

Notice to all Applicants

REASONABLE ACCOMODATION For Applicant with Disabilities

The Housing Authority is a public agency that provides low rent to eligible families, including families with children, elderly families, disabled families, and single people. PHA is not permitted to discriminate against applicant on the basis of their race, religion, sex, color, national origin, age, disability or marital status. In addition, PHA has a legal obligation to provide "reasonable accommodations" to applicants if they or any family member have a disability. A reasonable accommodation is a structural change a PHA can make to its units or common areas, or a modification of a rule, policy, procedure, or service, that will assist an otherwise eligible applicant or resident with a disability to make effective the use of a PHA's programs. Examples of reasonable accommodations would include:

- Making alterations to a PHA unit so it could be used by a family member with a wheelchair;
- Adding or altering unit features so they may be used by a family member with a disability;
- Installing strobe type flashing light smoke detector in an apartment for a family with a hearing impaired member.
- Making large type documents, Braille documents, cassettes or a reader available to an applicant with a vision impairment during the application process;
- Making a sign language interpreter available to an applicant with a hearing impairment during the interview or meetings with PHA staff;
- Permitting an outside agency or individual to assist an applicant with a disability to meet PHA's applicant screening criteria.

An applicant family that has a member with a disability must still be able to meet essential obligations of tenancy. They must be able to pay rent, take care of their apartment, report required information to the Housing Authority and avoid disturbing their neighbors, etc. However, there is no requirement that they be able to do these things without assistance.

If you or a member of your family have a disability and think that you might need or want a reasonable accommodation, you may request it at any time in the application process or at any time you need an accommodation. This is up to you. If you would prefer not to discuss your situation with the Housing Authority, that is your right.

Request for Reasonable Accommodation

Name: _____ TDD /Phone _____

Address: _____

City: _____ Zip _____

1. The following member of my household has a disability as defined below:
(A physical impairment that substantially limits one or more life activities; or a record of having such impairment; or regarded as having such impairment.)

Name: _____ Relationship to you: _____

2. As a result of this disability I am requesting the following specific accommodation:
(Check one or more boxes below.)

A change in my apartment or other part of the housing development (please specify).

A change in the following rule, policy, or procedure (Note: A change in how to meet the terms of the lease may be requested, but the terms of the lease must be met.) (Please specify.)

Other (For example, a change in the way the housing authority communicates with you.) Please specify:

3. The request for reasonable accommodation is necessary so that I (or my family member can (please specify):

4. I authorize the housing Authority to verify that I (or my family member have a disability and have a need for the specific accommodation I have requested. In order to verify this information, the housing authority may contact the following licensed professional:
(Note: You may also bring this form back to the housing authority.)

Name and Title: _____

Agency, Facility, or Institution (if any) _____

Address _____

Telephone _____

I understand that the information obtained by the housing authority will be kept completely confidential and used solely to make a determination on my accommodation request.

Please call a housing authority representative at 828-692-6175 if you have questions.

Signature _____ Date: _____