

This form is provided to Landlords free of charge by

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Please email us and we will send you instructions on filling out and serving this notice, and will answer any other questions you may have.



20% or more related to COVID-19, or a substantial increase in out of pocket medical expenses, or extraordinary child care needs), or they or a household/ family member is sick with COVID-19.

In order to qualify to have your eviction suspended, you may notify your Landlord of your intention to assert this defense by filling out and returning the attached form. If you do not return this form to your Landlord prior to the expiration of this Notice, your Landlord will assume that you do not have substantial evidence that you qualify for this defense.

**PURSUANT TO** the *Alameda Rent Stabilization And Limitations On Evictions Ordinance, Article XV, 2016, § 6-58.140* your tenancy is being terminated for the causes listed above.

Dated: March 23, 2020

By: \_\_\_\_\_  
Name:  
Agent /Landlord

Attachment 1: Notification To Landlord And Substantial Evidence Of Financial Impacts Of COVID-19

**THIS NOTICE SUPERSEDES ALL PREVIOUSLY SERVED NOTICES TO PAY OR QUIT**

**NOTIFICATION TO LANDLORD AND SUBSTANTIAL EVIDENCE  
OF FINANCIAL IMPACTS OF COVID-19**

On March 16, 2020, Governor Gavin Newsome Issued Executive N-28-20, that authorized local governments to limit a Landlord's ability to evict a tenant between the date of the Order and May 31, 2020. On March 17, 2020, The City of Alameda enacted an Urgency Ordinance No. 3268 instituting a Defense to evictions for qualified Tenants to take effect immediately, and continuing until May 17, 2020, or as continued by the City Manager.

The defense applies to where a tenant who is not able to pay their rent demonstrates by substantial evidence that they have suffered a Substantial Loss of Income related to COVID-19.

You may use this form to notify your landlord that you intend to seek the protection of the Order.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

I intend to seek protection against eviction for nonpayment of rent under City of Alameda Urgency Ordinance No 3268.

I am not able to pay rent for \_\_\_\_\_ (month), 2020, in the amount due of \$\_\_\_\_\_.

I have suffered a Substantial Loss of Income relating to or resulting from the COVID-19 pandemic: (you must check at least one)

20% or more reduction in monthly gross pay, as compared to average monthly pay for 2019

extraordinary out of pocket medical expenses

extraordinary childcare needs arising from school or childcare closures

I am sick with COVID-19, or

A family member or household member is sick with COVID-19

Specifically, I have experienced the following:

I have had to remain off work due to COVID-19 symptoms of a tenant or a member of the tenant's household or due to the need of the tenant to self-quarantine because of the exposure to COVID-19 and the lack of paid sick leave.

I have had a reduction in the number of hours for which I am paid, or have lost my job due to closure of the enterprise, business, restaurant, office, store etc. that employed me.

I have had to be off work to care for children whose school is closed.

Other: \_\_\_\_\_

**Documentation/ Substantial Evidence.** In addition to notifying your Landlord of your inability to pay, you are advised to provide supporting documents to fulfill your obligation to “demonstrate” the above checked items by “substantial evidence.”

I have attached the following substantial evidence of the financial impacts I have experienced due to COVID-19:

Letter from employer citing COVID-19 as a reason for reduced work hours or termination.

Paycheck stubs from before and after the COVID-19 outbreak

Increased out of pocket medical expenses, due to COVID-19

Other proof of substantial loss of income related to COVID-19

Letter confirming school or daycare closure due to COVID-19 and lack of paid sick leave.

Other: \_\_\_\_\_

Tenant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## DECLARATION OF SERVICE OF NOTICE TO RESIDENT

I, the undersigned declare that at the time of service of the papers herein referred to, I was at least eighteen (18) years of age, and that I served the following notice:

Three Day Notice to Pay Rent or Quit

On the following resident(s): \_\_\_\_\_, and  
all tenants in possession

on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

BY DELIVERING a copy for each of the above-named resident(s) PERSONALLY

**OR**

BY LEAVING a copy for each of the above-named resident(s) with a person of suitable age and discretion at the residence or usual place of business of the resident(s), said resident(s) being absent thereof;

AND MAILING by first class mail on said date a copy to each resident(s) by depositing said copies in the United States Mail, in a sealed envelope, with postage fully prepaid, addressed to the above-named resident(s) at their place of residence.

**OR**

BY POSTING a copy for each of the above-named resident(s) in a conspicuous place on the property therein described there being no person of suitable age or discretion to be found at the residence or any known usual place of business of said resident(s);

AND MAILING by first class mail on said date a copy to each resident(s) by depositing said copies in the United States Mail, in a sealed envelope, with postage fully prepaid, addressed to the above-named resident(s) at their place of residence.

I declare, under penalty of perjury, that the foregoing is true and correct and if called as a witness to testify thereto, I could do so competently.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ at \_\_\_\_\_ California.

\_\_\_\_\_  
Declarant