**