

TENANT PETITION FORM

CASE # _____

TENANT INFORMATION

First Name _____ **Last Name** _____

Address _____ Unit # _____ City _____ State _____ Zip _____

Phone Number _____ Email _____ Move In Date _____

Consent to Receive/Send Documents by Email? No Yes
 Rent Voucher (e.g. Section 8) Recipient? No Yes; Type of Voucher: _____
 Interpreter Needed for a Hearing? No Yes; Language: _____

Ethnicity: Choose all that apply. (Optional)

| | | | | |
|------------------|--------------------|------------------------|-------------------------|----------------|
| Hispanic | Non-Hispanic | Latinx | White | Middle Eastern |
| African Ancestry | Native American | Chinese | Filipino | Japanese |
| Korean | Vietnamese | South Asian | Other Asian | Samoan |
| Native Hawaiian | Guamanian/Chamorro | Other Pacific Islander | Two or More Ethnicities | |
| Not specified | Other: _____ | | | |

LANDLORD INFORMATION

Landlord **Property Manager**

First Name _____ **Last Name** _____

Mailing Address _____ City _____ State _____ Zip _____

Phone Number _____ Email _____

REASONS FOR FILING THIS PETITION (CHECK ALL THAT APPLY)

There is a challenge to a rent increase: Above 5% Before 12 Months Unit not registered in Rent Registry
 There is a challenge to a charge received.
 Repairs are not made or I've been without service(s) that are listed in the agreement.
 There are other reasons for filing this petition that are ordinance violations.

SECTION I. RENT INFORMATION/UNAUTHORIZED CHARGE, FEE, OR PASS THROUGH

This section must be completed.

- Do you have a written lease with your landlord? Yes No Verbal (Date of lease): _____
- Were you on the original lease? Yes No; I was added on the lease on (date): _____
- Are you concerned about your security deposit? Yes No
- Security deposit amount: \$ _____ Is the deposit being increased? No Yes; to: \$ _____
- Did you receive a rent increase? Yes No



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SECTION I CONT. RENT INFORMATION/UNAUTHORIZED CHARGE, FEE, OR PASS THROUGH

This section must be completed.

6. Date rent increase notice received: _____ In writing? No Yes Verbal Amount: \$ _____
7. New rent amount: \$ _____ Effective Date: _____
8. Current rent amount: \$ _____ Effective Date: _____
9. Previous rent amount: \$ _____ Effective Date: _____
10. Who is the person you pay rent to? _____ Owner Manager Other: _____

Have you received any of the following charges or fees below?

Refer to Tenant Petition Instructions Section I

- | | | | | | |
|-------------------------------|-----|----|---------------------------------------|-----|----|
| 11. Application Screening Fee | Yes | No | 15. Replacement Fee for Security Card | Yes | No |
| 12. Late Payment Fee | Yes | No | 16. Utilities (Water, Garbage, Sewer) | Yes | No |
| 13. Excess Bounced Check Fee | Yes | No | 17. Other (Describe): _____ | | |
| 14. Replacement Fee for Keys | Yes | No | | | |

SECTION II. PROBLEMS WITH THE APARTMENT OR COMMON FACILITIES

List all problems or complaints you have with your apartment that have occurred over the past twelve months. Please list each problem separately. (Refer to Tenant Petition Instructions Section II)

Problem: _____

- Date problem started: _____
- Did you tell management? No Yes, who and date: _____
- How did you tell management? Written Verbal
- Did management fix the problem? No Yes
- Does the problem still exist? No Yes
- Requesting a rent credit for a service reduction? No Yes
- How has the problem affected you? _____



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SECTION II CONT. ADDITIONAL PROBLEMS WITH THE APARTMENT OR COMMON FACILITIES

List all problems or complaints you have with your apartment that have occurred over the past twelve months. Please list each problem separately. (Refer to Tenant Petition Instructions Section II)

Problem: _____

- Date problem started: _____
- Did you tell management? No Yes, who and date: _____
- How did you tell management? Written Verbal
- Did management fix the problem? No Yes
- Does the problem still exist? No Yes
- Requesting a rent credit for a service reduction? No Yes
- How has the problem affected you? _____

Problem: _____

- Date problem started: _____
- Did you tell management? No Yes, who and date: _____
- How did you tell management? Written Verbal
- Did management fix the problem? No Yes
- Does the problem still exist? No Yes
- Requesting a rent credit for a service reduction? No Yes
- How has the problem affected you? _____

Problem: _____

- Date problem started: _____
- Did you tell management? No Yes, who and date: _____
- How did you tell management? Written Verbal
- Did management fix the problem? No Yes
- Does the problem still exist? No Yes
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SECTION III. OTHER APARTMENT RENT ORDINANCE VIOLATIONS

Please describe other acts or events, which have happened in the last 12 months, that you think violate the Apartment Rent Ordinance (attach additional sheets to provide more information, if needed):

SECTION IV. SUPPORTING DOCUMENTS

Please indicate the documents you are including with this petition:

| | | |
|----------------|---|--------|
| Copy of Lease | Notice of Rent Increase | Photos |
| Rent Receipts | Dept. Code Enforcement Report | Other |
| Other Receipts | Correspondence (letters, e-mails, etc.) | |

Have you notified your landlord that you will submit this petition? No Yes

Are you willing to participate in voluntary mediation process? No Yes

The information provided in this petition will be used by the Rent Stabilization Program staff to contact the landlord/manager and the tenant. If the tenant moves from the above residence after filling this petition, the tenant is required to notify the Rent Stabilization Program of new address and phone number, if any.

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THIS INFORMATION AND EVERY ATTACHED DOCUMENT, STATEMENT, AND FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Signature of Tenant

Date

PLEASE NOTE: YOU MAY SUBMIT YOUR PETITION VIA EMAIL TO RSP@sanjoseca.gov.

FOR OFFICE USE ONLY

Date Received: _____

Eligible _____ %

Registered in Registry: Yes No

Ineligible 2nd

Service Reductions
Rights

Landlord RUBS

Tenant Utilites: _____

Approve Date: _____

Staff Initials

_____ LS

_____ VP

_____ EG

_____ RP

