Department of Housing and Community Development
Rental Accommodations Division
Housing Resource Center, 1st Floor
1800 Martin Luther King, Jr. Avenue, S.E.
Washington, D.C. 20020 | (202) 442-9505

RAD Date Stamp

AMENDED REGISTRATION

TO BE FILED WITHIN 30 DAYS OF CHANGES IN REGISTRATION/EXEMPTION INFORMATION

Use this form for any changes to the information reported on RAD Form 1, **except** a change in the rent charged, a change in ownership, or a loss of exemption from the Rent Stabilization Program. However, use this form for changes in exemption status based on tenant-specific subsidies (e.g., Housing Choice Vouchers). See RAD Form 2 instructions for more detail.

Post this form at the housing accommodation or serve on all tenants in accordance with 14 DCMR § 4101.6 within fifteen (15) days of filing, except when changing tenant-specific subsidy exemptions.

Part 1: Identification of Housing Accommodation

Street number and name				**Quadrant**	**Unit** (if only 1)
City, State Washington, DC	**Zip**	**Square, Suffix, Lot**	**Ward**	**Trade/common name** (if used)	
Registration/Exemption No.		**Certificate of Occupancy** (if applicable)		**Basic Business License No. & Expiration Date**	

Part 2: Identification of Property Owner

Name	**Title to property held by multiple persons:** ☐ no ☐ yes, names:
Business type ☐ Corporation ☐ Partnership ☐ LLC ☐ Sole proprietor ☐ Other:	**Trade name or doing business as**

Part 3: *The registration information has changed as follows:*

☐ **Owner's business information**

Attach separate list if more than one owner's information has changed

Name	**Street number and name** (no P.O. Box)		**Quadrant**	**Unit**
City, State	**Zip**	**Email**	**Telephone**	
Basic Business License number		**Certificate of Occupancy number**		

☐ **Sublessor's business information**

Attach separate list if more than one sublessor's information has changed and the owner's letter authorizing the sublessor to rent the rental unit or housing accommodation.

Name	**Street number and name** (no P.O. Box)		**Quadrant**	**Unit**
City, State	**Zip**	**Email**	**Telephone**	
Basic Business License number		**Certificate of Occupancy number**		

[ ] **Agent's identity or contact information**					
Registered agent for service of process (required for non-resident owners):					
Name		**Street number and name** (no P.O. Box)		**Quadrant**	**Unit**
City, State Washington, DC	**Zip**	**Email**	**Telephone**		
Property manager/managing agent:					
Name		**Street number and name** (no P.O. Box)		**Quadrant**	**Unit**
City, State	**Zip**	**Email**	**Telephone**		
Business type □ Corporation □ Partnership □ LLC □ Sole proprietor □ Other:			**Trade name or doing business as**		
Name & job title of primary responsible employee/agent (if applicable)		**Direct email**		**Direct telephone**	

[ ] **Change in related services or facilities** (rent stabilized only)	
Petition number SF _____	**Petition approval date**
Service or facilities changed (list all)	**Nature of change** □ Added □ Increased □ Reduced □ Eliminated □ Added □ Increased □ Reduced □ Eliminated □ Added □ Increased □ Reduced □ Eliminated
Explanation of change(s) and list affected rental units	
RAD Form 9 filing date (if rent adjusted)	**Effective date of change(s)**

[ ] **Tenant subsidy exemption**

New exemptions

Unit no.	Prior rent charged	Subsidy program	Effective date
	$		
	$		
	$		
	$		

Ending exemptions

If increasing the rent charged for an occupied rental unit, you must serve the tenant with RAD Form 8 and attach a copy when filing this form with RAD. If the unit is vacant, use the new tenant disclosure forms to notify the incoming tenant that the rent charged is based on the rent adjustment shown here.

Unit no.	Last rent charged	New rent charged	Unit vacant	Effective date
	$	$	□	
	$	$	□	
	$	$	□	
	$	$	□	

Part 4: Certification by housing provider	
I, the undersigned housing provider or agent thereof, certify that the information I have given on this form is complete, true, and accurate to the best of my knowledge, information, and belief. If I am not the owner of this housing accommodation, I certify that I have authority from the owner to complete and file this form with the information provided. In signing this form, I understand that filing false statements with the Rental Accommodations Division is subject to a fine of up to $5,000 under the Rental Housing Act of 1985, in addition to other penalties under District of Columbia law.	
Signature of housing provider or agent	Date
Print name	Title (if applicable)

Attachments

Check the box for applicable attachments:

[ ] Part 1, Multi-Building Housing Complex: List of all the required addresses and information for each building that is part of the multi-building complex

[ ] Part 3, Multiple Owners: Separate sheet listing each owner and their respective names, addresses [P.O. box addresses are prohibited], telephone numbers, and email addresses

[ ] Part 3, Sublease Authorization: Copy of owner's letter authorizing the sublessor to lease the rental unit or housing accommodation

[ ] Part 3, Multiple Sublessors: Separate sheet listing each sublessor and their respective names, addresses [P.O. box addresses are prohibited], telephone numbers, and email addresses

[ ] Part 3, Change in Related Services or Facilities: List all services or facilities that were increased, reduced, or eliminated and an explanation for each change

[ ] Part 3, Calculating the New Rent Charged for an Occupied Rental Unit: Worksheet showing the computation of the new rent charged

[ ] Part 3, Calculating the New Rent Charged for an Occupied Rental Unit: Copy of the Notice of Rent Adjustment (RAD Form 8)

[ ] Part 3, Calculating the New Rent Charged for a Vacant Rental Unit: Worksheet showing the computations for the new rent charged

[ ] Part 3, Change in Number of Owner's Rental Units: List of Additional Rental Units