



TENANT'S RELOCATION ASSISTANCE DISTRIBUTION FORM

An Owner of a Rental Unit shall provide permanent Relocation Assistance to displaced Tenants if the Owner issues a termination notice based on a No-Fault, Just Cause Eviction. The amount of proposed Relocation Assistance, including the breakdown and calculation of the total, shall be included in the termination notice.

Rental Unit Address: _____ Inglewood, CA _____
Street Apt# Zip

❖ **Base Relocation Assistance:**

An owner shall provide Base Relocation Assistance to the displaced tenant(s) equal to three (3) times the monthly rental amount **PLUS** \$2,000 if one or more minor(s) reside in the rental unit.

Do any minors reside in the rental unit? Yes No

Base Rent: \$ _____ x 3 months = \$ _____ + 1 or more Children \$2000 = \$ _____

❖ **Additional Relocation Assistance:**

In addition, the owner shall pay an Additional Relocation Assistance for any tenant(s) whose status makes them eligible for such assistance as follows:

<u>Status</u>	<u>Additional Relocation Assistance</u>	<u>Check Only One</u>
Adult residing between 2 to 4 years prior to notice	\$2,000	<input type="checkbox"/>
Adult residing between 5 to 10 years prior to notice	\$3,000	<input type="checkbox"/>
Adult residing 11 or more years prior to notice	\$5,000	<input type="checkbox"/>
Disabled Person OR Senior (62yrs)	\$7,500	<input type="checkbox"/>

NOTE: The owner shall ONLY pay the highest Additional Relocation Assistance for which any one tenant of the rental unit qualifies.

NOTICE IS HEREBY GIVEN that pursuant to Inglewood Municipal Code, Chapter 8, Article 9, Section 8-123 (b), the resident(s) are entitled to a **TOTAL Relocation Assistance Payment of \$ _____**.
(Base amount + \$2,000 (if minor(s)) + the highest Additional amount, (if applicable) = TOTAL amount)

If more than one adult Tenant resides in the Rental Unit, division or distribution of the Relocation Assistance, including any monies for a minor, shall be determined by the Tenants.

<u>Please list all Adults on the lease:</u>	<u>Amount of Relocation</u>	<u>Initials of Lessees</u>
1) _____	\$ _____	_____
2) _____	\$ _____	_____
3) _____	\$ _____	_____
4) _____	\$ _____	_____
5) _____	\$ _____	_____

This form must be returned to the Owner/Agent within **ten (10) calendar days** of receiving notice of the Relocation Assistance amount. If Tenants do not provide instructions, the Owner may issue payment to all Adult Lessees on a joint check.

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

Signatures of all Lessees:	Date
_____	_____
_____	_____
_____	_____
_____	_____

* If additional space is needed, please attach a separate piece of paper with signatures and dates.