We the qualified voters of the City of Richmond

COUNTY OR CITY OR TOWN AND DISTRICT, IF APPLICABLE

signed hereunder or on the reverse side of this page do hereby petition the circuit court to enter and order, pursuant to § 24.2-684 of the Code of Virginia for a Special Election to be held on the 2nd day of November, 2027, on the question listed below:

COMMONWEALTH OF VIRGINIA

PETITION OF QUALIFIED VOTERS

FOR REFERENDUM

Shall the Charter of the City of Richmond be amended to add the following provisions:

"§ 2.04.2. Preventing Predatory Rent Practices By Large Landlords

The city is committed to creating a more affordable Richmond by building and preserving affordable housing. Such affordability for all is essential to the city's future. In order to achieve this goal, the city must ensure stable housing policies and be more diligent on preventing predatory rent practices and rent gouging.

Council is given the power to regulate predatory rent practices and future rent increases for any dwelling unit or manufactured home lot, as defined in §55.1-1200 and §55.1-1300 of the Code of Virginia, intended for lease or leased as a home or residence, regardless of whether such unit or lot is vacant or occupied. A landlord with four or fewer rental dwelling units, or having up to a 10 percent interest in four or fewer rental dwelling units, shall not be subject to any regulations adopted pursuant to this section.

§17.38. Public Right To Referendum.

Any proposal to simultaneously revamp a significant number of zoning requirements will lead to fundamental changes in many neighborhoods, indeed the city itself. For this reason, it must always be the people's right to choose.

Any zoning plan, which affects at least 25% of the land parcels, shall not be enacted by Council unless such plan is first submitted to the qualified voters of the city at a special referendum election and been approved by a majority of all votes cast at such election.

When this charter provision becomes effective, any such zoning plan enacted after July 1, 2026 shall be subject to the special referendum requirement herein, unless it had been previously approved by a majority of all votes cast in an advisory referendum as permitted by §3.06.1. Should the existing zoning plan fail to achieve the required approval of a majority of all votes cast in such special referendum election, it will no longer be enforceable. The city zoning code will revert to the prior one.

The advisory and special referendum elections herein referenced and required shall be ordered and held in accordance with the applicable provisions of Section 3.06.1 and Article 5 (§24.2-681 et seq.) of Chapter 6 of Title 24.2 of the Code of Virginia."

All signatures required by law need not be on the same page of the petition. Numerous pages may be circulated. The circulator of each page must be a person who is her \himself a legal resident of the United States of America and who is not a minor nor a felon whose voting rights have not been restored. The circulator also must swear or affirm in the affidavit that s/he personally witnessed the signature of each voter.

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON BOTH SIDES OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE.

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE REFERENDUM.

OFFICE USE ONLY		SIGNATURE OF REGISTERED VOTER [PRINT NAME IN SPACE BELOW SIGNATURE]	POST OFFICE BOXES ARE NOT ACCEPTABLE RESIDENT ADDRESS House Number and Street Name or Rural Route and Box Number and City/Town	DATE SIGNED	*SEE NOTE BELOW LAST 4 DIGITS SOCIAL SECURITY NUMBER [OPTIONAL]
	1.	SIGN PRINT	RESIDENCE CITY/TOWN		
	2.	SIGN PRINT	RESIDENCE CITY/TOWN		
	3.	SIGN PRINT	RESIDENCE CITY/TOWN		

CONTINUE ADDITIONAL SIGNATURES AND COMPLETE AFFIDAVIT ON BOTH SIDES OF THE FORM

Commonwealth of Virginia

- AFFIDAVIT -

I, _____, swear or affirm that (i) my full residential address is _____;
and, if different, my mailing address is _____;
(ii) if applicable, I represent _____ organization in support of the referendum;
(iii) I am a legal resident of the United States of America in the State/Commonwealth of _____;
(iv) I am not a minor nor a felon whose voting rights have not been restored; and (v) I personally witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to $2500 and/or imprisonment for up to ten years.

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE

NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE

Notary Signs the Affidavit on the Reverse Side

SIGNATURE OF PERSON CIRCULATING THE PETITION

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

* **Privacy notice**: The Code of Virginia, § 24.2-684.1, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.

CONTINUED FROM REVERSE SIDE

CIRCULATOR: MUST SWEAR OR AFFIRM IN THE AFFIDAVIT ON BOTH SIDES OF THIS FORM THAT S/HE IS A LEGAL RESIDENT OF THE UNITED STATES OF AMERICA, NOT A MINOR NOR A FELON WHOSE VOTING RIGHTS HAVE NOT BEEN RESTORED AND THAT S/HE PERSONALLY WITNESSED EACH SIGNATURE..

SIGNER: YOUR SIGNATURE ON THIS PETITION MUST BE YOUR OWN AND DOES NOT SIGNIFY AN INTENT TO VOTE FOR THE REFERENDUM.

OFFICE USE ONLY		**SIGNATURE OF REGISTERED VOTER** [PRINT NAME IN SPACE BELOW SIGNATURE]	**POST OFFICE BOXES ARE NOT ACCEPTABLE** **RESIDENT ADDRESS** House Number and Street Name **or** Rural Route and Box Number and City/Town	**DATE SIGNED**	*SEE NOTE BELOW **LAST 4 DIGITS SOCIAL SECURITY NUMBER** [OPTIONAL]
	4.	SIGN PRINT	RESIDENCE CITY/TOWN		
	5.	SIGN PRINT	RESIDENCE CITY/TOWN		
	6.	SIGN PRINT	RESIDENCE CITY/TOWN		
	7.	SIGN PRINT	RESIDENCE CITY/TOWN		
	8.	SIGN PRINT	RESIDENCE CITY/TOWN		
	9.	SIGN PRINT	RESIDENCE CITY/TOWN		
	10.	SIGN PRINT	RESIDENCE CITY/TOWN		
	11.	SIGN PRINT	RESIDENCE CITY/TOWN		
	12.	SIGN PRINT	RESIDENCE CITY/TOWN		
	13.	SIGN PRINT	RESIDENCE CITY/TOWN		

Commonwealth of Virginia

- AFFIDAVIT -

I, _____, swear or affirm that (i) my full residential address is _____; and, if different, my mailing address is _____; (ii) if applicable, I represent _____ organization in support of the referendum; (iii) I am a legal resident of the United States of America in the State/Commonwealth of _____; (iv) I am not a minor nor a felon whose voting rights have not been restored; and (v) I personally witnessed the signature of each person who signed this page or its reverse side. I understand that falsely signing this affidavit is a felony punishable by a maximum fine up to $2500 and/or imprisonment for up to ten years.

CIRCULATOR'S DRIVER'S LICENSE NUMBER, IF APPLICABLE

NAME OF STATE THAT ISSUED THE CIRCULATOR'S DRIVER'S LICENSE

CIRCULATOR'S LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

PLACE PHOTOGRAPHICALLY REPRODUCIBLE NOTARY SEAL/STAMP BELOW

_____
SIGNATURE OF PERSON CIRCULATING THE PETITION

State of _____ County/City of _____

The foregoing instrument was subscribed and sworn before me this _____ day of _____, 20 ____ by _____.

PRINT NAME OF PERSON CIRCULATING THE PETITION

_____ _____ _____
SIGNATURE OF NOTARY OR OTHER PERSON AUTHORIZED TO ADMINISTER OATHS | NOTARY REGISTRATION NUMBER** | DATE NOTARY COMMISSION EXPIRES**

* **Privacy notice**: The Code of Virginia, § 24.2-684.1, authorizes requesting the last four digits of your social security number to facilitate checking this petition with the official voter registration record. You are not required to provide this information and may sign the petition without doing so. The State Board of Elections or the General Registrar, when copying this document for public inspection, must cover the column containing any social security number or part thereof.

** If not included in seal/stamp.