

SANTA MONICA RENT CONTROL BOARD
1685 Main Street, Room 202, Santa Monica, CA 90401
(310) 458-8751

www.smgov.net/rentcontrol

Petition D-_____

PETITION FOR RENT DECREASE

[Regulation 4001A]

(office use only)

Site Address: _____ MAR: _____

MPP: _____ Date Submitted: _____

I. PETITIONER(S): _____
Name(s)

Street Address Unit Zip Code

Home Phone Cell Phone

Email Address Business Phone

Mailing Address: _____
(if different from above) Street Address City Zip Code

II. My current rent is \$ _____ **I moved into my unit on:** _____

I have an Authorized Representative. See information and signature(s) on Page 6.

III. LANDLORD INFORMATION: _____
Name

Street Address City State Zip Code

Home/Cell Phone Business Phone Email Address

IV. MANAGER INFORMATION: _____
Name

Street Address City State Zip Code

Home/Cell Phone Business Phone Email Address

V. MAINTENANCE RELATED CONDITIONS [Regulation 4200(d)]

Compare your **Notice To Landlord to Repair or Restore Services** with the list of conditions below. In **Column A**, place an **X** in any item that you have **also checked in your original Notice** that has **not** been repaired or restored.

The dollar values in **Column B** will be used by the Rent Control Board in determining the amount of rent decrease warranted by each situation.

The Hearing Examiner or the Board may grant a decrease that is greater or less than the amount shown based upon the evidence that is presented at the hearing. [Regulations 4200(e) and (h).]

Note: The conditions or services you check below must correspond to those conditions or services noted in your initial NOTICE TO LANDLORD or letter.

<u>A</u>	<u>CATEGORY</u>	<u>B</u>
_____	1. Serious infestation of insects or rodents	\$15 - \$175
_____	2. Substantial holes in floors, walls, or ceilings	\$15 - \$175
_____	3. Damaged wall or ceiling surface, including paint, wallpaper, plaster, drywall, or wood trim	\$15 - \$90
_____	4. Water leakage through roof, windows, doors, walls, or ceiling	\$15 - \$175
_____	5. Damaged or missing waterproofing or weather protection	\$15 - \$175
_____	6. Defective plumbing, drains, sewage system, toilet facilities, sinks, showers, bathtubs, or plumbing fixtures	\$15 - \$350
_____	7. Loss of or insufficient hot water or water supply	\$15 - \$220
_____	8. Inoperative or damaged heating system or air conditioning	\$15 - \$220
_____	9. Unsafe or inoperative electrical wiring, outlets, or fixtures	\$15 - \$260
_____	10. Damaged window or door, including locks	\$5 - \$90
_____	11. Damaged or missing window screen or screen door	\$5 - \$45

<u>A</u>	<u>CATEGORY</u>	<u>B</u>
_____	12. Damaged or missing window coverings, including drapes, curtains, shades or blinds	\$15 - \$175
_____	13. Damaged or missing floor coverings, including carpets, carpet padding, hardwood, laminate, tile, linoleum, or vinyl	\$15 - \$330
_____	14. Defective or inoperative appliance	\$15 - \$90
_____	15. Broken fan or vent	\$5 - \$30
_____	16. Deteriorated countertops	\$15 - \$45
_____	17. Damaged or missing tile	\$15 - \$45
_____	18. Damaged or missing caulking, grout	\$5 - \$30
_____	19. Deteriorated or broken cabinets or drawers	\$20 - \$60
_____	20. Broken or missing smoke detector, carbon monoxide detector, fire extinguisher, or fire sprinklers	\$15 - \$75
_____	21. Defective or inoperative elevator	\$15 - \$90
_____	22. Deteriorated porches, walkways, stairs, or railings	\$15 - \$175
_____	23. Accumulation of garbage, debris or other inappropriate materials in common areas	\$5 - \$45
_____	24. Broken or defective intercom	\$15 - \$40
_____	25. Damaged or missing mailbox	\$15 - \$45
_____	26. Inoperative or missing exterior lights	\$15 - \$65
_____	27. Other [Regulation 4200(b)]:	

VI. REDUCED HOUSING SERVICES [Regulation 4200(f)]

Tenants who moved into unit prior to January 1, 1999 - The housing services checked below that were included in the April 10, 1978 rent for my unit have been reduced or removed.

Or

Tenants who moved into unit on or after January 1, 1999 - The housing services checked below that were included in my initial rent for this unit have been reduced or removed.

<u>A</u>	<u>CATEGORY</u>	<u>B</u>
_____	1. Parking	\$30 - \$550
_____	2. Storage	\$5 - \$220
_____	3. Furniture	\$5 - \$275
_____	4. Laundry facilities	\$30 - \$175
_____	5. Security gates, doors, and fencing	\$30 - \$260
_____	6. Recreational facilities	\$15 - \$175
_____	7. Yards, patio, balconies, play areas	\$15 - \$175
_____	8. Landscaping	\$5 - \$90
_____	9. Gardening or yard care services	\$5 - \$90
_____	10. Management services, including on-site management	\$30 - \$115
_____	11. Reduction in number of permitted occupants (see Regulation 4200(i) for calculation of decrease)	% of rent
_____	12. Other [Regulation 4200(b)]:	

VII. PETITION SUPPORT

Please state all information in support of your Petition for a rent decrease, including the names of any witnesses or any documents you have relied upon. List names of any persons you feel should attend a hearing (attach a separate sheet if needed). **Please notify your witnesses of the hearing date and time once scheduled.**

Have you received or do you have any knowledge of your landlord's receiving any notices or reports from City or County agencies regarding health or safety violations on the property?

_____ Yes _____ No

If yes, please explain:

If you have received any of the above-mentioned notices or reports, please attach these to this Petition.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge and belief. **(All petitioners listed on Page 1 must sign.)**

Executed on this _____ day of _____, 20_____

at _____, California.

Signature of Petitioner

Signature of Petitioner

Signature of Authorized Representative

I have attached the following documents where applicable (check). **Items #1 & #2 are required in order to file this petition:**

- _____ 1. Copy of NOTICE TO LANDLORD or your letter to landlord requesting corrected conditions or restored services. [Regulation 4003(c)].
- _____ 2. A completed Proof of Service form [Regulation 4003(c)].
- _____ 3. Copies of any notices or reports you have received from any City or County agencies or departments.

VIII. REPRESENTATIVE AUTHORIZATION: I hereby authorize the party named below to act as my representative in proceedings on these matters. I authorize said representative to complete and execute under penalty of perjury Santa Monica Rent Control Board petitions and any response forms, notices, or proofs of service on my behalf. My representative is also authorized to appear for me at any hearing on this matter. I understand my representative will receive all notices, decisions, and other Board correspondence and will be responsible for notifying me of same.

I agree to be bound by each of the entries made by said person in this matter to the same extent as if I had executed it myself under penalty of perjury.

Representative Name

Street Address

City

State

Zip Code

(_____) _____
Phone Number

Email Address

Signature of Petitioner

Print Name

Signature of Petitioner

Print Name