



LANDLORD PETITION
(Fair Return or Pass-Through of Capital Improvement Costs)

This petition is to request an increase of rent in excess of the Rent Increase Threshold set forth in the RRSO based on one or more of the following grounds:

1. To request a rent increase in excess of the Rent Increase Threshold or in excess of a ten percent (10%) Rent Increase, inclusive of Banking and/or Capital Improvement costs in order to obtain a Fair Return.
2. To request a pass through of incurred Capital Improvement costs. Petition must be submitted within two (2) years completion of the Capital Improvement work.
3. To request a Provisional Decision by an Arbitrator for pass-through of Capital Improvement costs, prior to the work being performed. A final decision will be issued by the Arbitrator upon completion of the Capital Improvement(s) and submission of the necessary documentation.

IMPORTANT INFORMATION

A. Mediation/Arbitration

Mediation. Mediation is a collaborative process where the Landlord and Tenant(s) who have a disagreement regarding the Rent Increase, can develop options, consider alternatives, and develop a consensual agreement. The role of the Mediator is to facilitate open communication to resolve dispute in a non-adversarial and confidential manner. If no agreement is reached in mediation, the case proceeds to arbitration.

Arbitration. Arbitration is similar to a court proceeding where an arbitrator hears the case and makes a legally binding decision based on the parties' arguments and evidence.

Pursuant to City of Hayward Municipal Code Section 12-1.07(i), mediation may be unilaterally waived by Landlord in favor of arbitration for a Landlord Petition. Such a request must be in writing and must be made no later than seven (7) days before the scheduled mediation date.

I wish to waive mediation and proceed directly to arbitration.

B. Requesting Translation Services

Requests for translation services during mediation or arbitration need to be submitted to the Rent Review Office in writing at least five (5) days prior to the scheduled mediation or arbitration hearing.

Do you need an interpreter for the mediation/arbitration?

- YES Language: _____
- NO

C. Scheduling

The Mediation/Arbitration will be scheduled no earlier than fourteen (14) days and no later than thirty (30) days after petition acceptance. Please identify dates and times you are available during that time frame and/or if there are specific dates and times you are not available (*you may be general - e.g. "Mondays and Wednesdays - I am available after 3 p.m."*). Mediations/Arbitrations can take 2 to 3 hours.

D. Ways to Submit Your Landlord Petition Form

You may submit your Landlord Petition, along with documentary evidence, **in person, by mail, or by e-mail**. See table below for the City of Hayward Rent Review Office contact information.

Contact Information for Rent Review Office	Mail your Landlord Petition to:
Monday through Friday 8:30 a.m. – 12:00 p.m. 1:00 p.m. – 5:00 p.m. Closed 12:00 p.m. – 1:00 p.m. E-mail: housing@hayward-ca.gov Phone: (510) 583-4454	Rent Review Office 777 B Street Fourth Floor Hayward, CA 94541

[Signature page follows]

DECLARATION

I (we) declare under penalty of perjury pursuant to the laws of the State of California that the contents of the foregoing Petition and all attachments, schedules, and accompanying documents, are true, correct, and complete.

I further declare under penalty of perjury under the laws of the State of California that:

- I (we) have complied with the provisions of the Residential Rent Stabilization Ordinance and certify that *(please check all that apply)*:
 - The conditions of the rental property for which rent adjustment is sought, is in substantial compliance with the City of Hayward Housing Code and all state and local health and safety laws and that there are no outstanding citations or notices of violations for the property.
 - Any known citation or violations of the City of Hayward Housing Code and any state and local health and safety laws related to the rental property will be remedied prior to the commencement of arbitration proceedings, absent and showing of good cause.
 - All applicable rent stabilization administration fees have been paid.
 - All applicable rent stabilization administration fees will be paid prior to the commencement of arbitration proceedings.
 - I (we) have complied with the noticing requirement stipulated in the City of Hayward Municipal Code Section 12-1.15(g) and would be able to provide copies of the Acknowledgement of Receipt of Notice for each affected Tenant if requested.

Signature: _____

Print Name: _____

Date: _____ I opt in for communication via email

Signature: _____

Print Name: _____

Date: _____ I opt in for communication via email

Signature: _____

Print Name: _____

Date: _____ I opt in for communication via email

Please fill out this form as completely as you can. Failure to provide needed information may result in your petition being rejected or delayed.

I. GROUNDS FOR FILING THIS PETITION

Check all applicable grounds and complete **only** the corresponding Schedule(s).

- 1 I am petitioning for a Capital Improvement Pass-Thru **(Complete Schedule A)**
- 2 I am petitioning for a provisional decision for a Capital Improvement Pass-Through **(Complete Schedule A)**
- 3 I am petitioning for a rent increase in excess of the Rent Increase Threshold or in excess of 10% in order to obtain a Fair Return **(Complete Schedule B)**

II. RENTAL PROPERTY INFORMATION

Rental Property Address		
City	State	Zip code
Purchase date <i>(mm/dd/yyyy)</i>	Purchase price	
Parcel number (found on property tax bill)	Total Number of Units	

III. LANDLORD INFORMATION

Owner's name		
Owner is (please select one):		
<input type="checkbox"/> Individual Owner <input type="checkbox"/> Trust* <input type="checkbox"/> Corporation or Partnership* <input type="checkbox"/> LLC* <input type="checkbox"/> Other*: _____		
*Name of authorized signatory (if applicable) – attach documentation		
Title of authorized signatory		
Address		Unit/suite number
City	State	Zip code

For Office Use Only	
Petition No.:	

Phone number Ext. _____	Phone type <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work
E-mail address	

IV. PROPERTY MANAGER INFORMATION *(if applicable)*

Property manager's name (First name, Middle Name, Last name, Suffix)		
Address		Unit/suite number
City	State	Zip code
Phone number Ext. _____	Phone type <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work	
E-mail address		
Company/organization name (if applicable)		

V. CONTACT INFORMATION FOR TENANTS IN AFFECTED UNITS

Instructions: Use a separate line for each tenant who signed the lease in each affected unit. We will need the contact information for each tenant in order to notify tenants in affected units of this Landlord Petition. Tenant information will be redacted (blacked out) in the copies sent to tenants to protect tenant privacy. You can provide tenant information in the table below or you can provide tenant contact information as an attachment.

I have provided tenant contact information as an attachment.

Unit # or other ID	Name(s) of Tenant(s) who are on the Unit's Lease	Tenant's address	Phone # for each Tenant (if known)	E-mail for each Tenant (if known)