Residential Rent Stabilization and Arbitration Board City and County of San Francisco

REQUEST FOR EXTENSION OF OPEN RECORD

Name of Person Requesting Extension:
Property Address:
Case Number(s):
Administrative Law Judge:
Original Date of Close of Record for Landlord:
Original Date of Close of Record for Tenant:
Reason for Extension Request:

DETERMINATION ON EXTENSION REQUEST

Granted INot Granted

<u>ORDER</u>

□ For good cause shown and in the interest of justice, the record shall remain open for the submission of additional documentation. A copy of the submission must be provided by the submitting party to the responding party at the time of submission to the Board. The submitting party must file a Proof of Service form with the Rent Board to show that the submission was provided to the responding party. The responding party may submit a written response within ______ days; however, a response is not required. The responding party must file a Proof of Service form with the Rent Board to show that the a Proof of Service form with the Rent Board to show that the response, if any, was served on the other party. A blank Proof of Service form is attached for the convenience of the parties. Failure to provide the other party with copies of the post-hearing submission may result in the Administrative Law Judge disregarding the submission.

New Date of Close of Record for Landlord: _____

New Date of Close of Record for Tenant: _____

Good cause for extending the open record has *not* been shown. The record will close on the original dates noted above.

By: _____

Administrative Law Judge

_____ Date: _____

582 Request for Extension of Open Record 11/15/06

Residential Rent Stabilization and Arbitration Board City and County of San Francisco

PROOF OF SERVICE

Rent Board Case No.:		Hearing Date:	
Property Address:			
Administrative Law Judge	ə:		
My name is			
I am the (check one)	Iandlordtenant	 landlord's agent/represent tenant's agent/representat 	
(date)		I did serve a copy of the followir	-
on the following person(s):		
Service was made eit	her by (check th	e appropriate statement):	
placing a true copy ir mail at San Francisco, Ca		ope with first class postage fully ressed as follows:	prepaid, in the United States
(name)			
(address)			
	_	and attach list of additional names and	
handing a true copy	in a sealed enve	lope to the person(s) listed abov	е.
foregoing is true and	correct and th	nder the laws of the State on this Proof of Service was	s executed on the date
		(city/state)	
Signed:		Dated:	
582 Request for Extension of Open Rec	cord 11/15/06		
25 Van Ness Avenue, S	uite 320 Sa	n Francisco, CA 94102 (415) 252.4602 FAX 252.4699