RAD Date Stamp



District of Columbia Department of Housing and Community Development

Housing Regulation Administration – Rental Accommodations Division 1800 Martin Luther King Jr. Avenue SE, 2nd Floor Washington, DC 20020 (202) 442-9505

90 DAY NOTICE TO VACATE FOR PERSONAL USE AND OCCUPANCY

SECTION 501(d) NOTICE
D.C. OFFICAL CODE § 42-3505.01(d) (Supp. 2008)
14 DCMR §§ 4300 et seq.(2004)

Internal Use Only
C/O current:
□yes □no □n/a
BBL current: □yes □no
Reg. current: □yes □no

THIS NOTICE MUST BE FILED WITH THE RENTAL ACCOMMODATIONS DIVISION WITHIN FIVE (5) DAYS OF THE DATE OF ISSUANCE TO THE TENANT

TENANT'S NAME:	DATE:
TENANT'S ADDRESS:	
Dear Tenant:	
• 1	d) of the District of Columbia Rental Housing Act of TCIAL CODE. § 42-3505.01(d) (Supp. 2008).
Section 501(d) of the Act provides that a natural pyour Rental Unit may recover possession of your to recover possession of your Rental Unit for the occupancy as a dwelling. The housing provider vacate in advance of an action to recover possess. Section 501(d). No housing provider shall demail Housing Provider has repossessed under this subsebeginning on the date he/she will recover possess cooperative housing association who has the right the rights of a natural person of a freehold (owner	Rental Unit where the person seeks in good faith person's immediate and personal use and shall serve on you a ninety (90) day notice to ion of your Rental Unit in instances arising under nd or receive rent for your Rental Unit which the ection during the twelve (12) month period sion of your Rental Unit. A stockholder of a at to repossession in a Rental Unit may exercise
Attached is a copy of the Housing Provider's aft to the Rent Administrator, Rental Accommoda	fidavit regarding personal use and occupancy submitted ations Division.
This notice is your ninety (90) day Notice to Va	acate your Rental Unit by (date):
Provider desires to have and gain possession	ate, and you are hereby notified that the Housing of the Rental Unit occupied by you. You are y you as set forth above, no later than midnight on

In the event you fail to vacate the Rental Unit as stated, the Housing Provider is authorized to take any steps under D.C. law to evict you, including the filing of a suit in the Superior Court of the District of Columbia for possession of the Rental Unit.

Nothing herein shall be deemed to relieve you of your obligation to promptly pay all future rents when due (subject to any limitations herein), or to prevent the Housing Provider from suing for possession of the Rental Unit for any other reason whatsoever under D.C. law. You are also notified that the rent for the Rental Unit is due in accordance with your lease, up to and including the date by which you are required to vacate. Also, you will be liable for any damages arising from your continuing use and occupancy of the Rental Unit if you fail to vacate by the date specified in this notice and for any other claims of any type for damages which may arise out of any provision of the lease agreement.

This Rental Unit is registered with the Rental Accommodations Division. The Housing Provider's Registration Number is					
Division in writing at 1800 Martin Luther King	through Friday from 8:30 am to 4:30 pm or visit				
	Housing Provider's Business Address (No P.O. Box)				
Housing Provider's Name (print) Owner Outhorized Agent Title (if applicable):					
Housing Provider's Signature	Housing Provider's Telephone Number and E-mail address:				

NOTE: This affidavit must be completed and signed by the owner(s) of the Housing Accommodation or Rental Unit when the Notice to Vacate is issued pursuant to Section 501(d) of the Act, codified at D.C. OFFICIAL CODE § 42-3505.01(d) (Supp. 2008). Each Owner of a Housing Accommodation shall complete a separate Affidavit.

OWNER'S AFFIDAVIT

	ty:					
	wner's name)deposes and states as follows:	, been first duly sworn according to				
(1)	I am record owner of the following l	Housing Accommodation or Rental Unit (address):				
(2)	I am currently leasing the Housing Accommodation or Rental Unit to (Tenant's name):					
(3)		g Accommodation or Rental Unit for my own personal nediately, but not later than, business days				
(4)	Upon recovery of the Housing Accommodation or Rental Unit from the Tenant, I will not demand or receive rent from the Tenant during the twelve (12) month period beginning on the date of recovery of possession of the Housing Accommodation or Rental Unit.					
(5)	If I fail for any reason to regain posses or Rental Unit within business notify the Rental Accommodations Di	ession and occupy said Housing Accommodation s days from the date of this Affidavit, I shall ivision immediately.				
		Owner's Business Address (No P.O. Box)				
□ Owne	er's Name (print)					
□ Title ((if applicable):	Owner's Telephone Number and E-mail address:				
Owne	er's Signature					
Subsc	cribed and Sworn to before me this	day of, 20				
 Notai	ry Public Signature	My Commission Expires (date):				

CERTIFICATE OF SERVICE

Note: If you file a Complaint in the Landlord and Tenant Branch of the Superior Court of the District of Columbia, you may be required to prove that you served this Notice correctly. I hereby certify that my name is (Please Print): am authorized to serve the attached 90 Day Notice to Vacate for Personal Use and Occupancy under D.C. OFFICIAL CODE § 42-3505.01(d) (Supp. 2008). I further certify that my age is _____ (must be at least 18 years old), and my business address is: _____ At the following time: _____, AM/PM and on the following date: _____, 20___, I served the attached 90 Day Notice to Vacate for Personal Use and Occupancy under D.C. OFFICIAL CODE § 42-3505.01(d) (Supp. 2008) in both English and Spanish (check only one below): By personal service upon the Tenant (insert name and address of Tenant): By substitute service upon (insert name and address of person served): Description of person served for personal or substitute service: Approximate height: Approximate weight: Sex (m/f): Approximate age: Hair color: Other: By certified mail, with delivery confirmation, to (name and address of person served): By priority mail, with delivery confirmation, to (name and address of person served): By first class mail to (name and address of person served): Signature of Process Server

OPTIONAL NOTARIZATION: Notar Day Notice to Vacate for Personal Use 3505.01(d) (Supp. 2008) is not required	and Occupancy un	· · ·	
Subscribed before me this	day of	, 20	
Notary Public			
My commission expires:			