Refund Claim Procedures

Planning & Development Department
Building & Safety Division
Housing Code Inspections – Rental Housing Safety Program

Claim for Refund of a Fee or Tax
Previously Paid to the City of Berkeley

1. Please read this instruction sheet carefully before completing the claim form. Then fill out the claim form as completely as possible. **Incomplete forms may delay the processing of your claim or result in its denial.**

2. You have **one (1) year** from the date of your fee or tax payment under protest to file a claim. (Government Code Section 935; BMC Chapter 7.20.) If you wish to file a claim after the one-year filing period, you must petition the City Attorney by letter for permission to file a late claim, explaining why the claim is late and why it should be accepted. In order to process a claim, proof of payment of fees or taxes must be submitted with your claim. Proof of payment may be in the form of cancelled checks, bank statements, copies of cash receipts, etc.

3. Please file claims with the **City of Berkeley, Housing Code Inspections Office; 1947 Center Street, 3rd Floor; Berkeley, CA 94704**.

   Keep copies of your claim and all attachments for your records. If filing in person, the City will copy only the front page of the completed claim, which will be date stamped as your confirmation of the filing. The claimant must copy all other attachments.

4. After receipt of your claim and subsequent investigation, your claim may either be honored or denied. You will be informed of the City's decision by mail usually within **forty-five (45) days** from the filing date of the claim. Although we try to respond within the allowable time frame, in some instances we may take longer.

5. If your claim is honored, a Release of Claim form will be sent to you. Once the signed release is returned, your claim will be processed for payment and a check will be mailed to the address indicated on your claim form within two to three weeks from the date the signed release is received. **RELEASES MUST BE SIGNED IN THE PRESENCE OF A WITNESS (FURTHER EXPLAINATION INCLUDED ON RELEASE FORM).**

6. If your claim is denied you will have six (6) months from the date of the notice of denial to file a lawsuit against the City of Berkeley in the appropriate court. (Government Code Section 945.6; BMC Chapter 7.20.)

If you have questions, please contact our office at (510) 981-5445.

Claim for Refund of Money Paid

Planning & Development Department
Building & Safety Division
Housing Code Inspections – Rental Housing Safety Program

Claimant's Name: _____

Claimant's Complete Address: _____

Claimant's Telephone # / Email: _____

Send Notices To: _____
(Include complete name and address of Attorney or Insurance Agent if representing Claimant)

Customer Number:	
Property Address:	
Amount of Payment:	$
Date of Payment:	
Type of Payment:	☐ RHSP Per Unit/Room Fee ☐ Reinspection Fee
Dollar Amount of Claim:	$ _____ If claim is over $10,000, state name of court jurisdiction (Limited Jurisdiction case: up to $25,000; Unlimited Jurisdiction case: over $25,000) (See Govt. Code section 910(f))
Reason for Refund:	_____ _____ _____

You are required to provide the information requested above in order to comply with Government Code section 910.

Warning: Presentation of a false claim is a felony (Penal Code section 72). Pursuant to CCP sections 1228.5 and 1038, the City may seek to recover all costs of defense in the event an action is filed that is later determined not to have been brought in good faith and with reasonable cause.

Dated: _____

_____
Signature of Claimant

MAIL TO:
City of Berkeley
Housing Code Inspections
1947 Center Street, 3rd
Floor Berkeley, CA 94704

_____
Printed Name

For Office Use Only: Reviewed by: _____ Date Reviewed: _____
☐ Approved: _____
☐ Denied: _____