



• **FORM RP-209** •

**Notice to a Tenant Concerning Whether Tenant Will Vacate After a
Relocation Rent Increase**

Contact us if you need translation services or reasonable accommodations due to a disability.

PURPOSE

When serving a tenant with a notice of a rent increase of more than 10 percent (a “Relocation Rent Increase”), the landlord must provide the following attachment to each tenant. The tenant may then use this attachment to notify the landlord if the tenant intends to vacate the unit within 90 days of the tenant’s receipt of the notice of the rent increase. If the tenant informs the landlord that the tenant will vacate the rental unit, the tenant is entitled to receive a Permanent Relocation Payment. See Section 6-58.15(X), 15(HH), 85(A), and 100(D), Alameda Municipal Code (AMC), and the Relocation Payment Fee Schedule on page 3.

INSTRUCTIONS

LANDLORD: Serve this notice on the tenant(s) at the same time and in the same manner as the notice of a rent increase. A copy of the notice of a rent increase, this notice, and a proof of service (Form RP-204) must be filed with the Rent Program within three calendar days of service of the notices on the tenant. Documents may be emailed to rentprogram@alamedahsg.org, faxed to (510) 522-7848, or delivered or mailed to 701 Atlantic Ave., Alameda, CA 94501.

See the Permanent Relocation Payment fee schedule on page 3 of the attachment for information on the amount and distribution requirements for relocation payments if the tenant decides to vacate the rental unit.

Tenant instructions concerning this notice are included with the attachment.

ATTACHMENT RP-209 FOR THE TENANT (three pages)

- This is an important document, please have it translated. If you require interpretation, please call (510) 747-4346 or come to our office.
- Este es un documento importante, hágalo traducir. Si usted requiere interpretación, por favor llame al (510) 747-4346 o diríjase a nuestra oficina.
- 本文件為重要文件，請做好翻譯。我們免費提供翻譯服務。如果您需要翻譯服務，請致電 (510)747-4346，或來我們辦公室。
- Đây là tài liệu quan trọng, vui lòng biên dịch. Nếu bạn cần giải thích, xin gọi (510) 747-4346 hoặc đến văn phòng của chúng tôi.
- Ito ay isang mahalagang dokumento, mangyaring ipasalin ito. Kung kailangan mo ng interpretasyon, mangyaring tumawag sa (510) 747-4346 o Dumating sa aming opisina.

INSTRUCTIONS

TENANT: Under the City of Alameda's Rent Ordinance, an increase in rent that, on a cumulative basis over the 12 months preceding the effective date of the rent increase, amounts to more than 10 percent is defined as a "Relocation Rent Increase." See Section 6-58.15(X) and 15(HH), Alameda Municipal Code (AMC).

When a landlord serves a tenant with a notice of a Relocation Rent Increase and the tenant informs the landlord in writing that the tenant will vacate the rental unit within 90 days of receiving the notice the landlord must provide the tenant with a Permanent Relocation Payment in accordance with the Permanent Relocation Payment fee schedule shown on page 3. See Section 6-58.85(A), AMC.

To receive a relocation payment, a tenant must provide certain information to the landlord in writing. A tenant may use this form for that purpose:

1. Complete the tenant assertion and declaration below.
2. Provide the completed attachment to the landlord. You will be entitled to one half of the relocation payment within three business days thereafter. .
3. File a copy of the attachment and, if applicable, required documentation with the Rent Program by any of the following methods:
 - a. Email: rentprogram@alamedahsg.org
 - b. Fax: (510) 522-7848
 - c. Mail or deliver in person: 701 Atlantic Avenue, Alameda, CA 94501-2161
4. If your household is a Qualified Tenant Household, the Rent Program may ask you to submit proof of your eligibility, such as government-issued identification showing a birth date or a Verification of Disability Status form filled out by a qualified professional.
5. Vacate the rental unit within 90 days of your receipt of the notice of the rent increase in order to receive the second half of the relocation payment.

PLEASE NOTE

Any records included with this form and submitted to the Rent Program may be subject to disclosure under the California Public Records Act. Note however, that a tenant's confidential, private medical or financial information will not be disclosed under the Public Records Act.

Tenant Assertion

I, _____, _____, the Tenant at
(First Name) (Last Name)
_____, Alameda, California assert the following:
(Rental Unit Address)

I was served with a notice of rent increase on _____, 20_____.

That notice provides that my monthly rent is to increase from \$_____ per month to \$_____ per month, effective _____, 20_____, a rent increase of more than 10%.

If I vacate the rental unit within 90 days of receiving the notice of rent increase, I am entitled to a permanent relocation payment of \$_____, as set forth in the Permanent Relocation Payment fee schedule on the following page.

Please check the appropriate box below to indicate whether you intend to vacate the unit.

- I will not vacate the rental unit and will continue my tenancy.
- I will vacate the rental unit by _____, 20_____.

(Indicate a date no later than 90 days after you received the notice of rent increase.)

Check all that apply to indicate whether your household is eligible for a greater relocation payment as a Qualified Tenant Household. File with the Rent Program the required documentation to demonstrate proof of assertion.

_____ The household includes a tenant who is 62 years of age or older. (Tenant must provide proof: e.g., photo identification, passport or municipal identification.)

_____ The household includes a tenant who is a person with a disability within the meaning of California Government Code, section 12926. (Please have a qualified professional complete the Verification of Disability Status form that follows the Tenant Declaration.)

_____ The household includes a tenant who has at least one child under the age of 18 residing in the household. (Tenant must provide proof: e.g., birth certificate.)

Tenant Declaration

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this Declaration was executed on _____, 20____ at _____, California.

Tenant Signature _____ **Date** _____

Phone Number _____ **E-mail** _____

Payment Amount and Distribution

Rental Unit	Base Amount	Qualified Tenant Household Amount
Studio	\$5,938	\$7,674
1 bedroom	\$6,669	\$8,773
2 bedrooms	\$7,705	\$10,295
3 bedrooms	\$9,674	\$13,279
4+ bedrooms	\$11,305	\$15,727

“Qualified Tenant Household” means a household with a tenant who is displaced for any reason other than under subsections A, B, C or D of Section 6-68.80, AMC, and who (i) is a senior adult 62 years of age or older, (ii) is a person with a disability or (iii) has at least one child under the age of 18 residing in the household.

The relocation payment will be distributed on a pro-rata basis to each eligible tenant.

The landlord shall pay half of the applicable Permanent Relocation Payment within three business days of the landlord’s receipt of a written notice from the tenant that the tenant will vacate the rental unit. The landlord shall pay the other half within three business days after the tenant has (i) vacated the rental unit by no more than two calendar days after the date the tenant has informed the landlord that the tenant would vacate the rental unit, and (ii) removed all of tenant’s personal property from the rental unit and/or from other property of the landlord, such as a storage unit. See Section 6-58.100(D), AMC.