

TENANT'S REGISTRATION OF AGE OR DISABILITY RENT EXEMPTION (FOR RENT-STABILIZED UNITS <u>ONLY</u>)

Date:	
Tenant Name(s):	
Tenant Address:	
Unit No.	
Zip Code	Washington, D.C.
Tenant Telephone Number(s)	Mobile:
	Other:
Tenant Email Address	

You must provide all known contact information for the housing provider or property manager:

Housing Provider Name		Street Address			
City, State	Zip	Email	Telephone		
Property Manager					
Name		Street Address			
City, State	Zip	Email	Telephone		

<u>Annual Rent Increase Reduction</u>. If you are an elderly tenant (age 62 or older) or a tenant with a disability and live in a rent stabilized (also called "rent control") rental unit, you may be entitled to a reduction in the annual rent increase. You must file this application with the Rental Accommodations Division ("RAD"), who will notify your housing provider or property manager. If your application is approved by RAD, your housing provider must reduce your monthly rent according to the law.

Rent Surcharge Exemption. You may qualify for an exemption from a rent surcharge if:

- (1) Your housing provider received approval of a petition to implement a rent surcharge in addition to your current monthly rent charged;
- (2) You are sixty-two (62) years or older or you are disabled; and
- (3) You have qualifying income.

A "rent surcharge" is added to the monthly rent charged from approval of a petition. "Qualifying income" means that you earn or receive less than a certain amount of money every year.

You must give RAD proof that you qualify for an exemption. Your housing provider is allowed to dispute your claim if they believe your application is not true. RAD will not disclose or release copies of information submitted as part of this application except as required by law.

_] Age

Check this box if you are at least sixty-two (62) years old. Make a copy of one of the following as proof of your age and check the applicable box:

- Government-issued Passport
- Driver's license issued by the District of Columbia
- Other identification card issued by the District of Columbia
- Birth certificate and a form of government-issued identification
- Other evidence (describe): _____

[] Disability

Check this box if you have a disability. A "disability" means "a physical or mental impairment that substantially limits one or more major life activities" (which is the same meaning used in the federal Americans With Disabilities Act). Tenant certifies that the tenant meets the definition of a "tenant with a disability" and will continue to meet that definition (check one):

- Permanent disability; or
- Temporary disability

Make a copy of one of the following as proof of your disability and check the applicable box:

- Award letter from the Social Security Administration with a physician letter
- Letter from a physician stating that you have a disability as defined by the Americans With Disabilities Act with physician's contact information and medical license number
- Order issued as part of a housing provider petition filed under the Rental Housing Act of 1985 determining that you have a disability
- Other evidence (describe): _

Your documentation does not need to describe your disability, but it must contain a statement by a physician or other licensed healthcare professional that you have a disability and whether your disability is permanent or temporary. If your disability is temporary, you must recertify your status two (2) years from the approval of this RAD Form 6. Your physician's letter must include your physician's contact information and medical license number.

Income (ONLY if you are applying for a rent surcharge exemption)

Check this box if your household income is at or below the limits described. Every year, by March 1, the Rental Housing Commission publishes the income limit that will take effect by May 1 of that year. "Annual rent adjustments" are available at https://rhc.dc.gov/.

Beginning May 1, 2022–April 30, 2023, the income limits are:

For a 1-person household, **\$54,180**; For a 4-person household, **\$77,400**; and For a 2-person household, **\$61,920**; For a 5-person household, **\$85,140**, For a 3-person household, **\$69,660**; For more, add **\$7,740** for each additional

person beyond the fifth.

Enter the number of people in your household, living in your unit (adults and children): _____

Enter the total income for your household: \$_____. This should be the same amount that you report as your "adjusted gross income" on your federal and District of Columbia tax return.

Make a copy of at least one of the following as proof of your income and check each applicable box:

- Three (3) months of consecutive pay stubs
 - (unless your pay stub shows your annual salary)
- Example 2 Federal or District of Columbia benefits statements
- □ Federal or District of Columbia tax returns (Form 1040 or D-40)
- Other evidence (describe): _____

You may be required to provide additional documentation of your income if requested by RAD. You must recertify your income two (2) years from the approval date of this RAD Form 6.

Explanation of tenant rights

<u>Annual Rent Increase Reduction</u>. Ordinarily, the rent charged for a rental unit covered by the Rent Stabilization Program (commonly known as "rent control") may be increased each year by the percent change in the Consumer Price Index for Urban Wage Earners ("CPI-W") in the Washington, DC area, plus 2%, up to a maximum of 10%. Elderly tenants and tenants with a disability may only have their rent increased by the <u>least</u> of the (i) CPI-W, (ii) the Social Security Cost of Living Adjustment ("COLA"), or (iii) 5%. You can find the current CPI-W and COLA online at <u>https://rhc.dc.gov</u>.

<u>Rent Surcharge Exemption</u>. A housing provider may also charge special rent increases (called "rent surcharges") after receiving approval for a petition or a voluntary agreement with 70% of the tenants in a housing accommodation. Elderly tenants or tenants with a disability (called "protected tenants") with a qualifying income may not be charged rent surcharges that were approved by these petitions. Protected tenants with qualifying income may also not be charged any amount of the rent charged that is based on a services or facilities petition or voluntary agreement, unless a protected tenant agrees in writing to waive that exemption. A notice of rent adjustment issued by a housing provider (RAD Form 8) or rent history disclosure (RAD Form 4) should show if any of these special rent increases apply to a rental unit. If a protected tenant is exempt from a rent surcharge, the housing provider may receive a tax credit instead **only if annual funding for the tax credit** is approved by the Council of the District of Columbia, except for rents charged pursuant to voluntary agreements.

When Will the Exemption Take Effect. An exemption requested on this form will be effective on the first date rent is normally due that is more than five (5) days after this form is filed with RAD. For example, if this form is filed on May 27and your rent is due on the first of every month, then the exemption will be effective July 1. If a CPI-W increase was taken in the twelve (12) months before the effective date of an exemption, the housing provider must reduce the protected tenant's rent charged to the amount that would have been allowed.

Housing provider's right to dispute

A housing provider served with this form by RAD has thirty (30) days from the filing date (see below as indicated by RAD) to dispute the protected tenant's claim. To dispute a protected tenant's claim, you must:

- 1. Contact and confer with the tenant in a good faith effort to resolve the dispute;
- 2. Prepare a letter to the Rent Administrator that explains in detail the substantial grounds you have to believe the tenant does not qualify for the exemption(s) stated on this form or that any relevant documentation is fraudulent or has been falsified;
- 3. File your letter and a copy of this form with RAD and serve a copy on the tenant.

The Rent Administrator will review all disputes for clear and convincing evidence of error, fraud, falsification, or misrepresentation in the completed application or relevant documentation.

Tenant's certification

By signing below and filing this form, the tenant certifies that the information contained herein is accurate, true, and complete and any documents submitted are true copies of accurate information. If any false information is found to have been submitted in bad faith, the tenant may be required to refund double the amount of any rent reduction wrongly received to the housing provider. In addition, if any false statement is made willfully, the tenant may be fined up to \$5,000. Other penalties for making false statements under D.C. Official Code § 22-2405 may also apply.

Enter the name of the elderly tenant or tenant with a disability on page 1 of this form. If the person completing this form is not the tenant, print your own name, sign on behalf of the tenant, state your

relationship the to the qualifying tenant, and provide a copy of the document authorizing you to complete this form for the tenant such as a guardianship order or power of attorney.

Tenant's Signature	
Tenant's Signature:	
Tenant's Name (print):	
Date:	

Agent Signature on Behalf of Tenant				
Agent Signature:				
Agent's Name (print):				
Agent's Relationship to Tenant:				
Agent's Telephone Number:				
Agent's Email Address:				
Date:				
	written and notarized authorization statement from the tenant ent to sign and file this form on the tenant's behalf.			

This application and supporting documentation may be mailed, faxed, emailed, or hand delivered for approval to:

D.C. Department of Housing and Community Development Housing Regulations Administration Rental Accommodations Division 1800 Martin Luther King, Jr. Avenue, S.E. Washington, D.C. 20020 Fax Number: (202) 645-5884 Email: <u>dhcd.rad@dc.gov</u>

If you are emailing a copy of this form, the form and your supporting documentation must be scanned into in a portable document format (PDF).

For additional information please call (202) 442-9505.

RAD USE ONLY BELOW								
Registration number	Owner's name			Manager's name				
Date received from tenant			Date mailed to housing provider/manager					
Mailed to (name)	Street number and name					Quadrant	Unit	
City, State	Zip Email			Telephone				