



CITY OF OAKLAND

CITY OF OAKLAND RENT ADJUSTMENT PROGRAM

250 Frank H. Ogawa Plaza, Suite 5313
Oakland, CA 94612-0243
(510) 238-3721
CA Relay Service 711
www.oaklandca.gov/RAP

For Rent Adjustment Program date stamp.

CASE NUMBER L - _____

TENANT RESPONSE TO OWNER PETITION FOR APPROVAL OF RENT INCREASE

Please fill out this form as completely as you can. Use this form to respond to the Property Owner Petition for Approval of Rent Increase filed by the property owner of your rental unit. The Rent Adjustment Ordinance allows property owners to increase rents above the allowable annual CPI (Consumer Price Index) rate, based on certain justifications (“grounds”), if approved after a hearing with the Rent Adjustment Program (“RAP”). By completing this Tenant Response and submitting it in the required time for filing, you will be able to participate in the hearing. Failure to provide the required information may result in your Tenant Response being rejected or delayed. See “Important Information Regarding Filing Your Response” on the last pages of this packet for more information, including filing instructions and how to contact RAP with questions. Additional information is also available on the RAP website. **CONTACT A HOUSING COUNSELOR TO REVIEW YOUR RESPONSE BEFORE SUBMITTING.** To make an appointment email RAP@oaklandca.gov.

Tenant Rental Information			
_____	_____	_____	Oakland, CA _____
Street Number	Street Name	Unit Number	Zip Code
Your First Name _____		Last Name _____	
Mailing Address (if different from above): _____			
Primary Telephone: _____		Other Telephone: _____ Email: _____	
Type of unit (check one):	<input type="checkbox"/> Single family home <input type="checkbox"/> Condominium <input type="checkbox"/> Apartment, room, or live-work	Are you current on your rent? <input type="checkbox"/> Yes <input type="checkbox"/> No* If not current, explain why: _____ <small>(*Note: You must be current on your rent or lawfully withholding rent in order to file a response. Checking “No” without providing an adequate explanation may result in your response being excluded and limit your participation in the hearing.)</small>	
Number of units on the property: _____			
Case number(s) of any relevant prior Rent Adjustment case(s): _____			
Tenant Representative: (Check one) <input type="checkbox"/> No Representative <input type="checkbox"/> Attorney <input type="checkbox"/> Non-Attorney			
_____		_____	
First Name	Last Name	Firm/Organization (if any)	
Mailing Address: _____			
Phone Number: _____		Email: _____	

RENT HISTORY

Move-in Date: _____ Initial Rent at Move-In: \$ _____ Current Rent: \$ _____

When did the property owner first provide you with the City form, NOTICE TO TENANTS OF THE RESIDENTIAL RENT ADJUSTMENT PROGRAM ("RAP Notice")?

- I first received the RAP Notice on (date): _____
 I was never provided with the RAP Notice
 I do not remember if I ever received the RAP Notice

List all rent increases you have received for this unit in the past five years. Enter all information requested.

Date received rent increase notice: (mm/dd/yy)	Date rent increase went into effect: (mm/dd/yy)	Amount of increase:		Received RAP Notice with notice of rent increase?	
		FROM	TO	YES	NO
		\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
		\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
		\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
		\$	\$	<input type="checkbox"/>	<input type="checkbox"/>
		\$	\$	<input type="checkbox"/>	<input type="checkbox"/>

RESPONSE TO PROPERTY OWNER PETITION

Use the space below to respond to the rent increase requested in the Owner Petition.

- To generally contest the Owner Petition, simply check the first box under the "GENERAL RESPONSE(S)" section below.
- You may also (but are not required to) raise specific defenses pertaining to the claimed rent increase justification(s) by selecting from the "SPECIFIC RESPONSES" checklist on the following page. **Note that the property owner has the burden of proving that all requirements for the requested rent increase have been met—your failure to check any of the boxes below does NOT mean that any objection you may have is waived.**

Attach additional sheets if needed to provide further explanation. You may attach any documentation supporting your position together with your Tenant Response form. For detailed information on allowable rent increases, see Appendix A of the Rent Adjustment Program Regulations or see the Rent Adjustment Ordinance. Copies of Appendix A and the Ordinance are available on the RAP website. Brief summaries of each rent increase justification are also listed on the last page of this response packet.

GENERAL RESPONSE(S)

- I wish to generally contest the requested rent increase.
- The requested increase would cause my rent to increase by more than 30% in the last five years.
- I believe I should not have to pay the requested rent increase because the unit has been cited in an inspection report by a governmental agency as containing serious health, safety, fire, or building code violations. (*Attach copy of inspection report.*)
- I believe the property owner is not entitled to the proposed rent increase because: _____
- _____
- _____
- _____

SPECIFIC RESPONSES

(Optional)

NOTE: You do not have to make these claims in order for these issues to be decided by the Hearing Officer.

Justification	Tenant Response
Capital Improvements	<input type="checkbox"/> The claimed improvements do not meet the legal or factual requirements for "Capital Improvements" as set forth in Appendix A of the Rent Adjustment Program Regulations. <input type="checkbox"/> The claimed improvements were not completed by the date the Property Owner Petition was filed or were completed more than 24 months prior to the date the Petition was filed. <input type="checkbox"/> Property owner did not obtain finalized permit(s) for work that required permit(s). <input type="checkbox"/> The claimed improvements were not primarily a benefit to the tenants. <input type="checkbox"/> Other (<i>provide explanation</i>): _____
Uninsured Repair Costs	<input type="checkbox"/> Property owner received insurance reimbursement for claimed costs. <input type="checkbox"/> The need for some or all of the repairs was not caused by a natural disaster. <input type="checkbox"/> Other (<i>provide explanation</i>): _____
Increased Housing Service Costs	<input type="checkbox"/> The claimed expenses do not meet the legal or factual requirements for "Housing Service Costs" as set forth in Appendix A of the Rent Adjustment Program Regulations. <input type="checkbox"/> Property owner did not include all rental income or all expenses as required. <input type="checkbox"/> Other (<i>provide explanation</i>): _____
Fair Return	<input type="checkbox"/> Property owner did not provide adequate information or documentation on gross income or gross expenses as required. <input type="checkbox"/> Other (<i>provide explanation</i>): _____
Banking	<input type="checkbox"/> I have received an annual CPI increase each year since I moved in. <input type="checkbox"/> I have not received an annual CPI increase every year (just some years) but I think the proposed banking increase is too high. <input type="checkbox"/> I moved into the current unit more than 10 years ago. My rent amount 11 years ago was \$_____/month. <input type="checkbox"/> Other (<i>provide explanation</i>): _____
Additional Occupant(s)	<input type="checkbox"/> The additional occupant(s) is/are a one-for-one replacement of former tenant(s) (total number of tenants does not exceed the base occupancy level). <input type="checkbox"/> The additional occupant(s) is/are family member(s) and/or caretaker/attendant(s) of an existing tenant. (<i>See O.M.C. § 8.22.020.</i>) <input type="checkbox"/> The person does not permanently reside in the unit. <input type="checkbox"/> Other (<i>provide explanation</i>): _____

TENANT VERIFICATION

(Required)

I/We declare under penalty of perjury pursuant to the laws of the State of California that everything I/we said in this Response is true and that all of the documents attached to the Response are true copies of the originals.

Tenant 1 Signature

Date

Tenant 2 Signature

Date

REQUEST FOR OWNER DOCUMENTATION IN EXCESS OF 25 PAGES

If the property owner submitted more than 25 pages of attachments in support of their petition, the owner may have opted to not serve you with a copy of all the attachments (see if box is checked on the Property Owner Petition under "Documentation in Excess of 25 pages"). You may contact RAP to request copies of the documents (email RAP@oaklandca.gov), or you may check the box below to request that the owner provide you with copies.

- I/We request that the owner provide me/us with copies of all documents submitted in support of the Property Owner Petition.

CONSENT TO ELECTRONIC SERVICE

(Highly Recommended)

Check the box below if you agree to have RAP staff send you documents related to your case electronically. If all parties agree to electronic service, the RAP will send certain documents only electronically and not by first class mail.

- I/We consent to receiving notices and documents in this matter electronically at the email address(es) provided in this response.

MEDIATION PROGRAM

Mediation is an optional process offered by RAP to assist parties in settling the issues related to their Rent Adjustment case as an alternative to the formal hearing process. A trained third party will work with the parties prior to the hearing to see if a mutual agreement can be reached. If a settlement is reached, the parties will sign a binding agreement and there will not be a formal hearing. If no settlement is reached, the case will go to a formal hearing with a Rent Adjustment Hearing Officer, who will then issue a hearing decision.

Mediation will only be scheduled if both parties agree to mediate. Sign below if you agree to mediation in your case.

I agree to have the case mediated by a Rent Adjustment Program staff mediator.

Tenant Signature

Date

INTERPRETATION SERVICES

If English is not your primary language, you have the right to an interpreter in your primary language/dialect at the Rent Adjustment hearing and mediation session. You can request an interpreter by completing this section.

- I request an interpreter fluent in the following language at my Rent Adjustment proceeding:
- | |
|--|
| <input type="checkbox"/> Spanish (Español) |
| <input type="checkbox"/> Cantonese (廣東話) |
| <input type="checkbox"/> Mandarin (普通话) |
| <input type="checkbox"/> Other: _____ |

-END OF RESPONSE-

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 Oakland, CA 94612-0243
 (510) 238-3721
 CA Relay Service 711
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For Rent Adjustment Program date stamp.

PROOF OF SERVICE

NOTE: YOU ARE REQUIRED TO SERVE A COPY OF YOUR RESPONSE (PLUS ANY ATTACHMENTS) ON THE PROPERTY OWNER PRIOR TO FILING YOUR RESPONSE WITH RAP.

- 1) Use this PROOF OF SERVICE form to indicate the date and manner of service and the person(s) served.
- 2) Provide a completed copy of this PROOF OF SERVICE form to the person(s) being served together with the documents being served.
- 3) File a completed copy of this PROOF OF SERVICE form with RAP together with your Response. Your Response will not be considered complete until this form has been filed indicating that service has occurred.

On the following date: / / I served a copy of (check all that apply):

- TENANT RESPONSE TO OWNER PETITION FOR APPROVAL OF RENT INCREASE** plus attached pages (number of pages attached to Response not counting the Response form or PROOF OF SERVICE)
- Other:

by the following means (check one):

- United States Mail.** I enclosed the document(s) in a sealed envelope or package addressed to the person(s) listed below and at the address(es) below and deposited the sealed envelope with the United States Postal Service, with the postage fully prepaid.
- Commercial Carrier.** I deposited the document(s) with a commercial carrier, using a service at least as expeditious as first-class mail, with all postage or charges fully prepaid, addressed to the person(s) listed below and at the address(es) below.
- Personal Service.** I personally delivered the document(s) to the person(s) at the address(es) listed below or I left the document(s) at the address(es) with some person not younger than 18 years of age.

PERSON(S) SERVED:

Name	<input type="text"/>
Address	<input type="text"/>
City, State, Zip	<input type="text"/>

Name	
Address	
City, State, Zip	

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINTED NAME

SIGNATURE

DATE SIGNED

IMPORTANT INFORMATION REGARDING FILING YOUR RESPONSE

TIME TO FILE YOUR RESPONSE

Your Tenant Response form must be received by the Rent Adjustment Program within 35 days after the Owner Petition was mailed to you (30 days if the Petition was delivered in-person). RAP staff cannot grant an extension of time to file.

CONTACT A HOUSING COUNSELOR TO REVIEW YOUR RESPONSE BEFORE SUBMITTING

To make an appointment, email RAP@oaklandca.gov or call (510) 238-3721. Although the Housing Resource Center is temporarily closed for drop-in services, assistance is available by email or telephone.

DOCUMENTS SUBMITTED IN SUPPORT OF RESPONSE

All attachments submitted together with your Response must be numbered sequentially. You may submit additional evidence in support of your Response up to seven days before your hearing. You must serve a copy of any documents filed with RAP on the other party and submit a PROOF OF SERVICE form.

SERVICE ON PROPERTY OWNER

You are required to serve a copy of your Tenant Response form (plus any attachments) on the property owner or the property owner's representative and submit a PROOF OF SERVICE form together with your Response.

- (1) Serve a copy of your Response on the owner by mail or personal delivery.
- (2) Complete a PROOF OF SERVICE form (*included in this Response packet and available on RAP website*) indicating the date and manner of service and the person(s) served.
- (3) Provide the owner with a completed copy of the PROOF OF SERVICE form together with the document(s) being served.
- (4) File a completed copy of the PROOF OF SERVICE form together with your Response when submitting to RAP.

Note: Your Response will not be considered complete until a PROOF OF SERVICE form has been filed indicating that the owner has been served.

FILING YOUR RESPONSE

Although RAP normally does not accept filings by email or fax, RAP is temporarily accepting Responses via email during the COVID-19 local state of emergency. You may also fill out and submit your Response online through the RAP website or deliver the Response to the RAP office by mail. If the RAP office is closed on the last day to file, the time to file is extended to the next day the office is open. If you send your Response by mail, a postmark date does not count as the date it was received. Remember to file a PROOF OF SERVICE form together with your Response.

Via email: hearingsunit@oaklandca.gov

Mail to: City of Oakland
Rent Adjustment Program
250 Frank H. Ogawa Plaza, Ste. 5313
Oakland, CA 94612-0243

File online: <https://www.oaklandca.gov/services/respond-to-an-owner-petition-for-the-rent-adjustment-program>

In person: TEMPORARILY CLOSED
City of Oakland
Dalziel Building, 250 Frank H. Ogawa Plaza Suite
5313 Reception area
Use Rent Adjustment date-stamp to stamp your documents to verify timely delivery and place them in RAP self-service drop box.

AFTER RESPONSE IS FILED

In most cases, RAP will schedule a hearing to determine whether the Property Owner's Petition should be granted or denied. You will be mailed a Notice of Hearing indicating the hearing date. If you are unable to attend the hearing, contact RAP as soon as possible. The hearing will only be postponed for good cause.

FILE/DOCUMENT REVIEW

If the property owner submitted more than 25 pages of attachments in support of their Petition, the owner may have opted to not serve you with a copy of all the attachments (see if box is checked on the Property Owner Petition form under "Documentation in Excess of 25 pages"). You may contact RAP to request copies of the documents (email RAP@oaklandca.gov), or you may check the box on your Response to request that the owner provide you with copies.

Either party may contact RAP to review the case file and/or to request copies of any documents pertaining to the case at any time prior to the scheduled hearing.

FOR MORE INFORMATION

Additional information on the petition and hearing process is located on the RAP website and in the Residential Rent Adjustment Program Ordinance and Regulations (see Oakland Municipal Code 8.22.010 *et seq.*). For more information on rent increases, including the list of the annual allowable CPI rates and calculators for certain justifications, see: <https://www.oaklandca.gov/resources/learn-more-about-allowable-rent-increases>, or you can refer to the Guide on Oakland Rental Housing Law at <https://cao-94612.s3.amazonaws.com/documents/Guide-to-Oakland-Rental-Housing-Law-1.pdf>. You may also contact a RAP Housing Counselor with questions at any time by emailing RAP@oaklandca.gov or calling (510) 238-3721.

SUMMARY OF JUSTIFICATIONS FOR RENT INCREASES ABOVE THE CPI

Capital Improvements

Allows pass-through of portion of costs for qualified capital improvements to units benefitting from improvements over amortization period based on expected life of improvement and not to exceed 10% of tenant's rent in starting year. Calculation for building-wide improvements must factor in total number of units, even if vacant or owner/manager-occupied. Not counted as part of base rent for calculating next increases. Pass-through drops off at end of amortization period.

Uninsured Repair Costs

Costs for work done to secure compliance with any state or local law to repair damage resulting from, fire, earthquake, or other casualty or natural disaster, to the extent not reimbursed by insurance proceeds. Calculated and applied like capital improvements.

Increased Housing Service Costs

Compares two (2) years' net operating costs to determine if increase rate exceeds current year's CPI. Calculation must include all rental income and all operating expenses (no one expense can be singled out). Replaces CPI increase for current year; applies to all units.

Fair Return on Investment

Requires evidence to show that without the requested rent increase owner is being denied a fair return on investment in the subject property. Requires analysis and proof of gross income (e.g., total of gross rents lawfully collectible from a property at 100% occupancy, plus any other consideration received or receivable) and gross costs (e.g., property taxes, housing service costs, and the amortized cost of capital improvements) on subject property in the current year and base year. Cannot be combined with any other justification for increase. Replaces CPI increase for current year; applies to all units.

Banking

Banking refers to deferred allowable annual rent increases. Any unclaimed CPI increase, or partial increase, may be carried over to a future year's increase ("banked"). A banked increase, including the current CPI, is capped at no more than three times (3X) the CPI on the date that increase takes effect, or 10% of the current rent, whichever is lower. Any banking left over may be carried over to another year. Banking cannot be given more than ten years after it accrues, and will expire. Banking can be combined with other rent increase justifications as long as the cap is not exceeded. If challenged, evidence of the rental history of the subject unit is required. A petition is not required to give a banked increase unless owner wishes to combine banking with other type(s) of justification.

Additional Occupant(s)

Allows up to a 5% increase for each additional occupant above the base occupancy level. An additional occupant who is the spouse, registered domestic partner, parent, grandparent, child, adopted child, foster child, or grandchild of an existing tenant, or the legal guardian of an existing tenant's child or grandchild who resides in the unit, or a caretaker/attendant as required for a reasonable accommodation for an occupant with a disability, does not qualify as an "additional occupant" for purposes of imposing a rent increase.