



Residential Rental Registration Form

Instructions: Complete this form, including the Unit Information Worksheet, for each property with a unique title. Enter the property's Assessor's Identification Number (AIN) at the top of each page. Send the completed form and all required attachments by email (as one attached PDF document) to: rent.control@culvercity.org or by mail to: Housing Office, Attn: Rent Control, 9770 Culver Blvd., Culver City, CA 90232. If you are claiming exclusion from the registration requirements, also complete Section 7. Questions? Call (310) 253-5790 or email rent.control@culvercity.org. All documents that are submitted to the City are subject to the California Public Records Act (CPRA) and may be subject to disclosure, unless otherwise exempt. Any information that qualifies under an exemption pursuant to the CPRA will be redacted and will not be disclosed to the public.

1. Property Address

Street Address				AIN		
City			State		Zip	
# of Rental Units at Property		Certificate of Occupancy Date:	<input type="checkbox"/> on or before February 1, 1995 <input type="checkbox"/> after February 1, 1995			
Type of Property	<input type="checkbox"/> Apt. Bldg <input type="checkbox"/> Condo <input type="checkbox"/> Duplex <input type="checkbox"/> Triplex <input type="checkbox"/> Fourplex <input type="checkbox"/> Single Family <input type="checkbox"/> Mobile Home <input type="checkbox"/> Other _____					

2. Ownership

Instructions: All owners must be listed. Attach an additional sheet to list more than two owners. If Owner is a trust, LLC, corporation, or business partnership, enter the first and last name and contact information of the trustee, managing member, CEO or responsible party.

Owner 1						
Trust/LLC/Business Name				Ownership %		
First Name			Last Name			
Email				Phone		
Mailing Address						
Street Address				Unit		
City			State		Zip	
Emergency Contact Information						
Emergency Contact Name			Emergency Contact Phone			

Owner 2						
Trust/LLC/Business Name				Ownership %		
First Name			Last Name			
Email				Phone		
Mailing Address						
Street Address				Unit		
City			State		Zip	
Emergency Contact Information						
Emergency Contact Name			Emergency Contact Phone			

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Property AIN:

3. Authorized Agent Information (if applicable)

Instructions: Enter information for the person you authorize to sign Rent Control documents for you.

First Name		Last Name	
Email		Phone	
Mailing Address			
Street Address		Unit	
City		State	Zip

4. Who is the primary point of contact for all rent control related matters for the City of Culver City?

- Owner 1 Owner 2 Authorized Agent

5. Unit Information Worksheet

Instructions: Complete the Unit Information Worksheet on page three, including each unit at the property.

6. Proof of Ownership

Instructions: Attach a copy of your most recent Los Angeles County consolidated property tax bill as proof of ownership. Owners of record must match owners named above.

7. Exclusion

Only complete Section 7 if you are claiming an exclusion from the rental registration requirement. Otherwise, skip to Section 8. Exclusions are only allowed if (a) the unit is vacant or (b) the unit lacks its own bathroom or kitchen facility and is occupied by a tenant who uses a bathroom or kitchen facility in common with the landlord or a member of landlord's immediate family.

Instructions: Check the box, below. Attach (1) supporting documentation and (2) a written declaration stating the facts upon which you base your claim of exclusion. Also complete the remainder of this form.

- I declare that the units listed on this form are excluded from the Residential Rental Registration requirement.

8. Signature

I declare under penalty of perjury under the laws of the State of California that I am one of the owners, listed above.

I declare under penalty of perjury under the laws of the State of California that the foregoing information is true and correct to the best of my knowledge.

I hereby authorize and appoint the agent listed above to execute, under penalty of perjury, the City of Culver City rent registry and other registration related documents for this property. I agree to be bound by each document filed by this person to the same extent as if I had completed the document and executed it under penalty of perjury myself.

Owner Signature	
Owner First and Last Name (please print)	
Date	

After receipt of a completed form, the Rent Registration Certificate for each unit will be emailed as a PDF to the primary point of contact selected above. If you require a paper hardcopy to be mailed, please check this box:



Unit Information Worksheet

Property AIN:

Instructions: Check one of the two boxes, below, that applies to the property listed in Step 1. Then enter information for each unit at the property listed in Step 1. If there are more than three units on site, add additional sheets.

All current tenancies at this property commenced on or after January 1, 1999
 One or more current tenancies at this property commenced on or before December 31, 1998. (see lease start dates, below)

Street Address				Unit #	Unit is Vacant		
# Bedrooms	# Bathrooms	Year Built	Certificate of Occupancy Date	Current Lease Start Date	Current Lease End Date	Monthly Rent Amount on June 11, 2019	Current Monthly Rent Amount

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