



Tenant Habitability Plan

1) Property Information

Project Address _____

Parcel Number(s) _____

2) Landlord Information

Address _____

Telephone Number _____

Email Address _____

3) Contact Person during Construction

Name _____

Address _____

Telephone Number _____

Email Address _____

4) Contractor Information

Name _____

Address _____

Telephone Number _____

Email Address _____

5.1) Will hazardous material (e.g., lead paint, asbestos) be disturbed or abated at any time current the permitted construction period?

YES

NO

If **yes**, answer 5.2 If **no**, skip to 6

5.2) Contractor for Abatement of Hazardous Material Name

Name

Address

Telephone Number

Email Address

6) Please describe the construction work to be performed at the property (attach additional pages as needed)

7) Estimated Start and Completion Dates of Construction

From: ___ / ___ / ____ - To: ___ / ___ / ____

8) Will any common area(s) be impacted by construction?

YES **NO**
If **yes**, attach Common Area Impact and Mitigation Form(s).

9) Will any individual unit(s) be impacted by construction?

YES **NO**
If **yes**, attach Individual Unit Impact and Mitigation Form(s).

10) Will there be any impact on a tenant's personal property, such as exposure to the elements or hazards, theft or movement

YES **NO**
If **yes**, describe what measures will be adopted to protect the personal property of tenants.

The following are to be submitted to the Rent Stabilization and Housing Division with the completed Tenant Habitability Plan:

- Tenant Habitability Plan
- Common Area Impact Mitigation Form(s) (if applicable)
- Individual Unit Impact Mitigation Form(s) (if applicable)
- Temporary Relocation Benefit Form(s) (if applicable)
- Additional documentation in support of plan (if applicable)
- Applicable Fee

II) Landlord Certification

I hereby declare that the information provided in this Tenant Habitability Plan is true and accurate to the best of my knowledge. I acknowledge that failure to adhere to an approved plan subjects the construction described herein to a stop work order, permit suspension/revocation and fines. Continuing violations may result in additional civil or criminal liability. I further acknowledge that modifications to an approved plan may be necessary in the event that the scope of work reported herein is inaccurate or changes. If temporary relocation of tenant(s) is permitted by law, and necessary and proper under an approved plan, I attest adequate resources exist to provide any required relocation benefits and that adequate provisions have been made for orderly, timely and efficient relocation of displaced tenants pursuant to the terms of the plan and Section 17.52.110 of the West Hollywood Municipal Code (Temporary Repossession for Authorized Corrections).

Owner or Agent Signature: _____ Date: _____

Print Name: _____ Title: _____

<p>For Staff Use Only: Reviewed by: _____</p> <p><input type="checkbox"/> Approved Date: ___ / ___ / _____ Notice of Approved Tenant Habitability Plan and Cover Page Served on ___ / ___ / _____</p> <p><input type="checkbox"/> Rejected Date ___ / ___ / _____ Notice of Tenant Habitability Plan Deficiencies Served on ___ / ___ / _____</p>
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