

Instructions for Submitting Petition:

If a Tenant contends that a proposed or actual Rent increase is not in compliance with Culver City Municipal Code (CCMC) Section 15.09.215 or that there has been a Reduction in Housing Services, the Tenant may file a Tenant Petition for Noncompliance with the Housing Division. The Tenant shall mail a copy of the Petition by first class mail, postage prepaid, to the Landlord within five (5) calendar days after the date the Petition is filed. Within ten (10) calendar days after the date the Petition is filed, the Tenant shall file a proof of service signed under penalty of perjury stating that a copy of the Petition was mailed to the Landlord. Proof of Service Forms may be obtained on the City's website at <https://www.culvercity.org/rent> or requested from the Housing Division at the above contact information. Tenant Petitions for Noncompliance will be considered and determined by the Director in accordance with Housing Division Guidelines; and the Director's decision may be appealed to a hearing officer, in accordance with the procedures set forth in CCMC Section 15.09.240.

I. General Information [PLEASE PRINT OR TYPE]

A. Tenant's Name: _____

Address of Rental Unit for which this Petition is being filed:

Current or Mailing Address (if different): _____

Daytime telephone: () _____ Cell: () _____

Residence telephone: (____) _____ Email: _____

B. Current and former owners and managers alleged to have charged excess Rent or decreased Housing Services. (Add additional pages, if necessary.)

Current Owner: _____

Address: _____

Telephone : (____) _____

Former Owner: (if applicable) _____

Address: _____

Telephone : (____) _____

Current Manager: _____

Address: _____

Telephone : (____) _____

II. Excessive Rent or Reduction in Housing Services:

Important:

Pursuant to the City’s Rent Control Ordinance, Culver City Municipal Code (CCMC) Section 15.09.215.B:

- Rent for a Covered Rental Unit may be increased annually, without application to the City, in an amount not to exceed the Percentage Change in CPI.
- In no event shall the Rent for a Covered Rental Unit be increased more than 5% every 12 months.
- If the Percentage Change in CPI is less than 2%, Rent may be increased by up to 2%.
- Not more than one Rent increase may be imposed in any 12-month period.

Percentage Change in CPI is defined as the percentage change in the annual average CPI, which is the average of the latest twelve (12) monthly CPIs published before the effective date of the Rent increase minus the average of the prior twelve (12) monthly CPIs (the “base CPI”), divided by the base CPI and multiplied by 100. The Percentage Change in CPI shall be rounded to the nearest one-quarter of one percent. The Percentage Change in CPI is published on the City’s website approximately 45 – 60 days prior the 1st of each month, at <https://www.culvercity.org/rent>.

Pursuant to CCMC Section 15.09.220.E, a decrease in Housing Services is considered an increase in Rent. Housing Services is defined as all services provided by the Landlord related to the use or occupancy of a Rental Unit, including, but not limited to, insurance, repairs, replacement, maintenance, painting, utilities, heat, water, elevator service, laundry facilities, recreational areas and/or pools, janitorial service, refuse removal, furnishings, parking, storage, and security services. A Tenant may petition for an adjustment in Rent based on a decrease in Housing Services under the process set forth in CCMC Section 15.09.235.

A. Please include a statement indicating the basis on which Tenant contends that a proposed or actual Rent increase or a proposed or actual reduction in Housing Services is in violation of the Rent Control Ordinance: (Attach additional pages if needed.)

B. Please check all of the following that apply:

	I received a Rent increase greater than the maximum permissible Rent increase listed on the City's website at https://www.culvercity.org/rent .
	I received more than one Rent increase within a 12-month period.
	The charging of any fee for services or amenities which landlord is legally obligated to provide without additional charge, e.g., utilities, appliances, maintenance, laundry facilities, parking, furnishings, security, garage, recreational facilities, trash pick-up.
	The charging of any fee for services or amenities which were not legally required to be provided with the unit but which a tenant was required to agree to accept as a condition to continue occupancy in the unit.
	The charging of rent in excess of the lawful rent to a subtenant or co-tenant by a tenant.

III. Base Rent Information

A. I moved in on (Month/Day/Year): ____/____/____

B. What was the initial rent charged? \$_____

IV. Excessive Rent History

A. When did collection of excess Rent begin? (Month/Day/Year): ____/____/____
(Attach checks or other documentation of Rent paid.)

Are you still paying excess Rent? YES ____ NO ____

If not, when did the collection of excess Rent end? (Month/Day/Year): ____/____/____

B. Was any portion of the excess Rent claimed in this Petition returned to you?
YES ____ NO ____

If yes, how much and when? \$_____ (Month/Day/Year): ____/____/____

C. Have you ever withheld rent in order to satisfy this claim of excess Rent? YES _____ NO _____

If yes, state day or months that rent was withheld, and amount of rent withheld.

V. Reduction in Housing Services History

A. When did the reduction of Housing Services begin? (Month/Day/Year):

____/____/____

(Attach all documentation of reduced Housing Services.)

Are you still experiencing a reduction in Housing Services? YES _____ NO _____

If not, when did the reduction of Housing Services end? (Month/Day/Year):

____/____/____

B. Were any of the reduced Housing Services reinstated or corrected?

YES _____ NO _____

If yes, describe the nature of the Housing Services and when they were reinstated or corrected:

(Month/Day/Year): ____/____/____

C. Have you received any compensation to offset the reduced Housing Services?

YES _____ NO _____

If yes, indicate the amount of compensation and the date(s) received (attach additional pages if necessary):

\$ _____ (Month/Day/Year): ____/____/____

\$ _____ (Month/Day/Year): ____/____/____

\$ _____ (Month/Day/Year): ____/____/____

D. Have you ever withheld Rent in order to satisfy this claim of reduction in Housing Services?

YES _____ NO _____

If yes, state day or months that Rent was withheld, and amount of Rent withheld.

VI. Co-Tenant Information

List the names and addresses of roommates or any other person(s) who have lived in the unit and paid Rent during the time covered by this Petition (do not list Tenant who is filing this Petition): (Attach additional pages if needed.)

Name: _____

Address: _____

Daytime telephone number : _____

Dates of tenancy/occupancy : _____

Name: _____

Address: _____

Daytime telephone number : _____

Dates of tenancy/occupancy : _____

VII. Supporting Documentation:

IMPORTANT: The Tenant shall bear the burden of proving by a preponderance of the evidence that the Rent increase or reduction in Housing Services is not in compliance with the Rent Control Ordinance. Therefore, it is important that the Tenant submit any and all documentation that may support the claims made in this Petition. Check the box to the left of each type of documentation submitted.

	1.	Cancelled checks or money orders (rent, security deposit, utility payment, amenities)
	2.	Receipts for payment of #1 above
	3.	Bank statements (if electric rent payments)
	4.	Rental Agreements/Leases.
	5.	Notice of annual rent increase for all time periods.
	6.	Relevant correspondence with owner/agent
	7.	Separate Agreements (including parking, storage or other amenities)
	8.	Other documents that support your Petition.

VIII. Amount of Rent Paid: (For a Reduction in Housing Services, see Section IX below.)

A. List only those months for which you claim excess Rent was paid. Begin completing the chart with the most recent date for which you have evidence that you paid excess Rent. Complete this chart carefully, using a new line for each month for which you have evidence of paying Rent. (If you have roommates who also pay rent to the owner, include the total amount paid by everyone.)

MONTH/YEAR	AMOUNT OF RENT PAID	TYPE OF EVIDENCE SUBMITTED (CHECK/MONEY ORDER)	OFFICE USE ONLY		
			LEGAL RENT	EXCESS RENT	TOTALS
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					

B. Missing Documentation: If there is a month or months for which you have not attached any documentation in the section above: 1. Identify the line number and the month 2. Explain why you have not attached documentation:

IX. Details of Reduced Housing Services:

List only those months for which you claim your Housing Services were reduced. Begin completing the chart with the most recent date for which you have evidence that you experienced a reduction in Housing Services. Complete this chart carefully, using a new line for each month for which you have evidence of a reduction in Housing Services. (*Housing Services are defined as all services provided by the Landlord related to the use or occupancy of a Rental Unit, including, but not limited to, insurance, repairs, replacement, maintenance, painting, utilities, heat, water, elevator service, laundry facilities, recreational areas and/or pools, janitorial service, refuse removal, furnishings, parking, storage, and security services.*)

MONTH/YEAR	TYPE OF HOUSING SERVICES	TYPE OF EVIDENCE SUBMITTED (LEASE/RENTAL AGREEMENT, CORRESPONDENCE, PHOTOS, ETC.)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

X. Communication with Landlord:

Before filing this Petition for Noncompliance with the Housing Division, has the Tenant attempted to resolve the matter of excessive Rent or reduction of Housing Services with the landlord/management company?

YES _____ NO _____

If Yes, please describe the dates and communications with the landlord/management company, and the landlord's/management company's response: (Please include relevant documentation. Attach additional pages if needed.)

XI. Certification

Under penalty of perjury, I hereby certify that the information I have provided in this Petition and any attached pages and supporting documentation is true and correct to the best of my knowledge and belief.

Signature: _____

Date : _____

Print Name: _____

For Office Use Only

Petition No.: _____ Date Filed: _____

Site Address: _____

Intake Staff Initials: _____