### ATTENTION TENANTS: PLEASE REVIEW CAREFULLY UPON RECEIPT



## **TENANT HABITABILITY PLAN (THP)**

# FOR SEISMIC RETROFIT WORK SOFT STORY



Email: hcidla.code.seismic@lacity.org

		IIIaII. IIC	ciuia.coue	.5612	mic@lacity.org			
1. Property Information								
Address:				City:		Zip:		Date:
APN #: Year Built:			Total Units:			Occupied	Units:	
2. Owner and Responsible	Person Info	rmation	1					
	Name		Address		City	Zip		Phone
Owner							(	)
Responsible Person							(	)
3. General Contractor Info	rmation							
License #	Name		Address		City	Zip		Phone
							(	)
4. Contractor Responsible	for Hazardo	us Mate	erial Abate	men	t		1 🗆	Not Applicable
License #	Name		Address		City	Zip		Phone
							(	)
4a. If you have checked "N	Not Applicable	e" box	for # 4, bri	iefly	explain below			
5. Describe the overall sei	smic retrofit	work to	be done					
6. Est. Duration of Work		Project Date	cted Start			Projecte Date	d End	
6a. Est. Duration of Work (appealed)	(if THP	Project Date	cted Start			Projecte Date	d End	
7. Estimated Cost of Seisr	nic Retrofit W	/ork		,	\$		-	
8. Will the seismic retro	fit work affe	ct any	occupied	l uni	it?		☐ Yes	□ No
8a. If you have answere then continue with ques		questio	n # 8, list	affe	ected unit numbe	ers in spa	ace provi	ded below and
8b. If you have answere professional such as an to provide correct inform	n engineer o	r archi	itect and/	or co	ontractor before	answerii	ng questi	on # 8. Failing

administrative cost, and/or denial of pass through cost to the tenant.

_									
9. Impact of	seismic re	etrofit work.							
	re expecte	eants with disabilied to comply with ws.							
From	Through	Impact			Des	cription			
		□ Noise		□n/a					
		☐ Utility Interruptio	n	□n/a					
		☐ Hazardous Mater	ial Exposure	□n/a					
		☐ Fire Safety Interr	uption	□n/a					
		☐ Total/ Partial Inac	ccessibility	□n/a					
		☐ Tenant Services	Disruption	□n/a					
10. Mitigation	on of Impac	cts on Individual	or Similar I	Rental Units	(Chec	ck applicable l	ooxes belov	w)	
☐ Work will n	ot create unt	entantable condition	s at any time	and tenant wi	II rema	ain in place			
		tenantable condition nant will remain in pla		am - 5 pm, M-F	, and t	tenants will n	ot be expo	sed to h	nazardous
☐ Tenants w	ill be relocate	ed for <30 days in a H	labitable unit			□ Another Building	□ Hotel/ Motel	☐ Per Diem	□ N/A
unit:	☐ Tenants will be relocated for ≥30 days in a Comparable ☐ Same ☐ ☐ ☐ Per ☐								
11. Tempora	ary Reloca	tion (Provide ad	lditional infor	mation in Sec	tion 14	l, if necessary	y)		□ N/A
From	The	ough	Distance fro	om current uni	it				Miles
signed agreen specific tenan □ Rental Cont	nent by a 3 <sup>rd</sup>   ts which are tract(s) for te ecific amenit	ement Comparable H party that he/ she will to be relocated mporary relocation a ies of the replacemen	I accept the		ımber o	of bedrooms,	, number o	f rooms	, allowance for
Any Housing S	Services Los	i? □ None	☐ Cooking Facilities	☐ Pet Accommodat	ion	☐ Parking	☐ Free Laundry		Other
Compensation	n for Lost Ser	vices							
12. Impact of	of seismic	retrofit work on T	enant Pers	onal Prope	rty &	Mitigation	Measure	s	
☐ Work areas	must be clea	red of furnishings &	other propert	ty. Identify:					
☐ Tenant furn	☐ Tenant furnishings & other property will be exposed to theft, element or other hazards								
☐ Other impac	ct on tenant p	ersonal property	☐ Moving	or Storage Ag	reeme	ent Attached	Descri	be:	
Measures use	d to protect t	enant property from	damage or lo	ss					

#### **CONFIDENTIAL ADDENDUM**

13. Identification	on of Affected Tenant	s						
Name of Primary Tenant(s) or Head of Tenant Household	Address	Unit No.	Phone No.	Current Rent	Date of Last Rent Increase	Reasonable Accommodation (RA) Requested?	RA Granted?	If yes, RA requested:
			( )	\$				
			( )	\$				
			( )	\$				
			( )	\$				
			( )	\$				
			( )	\$		. — .		
			( )	\$				
				\$				
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			( )	\$				
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			( )	\$				
			( )	\$				

15. Carefully read all conditions and initial in the bayes. These conditions establish the minimum	roguiromento
15. Carefully read all conditions and initial in the boxes. These conditions establish the minimum for THP related to performing the retrofit work required by Division 93 of Article 1 of Chapter IX of	
Angeles Municipal Code (soft-story retrofit work). Owners, contractors and design professionals n	
professional judgment to identify additional THP requirements that may be necessary to safeguard	
and property.	
Conditions	Initials
i). No seismic retrofit work will be conducted that will affect residential rental units. All retrofit work is to be done on the outside of the building.	
ii). The responsible party must submit a schedule of work to the Department's THP staff.	
iii). There must be a responsible supervisor on the job site at all times that the retrofit work is in	
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progress.	
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xii). There will be no temporary disruptions to water, electrical, gas or sewer services our	tside of the
hours of 8:00 am through 5:00 pm, Monday through Friday. Accidental disruptions to the	ese services
will be promptly corrected.	
xiii). The responsible parties will ensure that tenants are not required to occupy an untena	
dwelling, as defined in California Civil Code Section 1941.1, outside of the hours of 8:00	•
5:00 pm, Monday through Friday, and are not exposed at any time to toxic or hazardous	materials
including, but not limited to, lead-based paint and asbestos.	
xiv). If the fire resistive ceiling material in a garage parking area is removed then there sl	nall be no
storage of equipment or flammable material in the parking area.	
xv). The responsible parties must use professional judgment and secure the written advic	
licensed engineer or architect to determine whether it is necessary and at what times it is	
during specific construction operations to temporarily have no people in the building. For	
where structural load bearing members require jacking or replacement to correct differen	tial settlement
of a building.	
xvi). The contractor must perform and carry out all work diligently to completion within	the estimated
work timeline.	
xvii). All hot work must follow the guidelines of Department of Building & Safet	y (LADBS)
16. The following documents are to be submitted to the Department along version (THP): (When applicable)	with the completed Tenant
Notice of Seismic Retrofit Work & Temporary Relocation Agreement	
Request for Permanent Relocation Form (If applicable)	
Contract/ Lease from third party for Temporary Relocation ( If application	able)
Per Diem Agreement (If applicable)	
Moving Storage Agreement (If applicable)	
Summary of Facts for Seismic Retrofit Work	
Copy of LADBS Citation Order To Comply	
THP Appeals Form	
17. Right to appeal determination regarding the THP	
Tenants have the right to appeal the Los Angeles Housing and Community	
(HCIDLA) determination regarding the THP. Appeals must: (1) be made in v	
Form" attached to the THP, (2) must specify the grounds for appeal, and (3)	
HCIDLA within 15 calendar days of the date your landlord served you with	
Notice of Seismic Retrofit Work. To file an appeal, you must submit the form	
application fee before the appeal deadline in person to any of HCIDLA's pu	
( <a href="http://hcidla.lacity.org/Public-Counters">http://hcidla.lacity.org/Public-Counters</a> ), or by mail to the address specifie may find additional information regarding appeals at <a href="http://hcidla.lacity.org">http://hcidla.lacity.org</a>	
tenants	<u> / sersime-retront-appear-</u>
18. Landlord Certification	
I hereby declare that the information provided in this THP is true and accurate to	the hest of my knowledge. I
acknowledge that my adherence to this THP is necessary for me to recover cons	
Seismic Retrofit Work, and agree to notify HCIDLA of any changes that need to be	
complete the work described.	70 made in this 11 ii to
· · · · · · · · · · · · · · · · · · ·	<del></del>
Owner or Agent Print Name	Date
· · · · · · · · · · · · · · · · · · ·	Date
Owner or Agent Signature	Date
<u> </u>	

	HCIDLA	USE ONLY	
LADBS Permit Application #			
THP Submitted on:	Correction Issued	d? □ Yes □ No	Correction issued by:
THP Re-submitted on:	Correction Issued	d? □ Yes □ No	Correction issued by:
THP Re-submitted on:	Correction Issued	d? □ Yes □ No	Correction issued by:
THP Accepted on:		THP Accepted b	py:
Staff notes:			

#### TENANT HABITABILITY PLAN - SEISMIC RETROFIT

#### **DECLARATION OF SERVICE**

I,		ownor	/ applicant of			
(print name)		OWITE	/ арріїсані бі			(address)
have properly served to Habitability Plan (THP), Retrofit Work that expla	a Notice of Seisr	nic Re	etrofit Work, a S	Summary o	f Tenant	Rights for Seismic
applicable, a Permanen Agreement in the mannander and complete):	•			•	-	
Personal service on	(Date and Time)	_ by	(Name of proce	ess server)	at _	(Location of service)
☐ Substitute service on	(Date and Time)	<sub>-</sub> by	(Name of proce	ess server)	at _	(Location of service)
	to (Name of pe	rson se	rved)			
☐ Posted on	(Date and Time)	<sub>-</sub> by	(Name of proce	ess server)	at _	(Location of service)
	and mailed on	(Date a	and time)	_ by <u>_</u>	ame of per	son who mailed notice)
This service is at least 2	20 days prior to t	he con	nmencement o	f any propo	osed con	struction work.
I hereby de	clare that I am:					
☐ the own	er					
□ an autho	orized agent for th	ne owr	ner of the above	e reference	ed proper	ty
I certify, under penalty of herein is true, accurate		he law	s of the State	of Californi	a, that the	e information stated
Signature				Date		