



COVID-19 Eviction Protections Fact Sheet

THE CITY OF LOS ANGELES EVICTION PROTECTIONS APPLY TO ALL RENTAL UNITS IN THE CITY OF LOS ANGELES.

THE RENT INCREASE FREEZE APPLIES ONLY TO RENTAL UNITS SUBJECT TO THE CITY'S RENT STABILIZATION ORDINANCE (RSO).

TO FIND OUT IF YOUR UNIT IS SUBJECT TO THE RSO: TEXT "RSO" TO (855) 880-7368.

SUMMARY OF RESIDENTIAL TENANT PROTECTIONS

NON-PAYMENT OF RENT DUE TO COVID-19 - Beginning March 4, 2020, through the end of the local emergency, no owner can evict a residential tenant for nonpayment of rent if the tenant is unable to pay rent because of circumstances related to the COVID-19, such as:

- Loss of income due to workplace closure or reduced hours due to COVID-19.
- Loss of income or increased child care expenditures due to school closures.
- Health care expenditures related to being ill with COVID-19 or caring for a household member who is ill with COVID-19.
- Loss of income relating to reasonable expenditures stemming from government ordered emergency measures.

Tenants must notify their landlord of their inability to pay the full rent before the due date or within 7 days after the rent due date. The L.A. City Ordinance does not require tenants to provide documentation with this notification.

THE CITY ORDINANCE DOES NOT RELIEVE TENANTS OF THE OBLIGATION TO PAY RENT. TENANTS HAVE UP TO 12 MONTHS FROM THE EXPIRATION OF THE LOCAL EMERGENCY TO PAY BACK RENTS. LANDLORDS MAY NOT CHARGE INTEREST OR A LATE FEE ON THE RENT.

EVICTION PROTECTIONS - A tenant may not be evicted for a "No-fault" reason during the local emergency period (for example, for owner move-in or to install a resident manager). Additionally, tenants may not be evicted for having unauthorized occupants, pets or nuisance as a result of circumstances related to COVID-19. Tenancies may not be terminated in order to demolish, convert or withdraw a residential rental unit from the rental housing market under the Ellis Act until 60 days after the expiration of the declaration of emergency.

NO RENT INCREASES FOR PROPERTIES SUBJECT TO THE RSO - As of **March 30, 2020**, rent increases are prohibited for properties subject to the RSO until 60 days after the local emergency. From March 30, 2020, through the end of the local emergency period, landlords may not issue **new** notices to collect SCEP, RSO or cost recovery surcharges. Landlords may issue a notice of a legal rent increase, but cannot collect the additional rent until 60-days after the expiration of the emergency period.

ASSISTANCE FOR TENANTS - Tenants may seek information and assistance from the Los Angeles + Housing Community Investment Department (HCIDLA) by calling 866-557-RENT or 866-557-7368, Monday - Friday, between the hours of 8:30 AM to 4:30 PM, and weekends, Saturday and Sunday, from 10:00 AM to 3:00 PM, or by filing a complaint online at: hcidla.lacity.org/File-a-Complaint.

COVID19 Financial Hardship Form

RESIDENT'S NAME: _____

PROPERTY ADDRESS: _____ APT: _____

In order to be considered for a repayment agreement as a result of COVID19-related financial hardship, please complete this form by checking the boxes that apply to each leaseholder(s) and provide documentation demonstrating that you are unable to pay the rent due to financial hardship resulting from the COVID19 pandemic. Examples of acceptable verification may include:

- (1) Letter from employer on company letterhead verifying loss of income due to a COVID19-related workplace closure and/or COVID19-related layoffs or furloughs;
- (2) Documentation of childcare expenditures (from a minor household member's school/school district) verifying school closures and which impacts your ability to pay the rent;
- (3) Verification of health care expenses related to being ill with COVID19 or caring for a member of the Resident's household who is ill with COVID19 and which has impacted your ability to pay the rent; or
- (4) Other verification which demonstrates a significant COVID19-related financial hardship which directly impacts your ability to pay rent.

Local legislation or eviction moratorium may provide for specific protections and/or circumstances in addition to those listed above. In those cases, Property Manager agrees to consider further explanation and documentation of financial hardship in accordance with local law.

Request: Please allow for deferred payment of rent for _____ (Month(s)) in the amount of \$ _____

List Resident(s) and/or Household Member(s) Affected	Nature of COVID19 Financial Hardship
	<input type="checkbox"/> Loss of income due to a COVID19-related workplace closure and/or COVID19-related layoffs or furloughs (Unemployment, underemployment, reduced job hours, reduced pay, or decline in self-employed business earnings significant enough to impact ability to pay rent.)
	<input type="checkbox"/> Increased childcare expenditures due to school closures which is significant enough to impact ability to pay rent.
	<input type="checkbox"/> Health care expenses related to contracting COVID19 or caring for a member of the Resident's household who has contracted COVID19 and which is significant enough/immediately due and payable and impacts the ability to pay rent.
	<input type="checkbox"/> Other

Please provide a detailed explanation of your COVID19-related financial hardship and describe the supporting documentation provided herewith:

Resident Acknowledgement, and Agreement

I/We certify, acknowledge, and agree:

1. I/We certify that all the information in this COVID19 Financial Hardship Form is truthful, and the event(s) identified above has/have contributed to my/our need for a repayment agreement.
2. The Property Manager may review the accuracy of my/our statements and the supporting documentation. I/We am/are willing to provide all requested documents and respond to all Property Manager communication in a timely manner. I/We understand that time is of the essence.
3. If I/We have engaged in fraud or misrepresented any fact(s) in connection with this COVID19 Financial Hardship Form, or if I/We do not provide all of the required documentation requested, the Property Manager may not offer me/us a repayment agreement and may pursue eviction proceedings and collection of all past due rent and fees.
4. The Property Manager will maintain confidentiality of any medical or financial information provided.
5. I/We understand and agree that this form and any resulting agreement does not absolve my/our responsibility to pay the rent pursuant to the Lease.

Resident's Signature

Date

Resident's Signature

Date

Resident's Signature

Date