

Rent Stabilization Program

(650) 903-6149 | mvrent@mountainview.gov Mountainview.gov/rentstabilization

<u>This is not a rent decrease</u>. Landlord(s)/Property Owner(s) will receive written notification of a public hearingthat will be held for this Petition and have the right to appear and be heard at these hearings.

NOTICE OF SUBMISSION AND PROOF OF SERVICE TO LANDLORD OF PETITION REQUESTING DOWNWARD ADJUSTMENT OF RENT AS DEFINED BY THE COMMUNITY STABILIZATION AND FAIR RENT ACT (CSFRA)

Landlord:
Address:
This is to notify you that a petition has been submitted requesting a downward adjustment of the rent for my rental unit pursuant to the City of Mountain View Community Stabilization and Fair Rent Act ("CSFRA"). <u>A copy of the petition is attached to this Notice</u> . <u>To review the complete and redacted Petition Packet, including</u> evidentiary documentation, please contact the City of Mountain View's Rent Stabilization Program.
The submitted petition is based on the following reasons:
(Check each box that applies; a separate petition form is required for each checked box.)
\square Unlawful rent pursuant to the CSFRA
\Box Failure to maintain habitable premises and/or has decrease in housing services or maintenance
☐ Undue tenant hardship
You are entitled to participate in all stages of this process and to have representation if you wish. You also have the right to file a Response Notice. A copy of the Response Notice is attached. For more details about the petition process, please visit www.mountainview.gov/rentstabilization . Once the attached petition is accepted for filing by the Rental Housing Committee's designated administrator, the process for deciding the petition will begin.
For help, please call the City of Mountain View's Rent Stabilization Program at (650) 903-6136, email mvrent@mountainview.gov or visit our Rent Stabilization Program during our virtual office hours on Tuesdays from 10 am-12 pm by registering at www.mountainview.gov/rspofficehours .
<u>Tenant</u>
Date:
Signature:
Print Name:
Address:
Unit Number:

Este formulation está disponible en español y mandarín. | 此表格有西班牙语和中文版本

DISCLAIMER: Neither the Rental Housing Committee nor the City of Mountain View make any claims regarding the adequacy, validity, or legality of this document under State or Federal law. This document is not intended to provide legal advice. Please visit mountainview.gov/rentstabilization or call 650-903-6136 for further information.

Tenant Proof of Service of Petition Packet

I declare that I am over eighteen years of age, and that I served one copy of the attached Notice of *Tenant Petition* on the *affected party(ies) listed below by*:

	Personal Service Delivering the documents in person on the day of, 20, at the address(es) or location(s) above to the following individual(s).				
	Mail				
	Placing the documents, enclosed in a sealed envelope with First-Class Postage fully paid, into a U.S. Postal				
	Service Mailbox on the day of, 20, addressed as follows to the following individual(s).				
	Email				
	Emailing the documents on the day of, 20, at the email address(es) as follows to the				
	following individual(s).				
	Affected Party				
	INSERT RESPONDENT NAME				
INSERT RESPONDENT ADDRESS					
	INSERT RESPONDENT EMAIL				
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct:					
	Executed on this day of, 20				
	Signature:				
	Print Name:				
	Address:				



Rent Stabilization Program

650-903-6149 | mvrent@mountainview.gov Mountainview.gov/rentstabilization

COMMUNITY STABILIZATION AND FAIR RENT ACT (CSFRA) PETITION RESPONSE FORM

This form may be used to respond to a petition that affects you or your property. Please contact our office at 650-903-6136 if you have any questions or for more information about the petition process.

Infor	mation of P	erson Responding to Petition:			
Name:		Phone:			
	Mailin	g Address:			
	Email:				
l am a	a:				
	Tenant	☐ Landlord ☐ Other affected party: (please state how you are affected by the petition):			
Petiti	on Informa	tion:			
Peti	ition Case N	umber:			
Proj	Property Address:				
Nan	ne of Petitic	oner(s):			
Туре	of Respons	e being Submitted: (select all that apply)			
		Response to a Petition (on the next page, please provide your response to each claim in the petition)			
		Objection to a Compliance Petition (on the next page, please provide the reasons for your objection and attach supporting documents or evidence)			
		Request for Hearing of a Capital Improvement Petition (please complete, sign, and attach the Request for Hearing form found at mountainview.gov/rentstabilization)			
		Tenant Petition for Undue Hardship in response to any Landlord Petition (please complete, sign, serve, and attach the Tenant Petition "C": Undue Tenant Hardship packet, including the petition form, Workbook C, and the Notice of Submission and Proof of Service, all found at mountainview.gov/rentstabilization)			
Meet	ing Availab	ility			
confe	erence, and	our weekday availability for scheduling of the settlement meeting (if applicable), prehearing hearing. (e.g., Mondays and Tuesdays after 2 p.m., Wednesdays between 12-1 p.m., and ridays between 10-11 a.m.)			

DISCLAIMER: Neither the Rental Housing Committee nor the City of Mountain View make any claims regarding the adequacy, validity, or legality of this document under State or Federal law. This document is not intended to provide legal advice. Please visit mountainview.gov/rentstabilization or call 650-903-6136 for further information.

I would like the Rental Housing Committee to know:		
	(Attach additional pages as needed.)	
Filing Instructions:		
	pleted form with the City of Mountain View via email (preferred method) to w.gov or by mailing to 500 Castro Street, Mountain View, CA 94041.	
Signature:		
Print Name:	Date:	

This form is a Public Record and subject to the California Public Records Act (Govt. Code Section 6250, et seq.)