

## CITY OF BERKELEY RENT STABILIZATION BOARD

2000 Center Street, Suite 400, Berkeley, CA 94704

TEL: (510) 981-7368 (981-RENT) TDD: (510) 981-6903 FAX: (510) 809-3921

E-MAIL: [rent@berkeleyca.gov](mailto:rent@berkeleyca.gov) INTERNET: [rentboard.berkeleyca.gov](http://rentboard.berkeleyca.gov)

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### INSTRUCTIONS FOR FILING TENANT PETITION FOR INDIVIDUAL RENT ADJUSTMENT (IRA)

**\*\*USE FOR GOVERNMENT-SUBSIDIZED UNITS ONLY\*\***

#### **GENERAL INFORMATION**

Tenants in units that are fully covered by Berkeley's Rent Ordinance may file a petition to request a rent ceiling adjustment and/or refund. Tenants in the same unit should file one petition. **If your tenancy is governmentally subsidized (for example, you receive a rent subsidy under a Sec. 8 Housing Choice Voucher) and not exempt from rent control, you must use this petition to request a rent ceiling adjustment and/or refund.**

The government agency will also be a party to the case. If your tenancy is not governmentally subsidized, then you must use a different IRA petition form.

This petition may be filed for one or more of the following reasons ("Reg." refers to Board Regulation):

1. Illegally High Rent (including Failure to Refund Security Deposit). (Reg. 1271)
2. Failure to Refund Security Deposit Interest. (Reg. 702)
3. Decrease in Living Space or Housing Services; Substantial Deterioration; Failure to Provide Adequate Services; Failure to Comply with Codes or the Warranty of Habitability. (Reg. 1269)
4. Reduction in Number of Tenants Allowed. (Reg. 1270)

The laws and regulations for these types of petitions can be found at [Berkeley Municipal Code section 13.76.120](#) and [Regulations Chapter 12](#). A Rent Board housing counselor can answer questions about the hearing process. To contact a housing counselor, go to : Use our online appointment form by going to [rentboard.berkeleyca.gov](http://rentboard.berkeleyca.gov) and clicking on the "Housing Counselor Appointments" button; call (510) 981-7368 (RENT); or email [rent@berkeleyca.gov](mailto:rent@berkeleyca.gov).

#### **FILING AN IRA PETITION**

Provide the Rent Board a completed petition package, which contains the following:

1. A completed petition, consisting of two pages of general information and the Schedule(s) required by the ground(s) checked in Section 2 on page 1, signed by all petitioning tenants;
2. A copy of supporting documentation indicated in the Schedule(s) (your evidence).

Send a copy of the petition package to the other parties, who are the landlord (respondent) **and the subsidizing government agency.**

Follow the **Filing Rules** (posted on our Rent Adjustment Petitions webpage) on how to a) properly complete the petition and schedule(s); b) organize your evidence using an exhibit list form; and c) send them to the Rent Board and other parties in your case. Rent Board staff will contact you if anything is incorrect or incomplete.

#### **AFTER A PETITION IS FILED**

The landlord is mailed a Notice of Right to Object and has 20 days to file an objection to the petition. If the landlord files a timely objection, the petition is scheduled for a combined settlement conference and hearing. Notice of the time, date and place of hearing, and information about the hearing process, will be mailed to all parties no later than ten days before the hearing date. If the landlord does not file an objection, the petition may be decided without a hearing. The petitioner may be asked to submit more documents/information.

**Filing an incomplete petition will delay processing.**

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PETITION NO. T- \_\_\_\_\_

**TENANT PETITION FOR INDIVIDUAL RENT ADJUSTMENT**  
**\*\*GOVERNMENT-SUBSIDIZED UNITS ONLY\*\***

1. **Property Address:** \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Government Subsidy (not exempt from rent control):

Section 8 Housing Choice Voucher                       Shelter Plus Care

Other: \_\_\_\_\_

2. **Grounds for Petition:** Check the reason(s) for filing this petition in the spaces below AND complete the corresponding Schedule(s). Provide supporting information as indicated in the schedules.

- Illegally High Rent (Includes Failure to Refund Security Deposit).....Schedule A  
 Failure to Refund Security Deposit Interest.....Schedule B  
 Decrease in Space/Services; Violation of Codes or Warranty of Habitability; Substantial Deterioration; etc...Schedule C  
 Reduction in Number of Tenants Allowed.....Schedule D

3. **Tenant Information (\*\*Skip this section if petitioner is a Tenant Association):**

Name (Print)	Occupancy Start Date	Occupancy End Date

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Unit Number (also provide mailing address if mailing address is different from the unit address):

\_\_\_\_\_

4. **Tenant Association Information (\*\*Skip this section if petitioner is not a Tenant Association):**

**Attach a copy of the document containing the tenant signatures establishing the Tenant Association.**  
**Are the signatures of tenants representing at least 50% of the occupied rental units?**  Yes  No

Name of Tenant Association: \_\_\_\_\_

Name of Tenant Association Point of Contact: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Mail Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

List All Units of the Property: \_\_\_\_\_

Did you send all units the Rent Board Petition Opt-Out Form?  Yes  No

**Submit all completed Opt-Out Forms you receive as early as possible before the hearing.**

4. **Landlord:** List the owner(s) of the building and the person to whom you pay your rent.

Name \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Name \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

5. **Government Agency:** List the government agency providing the rental assistance or other subsidy.

Agency Name \_\_\_\_\_  
Name of Agency Contact \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

6. **Tenant Representative:** Person or organization authorized to represent you, if any:

Name \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

7. **Consolidation:** If another petition was recently filed for the same property, and you know the petition number or unit designation, please provide that information. \_\_\_\_\_

8. **Certification:** I declare under penalty of perjury of the laws of the State of California that the information in this petition, and in all schedules, attachments and forms, is true and correct to the best of my knowledge and belief.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**NOTE: All signatures must be original and all petitioning tenants must sign the Certification section of the petition.**

**PROOF OF SERVICE**

I AM A RESIDENT OF \_\_\_\_\_ COUNTY AND WAS, AT THE TIME OF SERVICE, OVER EIGHTEEN YEARS OF AGE. ON \_\_\_\_\_ (DATE), I SERVED ONE COPY OF THE FOLLOWING DOCUMENT(S): \_\_\_\_\_

\_\_\_\_\_

BY: (CHECK APPROPRIATE BOX)

**\*\*You must list all the other parties, including the subsidizing government agency.\*\***

**DELIVERING THE DOCUMENTS IN PERSON TO THE FOLLOWING INDIVIDUAL(S):**  
[PRINT NAME OF EACH PARTY SERVED:]

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLACING THE DOCUMENTS, ENCLOSED IN A SEALED ENVELOPE WITH FIRST-CLASS POSTAGE FULLY PAID, INTO A U.S. POSTAL SERVICE MAILBOX, ADDRESSED AS FOLLOWS:**  
[PRINT NAME AND ADDRESS AS SHOWN ON ENVELOPE OF EACH PARTY SERVED:]

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I DECLARE UNDER PENALTY OF PERJURY OF THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.**

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(PRINTED NAME)