



Notice of Seismic Retrofit Work

To Tenant:

Name(s): _____
 Address: _____

 City, State: _____ Zip: _____
 Phone: () _____

From Landlord:

Name(s): _____
 As of Date: _____
 Address: _____

 City, State: _____ Zip: _____
 Phone: () _____

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Soft-Story Retrofit Work

Currently work will begin on your unit and/or building no earlier than 20 days from the date this Notice of Seismic Retrofit Work is served on you.

Duration

The work is estimated to:

Start on: / / 20_____ } For a total of _____ months and _____ days.
 End on: / / 20_____ }



Notice of Seismic Retrofit Work

Scope of Work

<input type="checkbox"/> Structural
<input type="checkbox"/> Electrical
<input type="checkbox"/> Plumbing
<input type="checkbox"/> Mechanical
<input type="checkbox"/> Hazard Abatement (e.g. lead, asbestos)

<input type="checkbox"/> Other Work
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Impact of Work

Mitigation Steps

Impact of Work	Mitigation Steps
<input type="checkbox"/> Kitchen	
<input type="checkbox"/> Bathroom(s)	
<input type="checkbox"/> Living room	
<input type="checkbox"/> Bedroom(s)	
<input type="checkbox"/> Dining room	
<input type="checkbox"/> Closet(s)	
<input type="checkbox"/> Balcony	
<input type="checkbox"/> Common areas	
<input type="checkbox"/> Other	



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Will You Be Temporarily Relocated?

No, you do not need to temporarily relocate. Your unit will be tenantable outside construction hours. You will not be exposed to toxic or hazardous materials at any time. Construction work may be done Monday through Friday from 8 am to 5 pm. Utilities such as water, gas, or electricity may be unavailable during construction hours. These services will be restored by 5 pm each day.

Yes, you must temporarily relocate:

From: ____/____/____ To: ____/____/____

To location:

Your building, unit # _____

Hotel/Motel (name: _____)

Other: _____

Address: _____

Cross Street(s): _____

This is _____ miles from your unit.

For loss of the following services: _____

You will be compensated:

\$ _____ per _____.

If you agree, the landlord is willing to pay a daily dollar amount for you to find your own temporary housing. Please see Per Diem Agreement attached.

Your belongings will not be moved from your unit.

Your belongings will be stored at:

Name: _____

Address: _____

If you agree, the landlord is willing to pay a fixed dollar amount for you to move and temporarily store your own belongings. Please see Moving & Temporary Storage Agreement attached.

Your tenancy will not be terminated as a result of your temporary relocation. You have the right to reoccupy the unit/s under the existing terms of tenancy upon completion of the Seismic Retrofit Work subject to rent adjustment. However, you must continue to pay your rent as usual. Otherwise, eviction proceedings may be brought against you.



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Designated Contact for Landlord

Please submit your soft-story retrofit questions, concerns, and paperwork to:

Name(s):	_____
Address:	_____
City, State:	_____ Zip: _____
Phone:	_____
Fax:	_____

During soft-story retrofit work, please pay your rent to the following person:

Name(s):	_____
Address:	_____
City, State:	_____ Zip: _____
Phone:	_____

Right to Appeal the Los Angeles Housing and Community Investment Department’s (HCIDLA) determination regarding the Tenant Habitability Plan (THP).

Tenants have the right to appeal HCIDLA’S determination regarding the THP. Appeals must: (1) be made in writing using the “Appeal Form” attached to the THP, (2) must specify the grounds for appeal, and (3) must be filed with HCIDLA within 15 calendar days of the date your landlord served you with a copy of the THP and Notice of Seismic Retrofit Work. To file an appeal, you must submit the form along with the appeal application fee before the appeal deadline in person to any of HCIDLA’s public counters (<http://hcidla.lacity.org/Public-Counters>), or by mail to the address specified on the appeal form. You may find additional information regarding appeals at <http://hcidla.lacity.org/seismic-retrofit-appeal-tenants>

I am the landlord of the premises or I am an authorized agent of the landlord. I understand that the landlord is responsible for paying all the temporary housing accommodation costs for the tenant(s) regardless of whether those costs exceed the rent paid by the tenant(s).

Date: _____

Print Name: _____

Signature: _____

I am:

- the Landlord
- the Landlord’s Agent

Phone: _____