



# CITY OF OAKLAND

DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT  
250 FRANK H. OGAWA PLAZA, SUITE 5313  
OAKLAND, CALIFORNIA 94612-2034

(510) 238-3721  
FAX (510) 238-6956  
TDD (510) 238-3254

## Tenant Relocation Fund for Small, Low Income or Low Asset Landlords

### INSTRUCTIONS

#### FUND DESCRIPTION

In 2018, the City of Oakland established the **Tenant Relocation Fund for Small, Low Income or Low Asset Landlords**. This program is a mechanism for low income or low asset landlords to receive a zero-interest loan from the City of Oakland to pay their relocation assistance obligation when performing an owner or relative move-in eviction. Per O.M.C. 8.22.360.09.A.9 a qualifying relative is defined as parent, grandparent, child, spouse or domestic partner. Payment amounts set forth depend on the size of the unit and adjust for inflation annually on July 1<sup>st</sup>. Tenants impacted by this type of eviction are entitled to a relocation payment by the landlord of:

Unit Size	Base Payment*
Studio/One Bedroom	\$7,116.23
Two Bedrooms	\$8,758.44
Three + Bedrooms	\$10,811.20

**\*Tenant household that include lower income, elderly or disabled tenants, and/or minor children are entitled to a single additional relocation payment of \$2500 per unit from the owner, however, all payments are tiered depending on length of tenancy per OMC 8.22.850.**

#### Property Owner Eligibility

Eligibility for this loan program is narrowly structured to only apply to small low-income or low asset property-owners who are unable to access the equity in their property to make this payment and can show hardship if approved for a loan, payments will be made directly to the tenant(s) entitled to payment. The owner is responsible for compliance with all applicable time periods under the Rent Adjustment Program, OMC Sections 8.22.10 et seq. and all related regulations.

Owners who are evicting a tenant can access this loan program only if the owner is either low-asset or low-moderate income, and all the following 3 requirements are met:

1. Owners own fewer than five total units in the City of Oakland; **and**
2. Show hardship by not qualifying for the standard eligibility criteria established by Fannie Mae for a cash-out refinance loan for an investment property; **and**
3. In case of relative move-in, relative moving into the unit, must not own any real estate anywhere AND must be low or moderate income defined as below 120% of area median income.

## Tenant Relocation Fund for Small, Low Income or Low Asset Landlords

### APPLICATION PROCESS

**Applicants must submit a fully completed Application Form and provide the following required documents.**

**Please provide copies of current and the most recent documents listed below:**

1. Proof of Ownership: Grant Deed, Quitclaim Deed, etc.
2. Property tax bill
3. Mortgage Statement
4. Home insurance policy
5. City of Oakland Business License
6. Declaration confirming Ownership of Fewer Than 5 Units in the City of Oakland.
7. In the instance of a Relative Move-In, a Declaration\* signed under penalty of perjury stating the relationship of the relative to the property owners, that the relative does not own any real estate anywhere AND has an income level no greater than 120% of Area Median Income (See California Health and Safety Code Section 50093). Declaration template attached.
8. Proof of Hardship for purposes of this program is defined as ineligibility for a Cash-Out Refinance based on underwriting criteria for Investment Properties set forth in Fannie Mae regulations.  
**Proof of hardship can consist of:**
  - a. Ineligible for a Fannie Mae Cash-Out, **OR**
  - b. Proof of having less than six months of liquid financial reserves (6 months of property taxes, insurance, plus mortgage principal and interest due monthly)
9. Tax Returns for 2 years, complete with W-2s, 1099s, Profit & Loss, and all Schedules
10. Last 2 months of current paycheck stubs, if employed; **OR** most recent award letters, disability pension, or retirement checks
11. Last 2 months of all bank/credit union statement with all pages

If you have any questions or would like to make an appointment, please call (510) 271-8443 ext. 300. Scheduled appointments only.

Please submit the application and required documents to:

Housing Economic Rights Advocates (HERA)  
P.O. Box 29435  
Oakland, CA 94604-0091  
(510) 271-8443 ext. 300  
(510) 868-4521 FAX  
[inquiries@heraca.org](mailto:inquiries@heraca.org)



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### TERMS OF LOAN

The City of Oakland adopted an ordinance amending the Uniform Residential Tenant Relocation Ordinance that assists low income or low asset homeowners to pay relocation payment to tenants displaced by owner and relative move in evictions. A resolution was adopted allocating anti-displacement funds to assist in the payment of relocation benefits to alleviate the hardship of low income or low asset housing providers.

<b>Term</b>	30 years
<b>Interest Rate</b>	0%
<b>Repayment Terms</b>	<ol style="list-style-type: none"> <li>1. The City shall place a lien against the property in the amount of the loan provided.</li> <li>2. This is a deferred payment loan. There shall be no payments due during the loan term prior to the Due Date so long as there is not Transfer or Refinance of the Property or no Event of Default has occurred.</li> <li>3. For repayment, contact Housing and Community Department, 510-238-3721.</li> </ol>
<b>FY 2019 INCOME LIMIT SUMMARY</b> <b>ALAMEDA COUNTY AREA OAKLAND – FREMONT, CA</b>  Owner must be a low or moderate income person or family as defined by the US Department of Housing and Urban Development and the property owner's income cannot exceed 120% of area median income adjusted for family size.	
<b>Persons in Family</b>	<b>Maximum Income</b>
1	\$104,100
2	\$118,950
3	\$133,800
4	\$148,700
5	\$160,500
6	\$172,450
7	\$184,350
8	\$196,250



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### APPLICATION

**Privacy Act Notice:** Information requested in this application is used solely by City of Oakland, Department of Housing and Community Development to determine eligibility and qualification under its program. It will not be disclosed outside the City except as required/permitted by law. Should you opt not to provide information, it may cause the application to be delayed or rejected.

Part I – A. Applicant Information	
a. Applicant's Name (Title Holder/s)	<input type="text"/>
b. Present Address	c. Number of years at present address
<input type="text"/>	<input type="text"/>
d. SS# <input type="text"/> - <input type="text"/> - <input type="text"/>	e. Birthdate <input type="text"/> / <input type="text"/> / <input type="text"/>

B. Income		C. Assets	
a. Gross Salary	\$ <input type="text"/>	Bank or Credit Union	
b. Base Salary	\$ <input type="text"/>	Name	<input type="text"/>
c. Social Security	\$ <input type="text"/>	Address	<input type="text"/>
d. Retirement/Pension	\$ <input type="text"/>	City	<input type="text"/> State <input type="text"/>
e. Disability	\$ <input type="text"/>		
f. Alimony/Child Support	\$ <input type="text"/>	Checking Balances	
g. Other Gov't Assistance	\$ <input type="text"/>	\$	<input type="text"/>
h. Interest/Dividends	\$ <input type="text"/>	\$	<input type="text"/>
i. Other income e.g. rental	\$ <input type="text"/>		
TOTAL MONTHLY INCOME	\$ <input type="text"/>	Savings Balances/Type	
		\$ <input type="text"/>	Type <input type="text"/>
		\$ <input type="text"/>	Type <input type="text"/>
		\$ <input type="text"/>	Type <input type="text"/>





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### DEMOGRAPHICS (*Optional*)

The following data collection to be used to evaluate, refine marketing and outreach strategies and show impact of services. We appreciate your assistance.

Applicant		Relocated Tenant	
Race		Race	
I do not wish to furnish this information		I do not wish to furnish this information	
<input type="checkbox"/>	Black/African American	<input type="checkbox"/>	Black/African American
<input type="checkbox"/>	Asian	<input type="checkbox"/>	Asian
<input type="checkbox"/>	Native Hawaiian/Other Pacific Islander	<input type="checkbox"/>	Native Hawaiian/Other Pacific Islander
<input type="checkbox"/>	American Indian or Alaskan Native	<input type="checkbox"/>	American Indian or Alaskan Native
<input type="checkbox"/>	American Indian/Alaskan Native and White	<input type="checkbox"/>	American Indian/Alaskan Native and White
<input type="checkbox"/>	Asian and White	<input type="checkbox"/>	Asian and White
<input type="checkbox"/>	Black/African American and White	<input type="checkbox"/>	Black/African American and White
<input type="checkbox"/>	American Indian/Alaskan Native and	<input type="checkbox"/>	American Indian/Alaskan Native and
<input type="checkbox"/>	Black/African American	<input type="checkbox"/>	Black/African American
<input type="checkbox"/>	Balance Other _____	<input type="checkbox"/>	Balance Other _____
<input type="checkbox"/>	White	<input type="checkbox"/>	White

Ethnicity	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	Ethnicity	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary



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## SMALL PROPERTY OWNER DECLARATION

I, , do hereby declare and state as follows:

I am an owner or have a qualifying relative (parent, grandparent, child, spouse or domestic partner) who will be moving into one of my rental units in Oakland.

I am low or moderate income per FY 2019 chart below or low asset and unable to access the equity in my property to make the required relocation payment to my tenants.

I own fewer than five total units in the City of Oakland; and I do not qualify for a cash-out refinance loan under the standard eligibility criteria established by Fannie Mae

My relative moving into the unit does not own any real estate anywhere AND is low or moderate income per FY 2019 chart below.

I understand that, if approved for a loan from the City of Oakland for payment of relocation, payments will be made directly to the tenant(s) entitled to payment. I understand I am responsible for compliance with all applicable time periods under the Rent Adjustment Program, OMC Sections 8.22.850 et seq. and all related regulations.

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

Signature:

Date:

<b>FY 2019 INCOME LIMIT SUMMARY ALAMEDA COUNTY AREA OAKLAND – FREMONT, CA</b>	
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