

**CITY OF HAYWARD RENT REVIEW OFFICE MOBILEHOME
PARK SERVICE REDUCTION CLAIM FORM***

If you claim a reduction in housing services, fill out all of this form. Use a separate form for each service reduced.

Service you believe to be reduced: _____

Who is affected by service reduction (other tenants, entire park)? _____

Estimated or known value of service. (Please indicate the basis for your estimate and attach your calculations.) _____

Original level of service: _____

Date on which service was first reduced: _____

Current level of service: _____

Date you asked Park Management to restore service: _____

Note: Section 5(b) requires that you ask Park Management in writing to restore service(s) within one year after discovery/notice of the service reduction. Please attach a copy of your request for restoration of service to this claim form and answer all of the following:

When you found out about the change in service and how/from whom?

How you discovered the service reduction? Written notice _____ Oral notice _____

Other (describe) _____

Landlord's response to request to restore services: _____

***SIGN AND ATTACH COMPLETED FORM TO YOUR PETITION**

Signature: _____ Date: _____

Address: _____ Telephone: _____