

## UNIT REPLACEMENT AND RELOCATION AFFIDAVIT PURSUANT TO HOUSING CRISIS ACT (SENATE BILL 330) AND PLANNING DIRECTOR BULLETIN NO. 7

### **SUPPLEMENTAL PACKET**

For questions, you can call the Planning counter at 628.652.7300 or email <u>pic@sfgov.org</u> where planners are able to assist you.

**Español:** Si desea ayuda sobre cómo llenar esta solicitud en español, por favor llame al 628.652.7550. Tenga en cuenta que el Departamento de Planificación requerirá al menos un día hábil para responder.

中文:如果您希望獲得使用中文填寫這份申請表的幫助,請致電628.652.7550。請注意,規劃部門需要至少 一個工作日來回應。

**Filipino:** Kung gusto mo ng tulong sa pagkumpleto ng application na ito sa Filipino, paki tawagan ang 628.652.7550. Paki tandaan na mangangailangan ang Planning Department ng hindi kukulangin sa isang araw na pantrabaho para makasagot.

### CODES

The Planning Department processes this Unit Replacement and Relocation Affidavit in accordance with the <u>Housing</u> <u>Crisis Act (California Government Code Section 66300)</u> and <u>Planning Director Bulletin No. 7</u>. Refer to the Government Code for additional information related to the residential development replacement and relocation requirements. Effective January 1, 2020, and further amended in 2021, the Housing Crisis Act establishes a statewide "housing emergency" until January 1, 2030. Housing applications not deemed complete prior to January 1, 2020 will be subject to the replacement and relocation provisions of the Housing Crisis Act. With the passing of Senate Bill 8, effective January 1, 2022, the Housing Crisis Act was further revised to include replacement and relocation provisions for single family homes. This change is effective for any application that has not been deemed complete prior to January 1, 2022.

### INTRODUCTION

The Housing Crisis Act requires housing projects that will demolish an existing residential unit to construct at least the same number of units. If the project demolishes a "protected" unit, as specified below, additional provisions apply. Please refer to Planning Director Bulletin No. 7 for additional information on replacement and relocation provisions. In order to verify income and/or occupancy for tenants within the five years prior to submittal of the application, please have current or previous tenants fill out the Tenant Statement included in this packet. Please have the tenant with the lowest income in the last five years submit the Tenant Statement. Failure to provide the required tenant income information may result in an affordability deed restriction on the property. If the income category of the household in occupancy is not known, it shall be presumed that lower income renter households occupied these units in the same proportion of lower income renter households to all renter households within the jurisdiction, as determined by the most recently available data from the United States Department of Housing and Urban Development's Comprehensive Housing Affordability Strategy database. Please refer to Planning Director Bulletin 7 for additional information.



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Property Information			
Project Address:			
Block/Lot(s):			
Applicant Information			
Name:			
Company/Organization:			
	Email Address:		
Address:	Telephone:		
Demolition Replacement Units:			
A housing development project cannot be approved in residential dwelling (units) on the site currently or in t	f it requires demolition that results in a reduction of the total the past 5 years.		
Does the project require demolition of units? Yes	No (If No, skip to the affidavit section).		
Number of current total units:			
Greatest number of units on site in last 5 years:			
Number of to be demolished units:			
Number of proposed total units:			

### **Protective Units:**

All "protected" units must be replaced one-for-one. Protected unit(s) involve one or more of the following categories. Please indicate whether any demolished units qualify as a protected unit:

1. **Regulatory Covenants**: Are there any unit(s) that currently are or were within the past five years subject to a recorded covenant, ordinance, or law that restricts rents to levels affordable to persons and families of lower or very low income? This may include inclusionary units under the San Francisco Inclusionary Housing Program, units restricted under former conditions of approval or units restricted by the former San Francisco Redevelopment Agency/OCII.

Yes No

Number of restricted units:

2. **Rent/Price Control:** Are there any unit(s) that currently are or were within the past five years subject to any form of rent or price control through a public entity's valid exercise of its police power ?

Number of rent/price control units:

**3. Rent/Price Control:** Are there any unit(s) that currently are or were within the past five years subject to any form of rent or price control through a public entity's valid exercise of its police power ?

Number of rent/price control units:

4. Occupancy: Are there any units being demolished that are currently or were within the last five years occupied by lower or very low income households?

Yes No

Number of units occupied by lower or very low income tenants:

Withdrawn Rentals: Are there any units on the site that were withdrawn from rent or lease in accordance with the Ellis Act (Government Code Section7060-7060.7) within the past 10 years?
Yes No

Number of rental units withdrawn:

### Additional Replacement Requirements for Protected Units:

All protected units must be replaced with units that contain the same number of bedrooms as the units demolished, with some exceptions for single-family homes. Relocation benefits are required for lower-income tenants of protected units. In addition, a right of first refusal must be offered to lower-income tenants of protected units for a comparable unit affordable to the household at an affordable rent or an affordable housing cost, unless the development replaces a single-family home with a single-family home. The City may ask for additional documentation to verify income levels of previous tenants. Please refer to the questions below.

Relocation Benefits: If proposing demolition and replacement of protected unit(s) that were rented to lower income tenants, have relocation benefits been offered to existing renters?
Yes No

Number of protected units proposed with relocation benefits:

2. Right of First Refusal: If proposing demolition and replacement of protected units that were rented to lower income tenants, has the tenant(s) been offered a right of first refusal? Please note that a project that consists of a single -family home located on a site where a protected single-family home is being demolished is exempt from this requirement. Yes No

Number of protected unit(s) provided with right of first refusal:

3. Single-Family Home Number of Bedrooms: If the existing single-family home contained three bedrooms or less, is/are the replacement unit(s) providing the same number of bedrooms? Yes No

Number of bedrooms provided in replacement unit(s):

4. Single-Family Home Number of Bedrooms: If the existing single-family home contained four bedrooms or more, is/are the replacement unit(s) providing at least three bedrooms? Yes No

Number of bedrooms provided in replacement unit(s):

### **TENANT'S STATEMENT**

Please use at least one affidavit for each unit.

۱	name	at
from _	to year year	and my household size <sup>1</sup> was people. The combined gross income <sup>2</sup> for my household
during	; this time was \$	income ·

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

**Tenant Signature** 

Tenant Name (Printed)

Date

For household	l size, include e	verybody that liv	ed in that unit, as	s of the last day of th	ie rental period.

For Department Use Only Statement received by Planning Department:

By: \_\_\_\_

1

Date: \_\_\_\_

V. 11.20.2023 SAN FRANCISCO PLANNING DEPARTMENT

If your income changed during the rental period, please list the lowest income during that time. Gross income should include income before taxes or deductions.

## **APPLICANT'S AFFIDAVIT**

Under penalty of perjury the following declarations are made:

- a) The undersigned is the owner or authorized agent of the owner of this property.
- b) The information presented is true and correct to the best of my knowledge.
- c) I understan that other information or applications may be required.
- d) I attest that personally identifiable information (PII) i.e. social security numbers, driver's license numbers, bank accounts have not been provided as part of this application, or any supplemental information. I understand that any information provided to the Planning Department becomes part of the public record and can be made available to the public for review and/or posted to Department websites.

Signature		Name (Printed)	Name (Printed)		
Date					
Relationship to Project (i.e. Owner, Architect, etc.)	Phone	Email			

For Department Use Only Application received by Planning Department:

By: \_

Date: \_