

CITY OF CULVER CITY

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TEVIS BARNES Housing and Human Services Director HOUSING AND HUMAN SERVICES DEPARTMENT

HOUSING DIVISION RENT CONTROL AND TENANT PROTECTIONS

9770 CULVER BOULEVARD, CULVER CITY, CALIFORNIA 90232-0507

# REPLACEMENT UNIT DETERMINATION HOUSING CRISIS ACT OF 2019, AS AMENDED BY SB 8 (2021) Updated April 2023

The Housing Crisis Act of 2019, as amended by SB 8 (California Government Code Section 66300 et seq.), prohibits the approval of any proposed housing development project ("Project") on a site ("Property") that will require demolition of existing dwelling units or occupied or vacant "Protected Units" unless the Project replaces those units as specified below. The following requirements apply:

#### **Replacement of Existing Dwelling Units**

The Project shall provide at least as many residential dwelling units as the greatest number of residential dwelling units that existed on the Property within the past 5 years.

#### **Replacement of Existing or Demolished Protected Units**

The Project must also replace all existing or demolished "Protected Units". Protected Units are those residential dwelling units on the Property that are, or were, within the 5 years prior to the owner's request for a SB 8 Replacement Unit Determination (SB 8 RUD): (1) subject to a recorded covenant, ordinance, or law that restricts rents to levels affordable to persons and families of lower or very low income, (2) subject to any form of rent or price control through a public entity's valid exercise of its police power within the 5 past years, (3) rented by lower or very low income households (an affordable Protected Unit), or (4) that were withdrawn from rent or lease per the Ellis Act, within the past 10 years.

Whether a unit qualifies as an affordable Protected Unit, is primarily measured by the INCOME level of the occupants (i.e. W-2 forms, tax return, pay stubs, etc.). The Culver City Housing and Human Services Department (HHS) will send requests for information to each renter of the existing project. Requests for information can take two (2) or more weeks to be returned. It is the owner's responsibility to work with the occupants to ensure that the requested information is timely produced.

State law creates a rebuttable presumption that lower income, low income, or very low-income households occupied these protected units in the same proportion that lower income, low income, or very low-income households to all renter households within the jurisdiction as determined by the most recently available data from the United States Department of Housing and Urban Development's ("HUD") Comprehensive Housing Affordability Strategy database. The level of affordability depends on the status of the unit (occupied, unoccupied, vacated, or demolished). The applicant may provide evidence to rebut the presumption.

*In the absence of renter income documentation*: Affordability will default to the percentage of extremely low, very low- or low-income renters in the jurisdiction as shown in the latest <u>HUD</u>

Culver City Employees take pride in effectively providing the highest levels of service to enrich the quality of life for the community by building on our tradition of more than seventy-five years of public service, by our present commitment, and by our dedication to meet the challenges of the future.

<u>Comprehensive Housing Affordability Strategy (CHAS) database</u>. All replacement calculations resulting in fractional units shall be rounded up to the next whole number.

#### Relocation, Right to Return, Right to Remain:

All occupants of Protected Units (as defined in California Government Code Section 66300(d)(2)(F)(vi)) being displaced by the Project have the right to remain in their units until six (6) months before the start of construction activities with proper notice subject to Chapter 16 (Relocation Assistance) of Division 7, Title I of the California Government Code ("Chapter 16"). However, all **Lower Income Household** (as defined in California Health and Safety Code Section 50079.5) occupants of Protected Units are **also** entitled to: **(a)** Relocation benefits also subject to Chapter 16, and **(b)** the right of first refusal ("Right to Return") to a comparable unit (same bedroom type) at the completed Project. If at the time of lease up or sale (if applicable) of a comparable unit, a returning occupant remains income eligible for an "affordable rent" (as defined in California Health and Safety Code Section 50053) or if for sale, an "affordable housing cost" (as defined in California Health and Safety Code Section 50052.5), owner must also provide the comparable unit at the "affordable rent" or "affordable housing cost", as applicable. The right to return provision does not apply to: **(1)** a Project that consists of a Single-Family Dwelling Unit on a site where a Single-Family Dwelling unit is demolished, and **(2)** a Project that consists of 100% lower income units except Manager's Unit.

#### Application for a Replacement Unit Determination

Owners of a Project subject to the above replacement obligations must complete a SB 8 RUD form with HHS. Information provided by the owner and existing tenant(s), as well as information gathered by HHS will be used to determine whether any Protected Units exist. An SB 8 RUD can take up to 6 to 8 weeks to process upon receipt of all the required documents. Owners will be provided with the completed SB 8 RUD and a copy will be sent to the Culver City Current Planning Division for discretionary projects or Culver City Building & Safety Division for ministerial projects. For additional questions about the SB 8 <u>RUD</u>, please contact HHS at rent.control@culvercity.org.

## REPLACEMENT UNIT DETERMINATION FORM HOUSING CRISIS ACT OF 2019, AS AMENDED BY SB 8 (2021)

To receive a Replacement Unit Determination, please complete the following and attach all required documentation. Please attach an explanation for any information you are unable to provide. Please put project address at the top of all attachment pages submitted.

HIMS #				
(For internal use only)				
SB 8 Processing Fees				
	Number of Units	Total Fee	Check Amount	

		Number of Units	Total Fee	Check A	mount:
Per Unit Fee:	per unit			Check N	lumber:
	i	I		Check D	Date:
Property Ov	wner				
Name:			Contact F	Person:	
Address:					
Phone:		Fax:	Cell:		Email:
	ortv:			erson:	
Name:			Contact F	Person:	
Role in Prop			Address:		
Phone:		Fax:	Cell:		Email:
	e <b>(Select all t</b> bject Type (C	hat apply): heck one): Apart	ment	Condo	Small Lot Subdivision
roposed Prc					
·	y Entitlemer	nts with Culver C	ity Current Pl	anning Divisio	n? (Check one): Yes No
iscretionary	•	nts with Culver C	•	anning Divisio	n? (Check one): Yes No

Building Permit Application Number(s):

If no Building Permit Application, please explain:

City Planning Dept. Case #(s) and Tentative Tract #(s):

# EXISTING PROPERTY (include ALL existing buildings within the last 5 years in complex - attach additional pages if needed)

APN Number(s):			
Lot Number(s):			
Does this property have a Certificate of Occu	pancy issued o	n or before February <sup>2</sup>	1, 1995?
Are there any residential dwelling units withd lease within the last 10 years? If yes, provide		or	
Does this property have a	recorded lot tie	?	
Building Address/Unit #s:	Building Type	# of Bedrooms in Each Unit	# of Units in Building
dd Total Units in Complex:			

# Description of existing units, buildings or APN within the last five years

# Miscellaneous project details, notes, comments, etc.

# **Required Documents**

# Please mail or email to: Culver City Housing and Human Services Department(HHS)

Applicant's Affidavit + Owner's Acknowledgment (with letter signed by owner of record and notarized). Letter of Application

(List units within the last 5 years, including unit #, unit square footage, and number of bedrooms).

Tenant Information Table:

•If unit is rented, list the occupant's name, unit number, rent amount, occupancy dates, contact information and the bedroom type/count of the unit they occupied.

•If unit is not rented, explain its current use and give date last renter vacated.

Tenant Income Verification Documents – Refer to the occupant's Request for Information form. Owner Occupancy Proof: •If Homeowner Exemption was taken, provide copies of Property Tax Documents for each year of the 5 year look back period.

•If Homeowner Exemption was NOT taken, provide copies of the owner's car registration, homeowner's insurance, or other third- party documents within the 5 year look back period. Upon review of the documents initially provided, HD may request additional information/documentation.

Vacancy Proof:

•Provide a copy of the Southern California Edison (SCE) or other energy bill with activity periods covering the date of application.

•For the purposes of affordable unit replacement exemption, if the property was vacant for the entirety of the 5 year look back period,

provide each SCE or other utility bill within the 5-year period.

Grant Deed (Recorded).

Ellis documents, tenant relocation documents (RCO units), if applicable.

Owner and Tenant Affidavit on Tenant Rights (completed and signed by both parties).

Culver City Housing and Human Services Department (HD) Re: Replacement Unit Determination (SB 8) 9770 Culver Blvd.

Culver City, CA 90232

<u>\*\*IMPORTANT - SUBORDINATIONS WILL BE REQUIRED. IF APPLICABLE\*\*</u> OWNER UNDERSTANDS THAT ANY CITY LAND USE COVENANT GENERATED FOLLOWING THE COMPLETION OF THIS DETERMINATION MUST BE <u>SENIOR</u> TO ANY DEED(S) OF TRUST RECORDED AGAINST THE REAL PROPERTY ON WHICH OWNER'S PROPOSED PROJECT WILL SIT AND THAT OWNER IS RESPONSIBLE FOR OBTAINING SIGNATURES FROM THEIR RESPECTIVE LENDER(S) FOR ANY REQUIRED SUBORDINATION(S). INITIAL HERE:

All documentation must be received within 30 days of the date this application was signed by Owner. For additional questions, please contact HD at <u>rent.control@culvercity.org</u>

Signature of Owner

Date:

Under penalty of perjury, I certify that the information presented in this application is true and accurate to the best of my knowledge. Title 18, Section 1001 of the U.S. Code states that a person is guilty of felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.

Date: \_\_\_\_\_

To: Culver City Housing Division (HD) Replacement Unit Determination (SB 8) 9770 Culver Blvd. Culver City, CA 90232

Re:

Address (including apartment or unit number/s)

(All APN Numbers)

# OWNER'S AFFIDAVIT (Use when owner is the applicant)

[circle one: a LLC, LP, corporation, ("Owner")

other: \_\_\_\_\_hereby certifies that:

(1) Owner is the legal owner of the above-referenced real property ("Property"); and

(2) That the person(s) identified below ("Authorized Signatory/ies") has/have been legally authorized to sign on its behalf as evidenced by the separate instrument(s) attached herewith; and

(3) The documents furnished to HD in conjunction herewith, represent the full and complete information required for the Replacement Unit Determination requested for the Property and that the facts, statements and information presented are true and correct to the best of its knowledge and belief.

Owner declares under penalty of perjury under the State of California that the foregoing is true and correct.

### \*Attach California Notary Public Acknowledgement

Executed on	at		_, California		
	(Date)	(City)			
Print Full Name of A	Authorized Signatory/ies:				
Signature of Author	ized Signatory/ies:				
(additional signature	e lines may be added as needed)				

Date: \_\_\_\_\_

To: Culver City Housing Division (HD) Replacement Unit Determination (SB 8) 9770 Culver Blvd. Culver City, CA 90232

Re: \_\_\_\_\_

Address (including apartment or unit number/s)

(All APN Numbers)

# <u>APPLICANT'S AFFIDAVIT AND OWNER'S ACKNOWLEDGMENT</u> (Use when Applicant and Owner are separate entities)

[circle one: an LLC, LP, corporation,

o<u>ther:</u> ("Applicant") hereby certifies that:

(1) Applicant is the pote	ntial future developer of the	above-referenced real property
("Property") owned by		circle one: an LLC, LP, corporation,
o <u>ther:</u>	("Owner"); and	

(2) That the person(s) identified below ("Authorized Signatory/ies") has/have been legally authorized to sign on Owner's behalf as evidenced by the separate instrument(s) attached herewith; and

(3) The documents furnished to HD in conjunction herewith, represent the full and complete information required for the Replacement Unit Determination requested for the Property and that the facts, statements and information presented are true and correct to the best of its knowledge and belief.

Applicant declares under penalty of perjury under the State of California that the foregoing is true and correct.

### \*Attach California Notary Public Acknowledgement

Executed on (Date)	at (City)	, California
Print Full Name of Autho	orized Signatory/ies:	
Signature of Authorized	Signatory/ies:	
(additional signature line	es may be added as needed)	

# **OWNER'S ACKNOWLEDGMENT:**

Owner and/or Applicant must also attach hereto:

A letter from the Owner [on business letterhead as applicable] to the City, attesting to ownership of the Property and confirming that Applicant is the potential future developer of the Property, that Owner is aware of, has no objections to, and authorizes the Applicant to submit an Replacement Unit Determination to HD for its Property.

• If the Owner is an LLC, the letter must be signed by all Managers or Managing Members.

• If the Owner is a LP, the letter must be signed by all General Partners.

• If the Owner is a Corporation, the letter must be signed by the CEO and Secretary or Chief Financial Officer.

# **\*TENANT INFORMATION TABLE**

Owner Name:

Project Address:

Name(s) of Occupant(s)	Unit Number	Rent Amount	Occupancy Dates	Contact Number	Contact Email Address	Bedroom Type

\*For single family dwellings (SFDs), information regarding the occupants of SFDs will also need to be provided.

Under the penalty of perjury, I certify that the information presented in this form is true and accurate to the best of my knowledge. Title 18, Section 1001 of the U.S. Code States that a person is guilty of felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_



Date: \_\_\_\_

To: Culver City Housing Division (HD) Replacement Unit Determination (SB 8) 9770 Culver Blvd. Culver City, CA 90232

Re:

Address (including apartment or unit number/s and APNs)

### **OWNER AND TENANT AFFIDAVIT ON TENANT RIGHTS**

I/We	am	a/are	an	existing	tena	ant(s	s) ("	Tenant")
of Address/Unit #, a,		bedroom	n uni	it, at the	e abov	ve-re	eferend	ced real
property ("Property") which is owned by				("(	Owner"	).	l/We	will be
displaced from the Property due to its pending demo	olition	for the	со	nstructio	n of	а	new	housing

development project (the "Project");

II/We acknowledge that the Owner has provided me/us with notice that:

(1) All occupants of Protected Units have the right to remain in their units until six (6) months before the start of construction activities with proper notice subject to Chapter 16 (Relocation Assistance) of Division 7, Title I of the California Government Code ("Chapter 16"); and

(2) All **Lower Income Household** occupants of Protected Units are also entitled to: **(a)** Relocation benefits, and **(b)** the right of first refusal ("Right to Return") to a comparable unit (same bedroom type) at the new Project following completion and that depending income level at the time of lease up or sale, if applicable, may be entitled to return at an affordable rent per California Health & Safety Code Section 50053 or an affordable housing cost pursuant to California Health & Safety Code 50052.5

#### IF A LOWER INCOME HOUSEHOLD CHECK ONE:

\_\_\_\_\_ I/We have opted to exercise my/our Right to Return to the new Project and have informed the Owner. Owner has agreed to contact me/us at \_\_\_\_\_\_

at least 3 months before lease up or sale if applicable, to confirm the availability of the comparable unit at the Project. I/We understand that my/our current income documentation must be provided to Owner at this time and certified by the City so that the rent level or sales price if, applicable for the comparable unit may be determined. I/We understand that only income qualified households are entitled to return at an affordable rent or an affordable housing cost.

\_ I/We hereby decline to exercise my/our Right to Return to the new Project.

Renter and Owner hereby declare under penalty of perjury under the State of California that the foregoing is true and correct.

### Additional signature blocks may be added.

FOR TENANT:

FOR OWNER:

Print Name:

Print Name and Title:

Signature

Signature