

## REQUEST FOR AN ACCOMMODATION OF A HOUSING POLICY

I qualify as an individual with a disability as defined by Federal and State Fair Housing Laws. You have a policy that (prohibits) (requires) \_\_\_\_\_ in your building located at \_\_\_\_\_. Because of my disability, that policy would restrict my ability to use and enjoy an apartment in that building.

In accordance with my rights under Federal and State Fair Housing Laws, I am requesting that you make an accommodation or your animal policy and allow me to \_\_\_\_\_.

Please respond in writing, within ten (10) working days, to my request for the above accommodation.

Thank you for your attention to this important matter.

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



## Request for Reasonable Accommodation or Modification

To file a complaint call:

(740) 283-6000 extension 1700

**THE FAIR HOUSING PROGRAMS  
OF STEUBENVILLE, TORONTO &  
JEFFERSON COUNTY  
OHIO VALLEY FAIR HOUSING CENTER  
115 SOUTH 3RD STREET, SUITE 108  
STEUBENVILLE, OHIO 43952**



## CERTIFICATION OF STATUS AS AN INDIVIDUAL WITH A DISABILITY

In federal civil rights laws the definition of disability includes:

“...with respect to a person, a physical or mental impairment which substantially limits one or more major life activities, a record of such an impairment; or being regarded as having such an impairment...”

“...physical or mental impairment includes: (1) any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological; musculoskeletal; special sense organs; respiratory, including speech; organs; cardiovascular, reproductive, digestive; genitourinary; hemic and lymphatic; skin, and endocrine; or (2) any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

“...The term ‘physical or mental impairment’ includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech and hearing impairment, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, Human Immunodeficiency Virus infection, mental retardation, emotional illness, drug addiction (other than addiction caused by current, illegal use of a controlled substance) and alcoholism.

As a medical/social service professional with a knowledge necessary to make such a determination, I certify that qualifies as an individual with a disability as defined above. (IMPORTANT: Do NOT reveal the specific NATURE OR SEVERITY of the individual’s disability)

Name of Individual \_\_\_\_\_ Date \_\_\_\_\_

Name and professional title: \_\_\_\_\_ Signature: \_\_\_\_\_

## **Request for Reasonable Accommodation/Modification**

### **Procedure**

Housing Providers are required to provide a reasonable accommodation in their rules, policies practices and procedures and allow reasonable modifications (changes to the physical structure) for qualified individuals (persons with disabilities) as defined by law.

When considering a reasonable accommodation/modification request a Housing Provider can only take the following into consideration:

- ▶ Is the individual (or the intended tenants of the housing) which is the subject of the requested qualified? (Is the individual a person with a disability as defined by law or is the housing designed to serve persons who are disabled as defined by law?)
- ▶ Is the request for an accommodation or modification necessary? (This is not determined by the Housing Provider but by the individual or developer of the housing and confirmation can be requested to be provided by a medical health professional.)
- ▶ Would the requested accommodation impose an undue financial or administrative burden? (For a modification this is only considered if the modification is to be paid for by the Housing Provider. Please consult HUD or DFEH to determine if the Housing Provider is required to pay for the modification.)
- ▶ Would the requested accommodation or modification require a fundamental alteration in the nature of the program?

The Housing Provider should not ask about the nature or severity of the disability in question. The Housing Provider need only consider whether or not the request is 'reasonable' in terms of cost and alteration of their housing program. They may ask questions which will clarify what it is about the policy, practice or procedure that serves as a barrier (so that the Housing Provider may offer an alternative 'solution' if the requested accommodation is not 'reasonable'.) They should not attempt to determine whether or not the request is necessary for the individual(s) in question. That is up to the individual and their advisors.

**BREAK  
THE BARRIER OF  
HOUSING  
DISCRIMINATION**



***Companion Animals***