



LAHD - Landlord Declarations
 P.O. 17100
 Los Angeles, CA 90057
 LAHD Hotline (866) 557-7368
 housing.lacity.org



NOT VALID WITHOUT HCIDLA RECEIPT STAMP

APN: _____ C.D.: _____ #: _____

NOTICE TO LANDLORD: This form must be submitted to the Los Angeles Housing Department (LAHD) within 3 months of tenant's vacation of the rental unit after an eviction based on Los Angeles Municipal Code (LAMC) 151.09.A.8, and also 30 days preceding the first year anniversary of continued occupancy, and 30 days preceding the second year anniversary of continued occupancy

DECLARATION OF OCCUPANCY

Rental Unit Address:	<u>Street Address</u>	<u>Unit No.</u>	<u>City</u>	<u>ZIP Code</u>	Date Tenant Moved Out:
Current Occupant's Name(s):					Date Occupant Moved In:
Occupant's Relationship to Landlord:	<input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Grandchild <input type="checkbox"/> Resident Manager				

THIS FORM IS BEING FILED TO COMPLY WITH LAMC 151.30.F FOR THE FOLLOWING (YOU MUST CHECK ONE):

Declaration of Occupancy within 3 months of tenant's surrender of rental unit.

Declaration of Continued Occupancy within 30 days preceding the first year anniversary of the tenant's vacation of the rental unit

Declaration of Continued Occupancy within 30 days preceding the second year anniversary of the tenant's vacation of the rental unit

If the landlord, eligible family member, or resident manager has not moved in within 3 months of tenant's surrender of the unit, or has not continued their occupancy after the first or second anniversary of the vacation of the rental unit, please explain why in detail below (attach additional sheets, if necessary):

IF YOU FAIL TO FILE A STATEMENT OR NOTICE AS REQUIRED, YOU MUST PAY A FINE IN THE AMOUNT OF \$250 PER DAY FOR EACH DAY THIS DECLARATION IS DELINQUENT (LAMC 151.30.I.2).

Landlord Declaration

I declare, under penalty of perjury under the laws of the State of California, that the information provided on this form and all attached pages is true, correct, and complete. **(All owners must sign; attach additional pages if necessary.)**

<u>LANDLORD'S SIGNATURE</u>	<u>LANDLORD'S PRINTED NAME</u>	<u>DATE</u>
<u>LANDLORD'S MAILING STREET ADDRESS</u>	<u>LANDLORD'S CITY, STATE, ZIP CODE</u>	<u>LANDLORD'S PHONE</u>
<u>LANDLORD'S AGENT'S SIGNATURE</u>	<u>AGENT'S PRINTED NAME</u>	<u>DATE</u>
<u>AGENT'S COMPANY & STREET ADDRESS</u>	<u>AGENT'S CITY, STATE, ZIP CODE</u>	<u>AGENT'S PHONE</u>