

SECURITY DEPOSIT LANDLORD EXEMPTION ATTESTATION FORM

Effective July 1, 2024, California residential landlords are generally only able to charge security deposits equal to one month's rent, with some exceptions for landlords who own no more than two residential rental properties that collectively include four or fewer units.

For those exceptions, please complete and submit this form with the *Medi-Cal – Prior Authorization Request Form – Outpatient* either online (recommended) at **provider.healthnetcalifornia.com** or by **fax at 800-743-1655**.

For Landlord Only						
Tenant Information						
Tenant name:						
Address for security deposit:		City:				
State:	Z	IP:				
Landlord Information						
Landlord/Agent:						
Mailing address:						
City:		State:		<u>, </u>	ZIP:	
Phone number:	Email:			Fax number:		
Landlord Attestation						
The above landlord/agent attests	to all the foll	owing:				
1. □ Landlord is a natural person or an LLC in which all members are natural persons;						
2. □ Landlord owns no more than two residential rental properties that collectively include four or						
fewer units. For example: one	fourplex, tw	o duplexes or tw	o singl	e-family homes	5.	
3. ☐ The member is not active-d	uty military.					
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Landlord/Agent Signature:		Date:				
Private Member Information						

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Date of birth:

Only to be completed by Community Supports provider (servicing organization) after landlord has signed attestation

Member name: Medi-Cal ID: