

REPRESENTATIVE AUTHORIZATION FORM FOR PETITION AS DEFINED BY THE COMMUNITY STABILIZATION AND FAIR RENT ACT (CSFRA)

Tenants and property owners/landlords **(the parties to the petition)** have the right to seek help from or be represented by an attorney, legal worker, property manager, recognized tenant organization, or other designated third party, if they so choose. Any party wishing to have a representative <u>must complete</u> a Representative Authorization Form signed by the party authorizing a representative and submit it to the Rent Stabilization Division staff. *If you are the petitioner, please submit this form as part of your petition. If you submit this form later, or submit it in response to a filed petition, please serve a copy on the parties to the petition and attach a proof of service.*

<u>Property managers participating in the petition process on behalf of property owners must submit a</u> <u>Representative Authorization form completed by the property owner and signed by both the property</u> <u>owner and property manager.</u>

I. Property Information

Petition Property Address:

Affected Unit(s):

II. Contact Information for Person Requesting Representative Authorization

If you are a tenant or the property owner, please provide your contact information below. If you are a property manager completing this form on behalf of a property owner, please provide the property owner's name and contact information.

I certify that I am a Party to a Petition pending for the rental property above:

Name:

Mailing Address:

Email:

Phone:

III. <u>Representative Information</u>

Please provide the name and contact information of the person being authorized to represent you in the petition process.

Name of Representative:	
Organization/Company:	
Mailing Address:	
Email:	
Phone:	

IV. <u>**Representative Designation**</u> (*Please check <u>ONE</u> of the following boxes to indicate the type of representation being authorized.*)

I hereby provide **binding and unconditional authorization** to the below designated agentrepresentative to act on my behalf and to make binding decisions on my behalf. This authorization

applies to all aspects of CSFRA Regulations Chapter 13 One-Time Utility Adjustment Petition process.
This binding authority applies regardless of whether I am personally available to participate in said petition process.

I hereby select the below designated representative, to take action on my behalf and to aid me in all aspects of my participation as a party in the One-Time Utility Adjustment Petition process pursuant

to CSFRA Regulations Chapter 13. I will continue to maintain my ultimate authority to make binding decisions in this process and *I agree to make myself available* to provide input to my representative during the petition process.

<u>Prior Authorization</u> (If you previously authorized a representative and are requesting a change in representation, please print the name of the prior representative and check ONE of the boxes below.)

I previously authorized _____

______ to represent me in the petition process.

- Any previous CSFRA representative designation is hereby revoked. This authorization may only be revoked by written instrument signed by me and served on the Rent Stabilization Division and all parties to the petition pending for this rental property.
- This CSFRA representative designation is in addition to (an)other existing representative designation(s).

Signature of Person Requesting Representative Authorization

I hereby designate a representative within the meaning of Section 1711 of the CSFRA and any corresponding Regulations adopted by the Rental Housing Committee.

If this form is being filed on behalf of a property owner, the property owner must print and sign their name below. If the property owner is an entity, please have the primary Trustee(s), officer, and/or Managing Member or Partner print and sign their name below.

Signature:	Date:		
Print Name:			
Signature of Authorized Representative as Named Above in Section III			
I hereby accept my o	lesignation as a representative.		
Signature:	Date:		
Print Name:			
-	Date:		

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