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Este es un documento importante, hágalo traducir.
本文件為重要文件，請做好翻譯。我們免費提供翻譯服
Đây là tài liệu quan trọng, vui lòng biên dịch.
Ito ay isang mahalagang dokumento, mangyaring ipasalin ito.

November 16, 2017

Re: Rent Program Registration Fee Due

Dear Property Owner:

On March 1, 2016, the City Council adopted the Rent Review, Rent Stabilization, and Limitations on Evictions Ordinance (the Ordinance) that impacts most landlords in the City of Alameda. The Ordinance provides a framework for reviewing rents, terminating tenancies, and paying relocation benefits for "no fault" terminations. Rent increases above 5% are subject to a hearing before the City's Rent Review Advisory Committee. Termination of tenancies and calculation of relocation benefits are regulated under the Ordinance. A copy of the Ordinance can be found in Chapter VI, Article XV of the Alameda Municipal Code on the City's website at:

https://library.municode.com/ca/alameda/codes/code_of_ordinances?nodeId=CHVIBUOCIN_ARTXVRESTLIEVOR_6-58.10TI

The Rent Program Fee covers the cost of administering the Ordinance. City Council Resolution No. 15271, adopted on June 6, 2017, sets a Rent Program Fee of \$120 that property owners must pay for each Rental Unit that was rented or available to rent as of July 1, 2017.

Enclosed is the Fiscal Year 2017/18 (July 1, 2017 to June 30, 2018) Registration Form for the City of Alameda Rent Stabilization Program for your property.

You are being sent this letter and Registration Form because, based on information available to the City and the Housing Authority of the City of Alameda, you own one or more "Rental Units" in the City of Alameda. If you do not own rental property in the City of Alameda or you do own rental property in the City but you do not intend to rent that property during this Fiscal Year 2017/18, please complete sections A, B and G of the attached Registration Form and return it in the enclosed envelope.

Under the City's Ordinance, certain rental units are not subject to the Rent Program Fee. For example, rental units for which the rents are regulated by federal law or by agreements with governmental agencies (e.g., Section 8 units) are not subject to the Rent Program Fee. On the other hand, single-family homes or condominiums that are rented are subject to the Rent Program Fee, even if you do not pay a business license tax for

such property. A complete list of rental units not subject to the Rent Program Fee can be found in Section 6-58.15.Z (definition of a Rental Unit).

Please be advised that the Fiscal Year 2017/18 Rent Program Fee **cannot** be "passed through" to a tenant.

Please complete the attached Registration Form for each rental property that you own and, by not later than January 1, 2018, return it, along with the applicable Rent Program Fee, to the City of Alameda Finance Department in the envelope provided. If you own more than one rental property in the City, please complete a separate form for each property. The Registration Form is also available on the City's website at <https://alamedaca.gov/finance/rent-stabilization-program>.

If you have questions concerning this matter, please contact us at 510-747-4881 or finance@alamedaca.gov.

Sincerely,

Elena Adair
Finance Director

Cc: Rent Program Administrator



City of Alameda
2017/18 Rent Program Registration Form
2263 Santa Clara Ave., Room 220
Alameda, CA 94501
Phone: 510-747-4881 Fax: 510-865-4045
email: finance@alamedaca.gov

Date Received:

A. PROPERTY OWNER CONTACT INFORMATION

Received by:

* Denotes a required field

First & Last Name (Primary Owner Named on Title)*

Additional Owners (Present on Title)

Owner Mailing Address*

City*

State*

Zip*

Owner's Phone*

Owner's Email*

Owner is a (please select one):*

☐

Individual

☐

Trust

☐

LLC

☐

Corporation or Partnership

(if selected, complete next field)

If Trust, LLC, Corporation or Partnership is selected, provide name(s) of Trustee(s)/CEO/Managing Partner:

Date of Most Recent Acquisition*

B. RENTAL STATUS

☐

This property is not a rental property and there is no intent to rent this property during Fiscal Year 2017/18 (July 1, 2017 to June 30, 2018).

(If selected, complete Section G below and return to the City of Alameda Finance Department.)

C. PROPERTY MANAGER INFORMATION

(Please fill out all fields if applicable)

Property Management Company

Property Manager Full Name

Property Manager Address

City

State

Zip

Phone

Email

Send Rent Stabilization Program mail to (check all that apply):

☐

Owner Mailing Address

☐

Property Manager Mailing Address

☐

Owner Email

☐

Property Manager Email

D. PROPERTY INFORMATION

Assessor Parcel Number (APN) *

Street Number*

Street Name*

City*

State*

Zip*

Business License Number (If Applicable)

Business License Expiration Date

E. UNIT SUMMARY (ONLY include units associated with APN above)*

1. Number of Single-Dwelling Units (put zero if there are none):

2. Number of Multi-Dwelling Units:

3. Number of Rental Units Not Subject to Program Fee (see part F below):

4. Total Number of Rental Units LESS Rental Units Not Subject to Program Fee:**TOTAL PROGRAM FEE CALCULATOR**

Number of Units:

(Please enter total units from Item # 4 above)

Fee per unit

x \$120

(Multiply #/units by Program Fee \$120)

Total Fee Due

\$

Mail Cash/Check or Pay by Credit Card In-Person

Program Fee

Multi-Dwelling Unit (two or more Rental Units)

Per Rental Unit

\$120

Single Dwelling Unit

Per Rental Unit

\$120

F. RENTAL UNITS NOT SUBJECT TO THE PROGRAM FEE

The following Rental Units are not subject to the Program Fee: Housing Units, regardless of ownership, regulated by federal law or by a regulatory rental agreement between a Landlord and (i) City, (ii) the Housing Authority, (iii) any agency of the State of California or the Federal Government, in addition to other Rental Units as set forth in Section 6-58.15.Z of Ordinance No. 3148.

G. DECLARATION*

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

Signature of Owner or Authorized Agent: _____ DATE: _____