



**District of Columbia**  
**Dept. of Housing and Community Development**  
**Rental Accommodations Division (RAD)**  
 1800 Martin Luther King Jr. Avenue SE, 2<sup>nd</sup> Floor  
 Washington, DC 20020  
 (202) 442-9505

RAD Date Stamp

RAD Form 1 (rev 2/12)

## RAD Registration / Claim of Exemption Form

Complete Parts 1 thru 7 if the Housing Accommodation is subject to rent control. If the Housing Accommodation is **exempt**, skip Parts 5, 6 and 7. This registration is filed under provisions of D.C. OFFICIAL CODE §§ 42-3501 et seq. (Supp. 2008).

**PRESENT PROOF OF OWNERSHIP OF HOUSING ACCOMMODATION WHEN FILING THIS FORM.**

### RAD Use Only

|   |                               |                               |                              |
|---|-------------------------------|-------------------------------|------------------------------|
| Certificate of Occupancy Number (if required) | Basic Business License Number | Registration/Exemption Number |                              |
| Intake Representative                         | Fee Per Rental Unit           | Total Registration Fee        | Proof of Ownership Presented |

### Part 1 – Address Of The Housing Accommodation You Are Registering

|   |                    |             |          |
|---|--------------------|-------------|----------|
| Street Address of Housing Accommodation You Are Registering (No P.O. Box) |                    |             | Quadrant |
| Unit  | City<br>Washington | State<br>DC | Zip Code |
| Square  | Suffix (if any)    | Lot         | Ward     |

### Part 2 – Property Owner’s Business Information

|   |                    |                |   |  |
|---|--------------------|----------------|---|--|
| Owner of Property (Different than the Property Address)   |                    |                | Trade Name of Business, if any                        |  |
| Street Address of Owner (No P.O. Box)   |                    |                | Quadrant  |  |
| Unit  | City               | State          | Zip Code  |  |
| Business Telephone  | Business Facsimile | Home Telephone | Email Address   |  |
| Business Type (if applicable) (check box): <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation<br><input type="checkbox"/> LLC <input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Other: _____ |                    |                | Name & Title of all Partners and/or Officers of Owner |  |
| D.C. Registered Agent of Owner (if applicable)  |                    |                | Trade Name of Business, if any                        |  |
| Street Address of Registered Agent (No P.O. Box)  |                    |                | Quadrant  |  |
| Unit  | City               | State          | Zip Code  |  |
| Work Telephone  | Work Facsimile     | Home Telephone | Email Address   |  |
| Property Management Company of Owner (if applicable)  |                    |                | Trade Name of Business, if any                        |  |

|   |                |                |               |
|---|----------------|----------------|---------------|
| Street Address of Property Management Company (No P.O. Box) |                |                |               |
| Unit  | City           | State          | Zip Code      |
| Work Telephone  | Work Facsimile | Home Telephone | Email Address |

**Part 3 – Property Profile**

Multi-Family  
 2-Unit Flat  
 Single Family  
 Condominium  
 Cooperative  
 Rooming House  
 Boarding House  
 Basement Unit  
 English Basement  
 Au-Pair Suite  
 Other: \_\_\_\_\_

**TOTAL NUMBER OF RENTAL UNITS IN HOUSING ACCOMMODATION:** \_\_\_\_\_

|                       |                       |                        |
|-----------------------|-----------------------|------------------------|
| Total Efficiencies    | Total 1-Bedroom Units | Total 2-Bedroom Units  |
| Total 3-Bedroom Units | Total 4-Bedroom Units | Total 5+ Bedroom Units |

**Part 4 – Claim of Exemption**

If you claim any Rental Unit or Housing Accommodation is exempt from rent control under §205 of the Rental Housing Act of 1985, as amended (D.C. OFFICIAL CODE § 42-3502.05 (Supp. 2008)). Check the reason(s) for your claim below.

- A. Unit(s) in any federally or District owned housing accommodation or in any housing accommodation with respect to which the mortgage or rent is federally or District- subsidized except units subsidized under subchapter III D.C. OFFICIAL CODE § 42-3502.05 (a)(1) (Supp. 2008)).
- B. Any rental unit in any newly constructed housing accommodation for which the building permit was issued after December 31, 1975, or any newly created rental unit, added to an existing structure or housing accommodation and covered by a certificate of occupancy for housing use issued after January 1, 1980, provided, however, that this exemption shall not apply to any housing accommodation the construction of which required the demolition of an housing accommodation subject to this chapter, unless the number of newly constructed rental units exceeds the number of demolished rental units (D.C. OFFICIAL CODE § 42-3502.05(a)(2) (Supp. 2008)).
- C. Four (4) or fewer Rental Units in the same Housing Accommodation, or an aggregate of four (4) Rental Units in more than one (1) structure in the District of Columbia, so long as the Housing Accommodation is owned by four (4) or fewer natural persons. (D.C. OFFICIAL CODE § 42-3502.05(a)(3) (Supp. 2008)).
- D. Building that has been continuously vacant and not subject to rental agreements since January 1, 1985, and any housing accommodation previously exempt under 206(a)(4) of the Rental Housing Act of 1980, provided that upon re-rental the housing accommodation is in substantial compliance with the housing regulations when offered for rent(D.C. OFFICIAL CODE § 42-3502.05(a)(4) (Supp. 2008)).
- E. Building that has been previously exempt under § 206(a)(4) of the Rental Housing Act of 1980 (D.C. OFFICIAL CODE § 42-3502.05(a)(4) (Supp. 2008)).
- F. Rental unit(s) within a building owned by a cooperative association, whose proprietary lease(s) is/are owned by no more than four (4) members of the cooperative association, and whose owners(s) have a direct or indirect interest in no more than a total of four (4) Rental Units in the District of Columbia (D.C. OFFICIAL CODE § 42-3502.05(a)(5) (Supp. 2008)).
- G. Building with a Building Improvement Plan under the Apartment Improvement or other DHCD multi-family assistance program. (D.C. OFFICIAL CODE § 42-3502.05(a)(7) (Supp. 2008)).

List each Housing Provider of four (4) or fewer Rental Units in the same Housing Accommodation, or of an aggregate of four (4) Rental Units in more than one (1) structure in the District of Columbia with a direct or indirect interest in any other Rental Unit in the District of Columbia, if you are claiming an exemption under § 205(a)(3) (D.C. OFFICIAL CODE § 42-3502.05(a)(3) (Supp. 2008)). ATTACH ADDITIONAL PAGES, IF NEEDED.

| Name | Address | Telephone Number | Email Address |
|------|---------|------------------|---------------|
|      |         |                  |               |
|      |         |                  |               |
|      |         |                  |               |
|      |         |                  |               |



## Part 6 – Current Building-Wide Rent Charged and Effective Dates (continued)

| Unit | Tenant's Name (if available) | Rent Charged | Effective Date |
|------|------------------------------|--------------|----------------|
| N/A  |                              |              |                |
|      |                              |              |                |
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|      |                              |              |                |

ATTACH ADDITIONAL PAGES, IF NEEDED.

## Part 7 – Rate of Return (§ 205(f)(6))

The rate of return for the Housing Accommodation is   N/A  %. Attach to this RAD Registration / Claim of Exemption Form the computations made to arrive at the rate of return by application of the formula provided in D.C. OFFICIAL CODE § 42-3502.12(b) (Supp.2008).

## Part 8 – Certification Of Compliance With Housing Regulations

I, the owner or agent of this Housing Accommodation, certify that this Housing Accommodation is in substantial compliance with the D.C. Housing Regulations to the best of my knowledge.

|                                      |                |
|--------------------------------------|----------------|
| Signature of Property Owner or Agent | Signature Date |
|--------------------------------------|----------------|

## Part 9 – Housing Provider Certification

I, the owner or agent of this Housing Accommodation, certify that the information that I have given on this form is complete and accurate to the best of my knowledge. If I am not the owner, I certify that I have the authority from the owner to make this certification. In signing this form, I understand that filing false statements with the Rental Accommodations Division is subject to a fine of up to \$5,000 under the Rental Housing Act of 1985, as amended, and other D.C. laws.

|                                      |                |
|--------------------------------------|----------------|
| Signature of Property Owner or Agent | Signature Date |
|--------------------------------------|----------------|