



BOARD OF SUPERVISORS

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COUNTY OF LOS ANGELES  
**DEPARTMENT OF CONSUMER  
AND BUSINESS AFFAIRS**

*"To Enrich Lives Through Effective and Caring Service"*



**Joseph M. Nicchitta**  
Director

Joel Ayala  
Chief of Staff

Rafael Carbajal  
Chief Deputy

**TENANT APPLICATION FOR RENT ADJUSTMENT**

**Complete and return this form to:**

COUNTY OF LOS ANGELES  
DEPARTMENT OF CONSUMER AND BUSINESS AFFAIRS  
**RENT STABILIZATION PROGRAM**  
500 WEST TEMPLE STREET, B-96, LOS ANGELES, CA 90012-2706  
Email: [rent@dcba.lacounty.gov](mailto:rent@dcba.lacounty.gov)

<b>Applicant Information (Tenant)</b>			
Name:			
Phone #:		Alt. Phone #:	
Property Address:			
Mailing Address: <i>(if applicable)</i>			
Email:		DCBA Case #:	
<b>Authorized Representative Information <i>(if applicable)</i></b>			
First Name:		Phone #	
Last Name:		Email:	
Mailing Address:			
<b>Landlord/Property Manager Information</b>			
Name:		Alt. Contact Name:	
Phone #:		Alt. Phone #:	
Mailing Address:			
Email:			
<b>Applicant Claim <i>(choose all that apply)</i></b>			
<input type="checkbox"/> A proposed or actual <u>rent increase</u> is not in compliance with the RSO (Section 8.52.060(B)(1))			
<input type="checkbox"/> A proposed or actual <u>reduction of service</u> is not in compliance with the RSO (Section 8.52.060(B)(3))			
<input type="checkbox"/> The landlord has failed to maintain the habitability of the rental unit as required by RSO (Section 8.52.060(B)(2))			
<input type="checkbox"/> (Mobilehome) A proposed or actual <u>reduction of service</u> is not in compliance with the MRSO (Section 8.57.060(B))			
<b>Rent Information <i>(please provide supporting documents)</i></b>			
Current Rent:		Proposed Rent:	
Rent on September 11, 2018:		Date of Proposed Increase:	MM / DD / YYYY
Date of Last Rent Increase:	MM / DD / YYYY	Rent Due Date:	MM / DD / YYYY

**Claim Details** *(explain the reason for your selection(s) above)*

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Have you provided written notice to the landlord identifying the reduction of services or habitability issues?  Yes  No

When did you provide notice? *(please provide a copy of the notice)* MM / DD / YYYY

**Proof of Service (Required)**

I agree to provide a copy of this application to my landlord within 5 days of submission to DCBA: Initials

I agree to provide a Proof of Service to DCBA within 10 days of submitting this application: Initials

**Signature**

I declare, under penalty of perjury, that the above information is true and correct to the best of my knowledge. I understand if I do not meet the requirements of this application, it may be denied.

Print Name: \_\_\_\_\_

Sign Name: \_\_\_\_\_

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

**Please submit any of the following documentation to help substantiate your claim:**

- Building Documentation: Certificate of Occupancy/Final Building Permit
- Notice(s) of Rent Increase/Decrease in Housing Service(s)
- Rent Receipts from September 2018 – Present
- Most Recent Rental Agreement/Lease
- Proof of habitability violation from a public entity (Public Health, Building & Safety, Etc.)
- Written notice to landlord of violation of habitability
- Written notice to landlord of reduction of service(s)
- Other supporting documents such as utility bills and receipts demonstrating payment of housing service(s)

**NOTE:** Failure to submit required documentation may result in delays a decision on your application. Additionally, please redact any personally identifiable information as documents are subject to Public Records Act requests.