

HOUSING COMPLAINT QUESTIONNAIRE

Complainant's Name (First, Middle Initial, Last): _____

<i>CONTACT INFORMATION</i>			
Current Address: (Number and Street)	Email Address:		
City:	State:	Zip Code:	County:
Home Phone Number and Area Code:	Alternative Phone Number and Area Code:		
May We leave a Voicemail? Yes <input type="checkbox"/> No <input type="checkbox"/>	Preferred Contact Method (Mail, Email, Phone):		
Name of Person to Contact if You Cannot Be Reached:	Contact Person's Phone Number and Area Code		
Name of Attorney (If Applicable):	Attorney's Phone Number and Area Code:		

<i>ESTABLISHING THE EXISTENCE OF A DISABILITY</i>
<p>Disability: Mental___ Physical___ Both___</p> <p>Are you alleging that you have a physical or mental impairment that substantially affects your daily life activities? If yes, describe the impairment?</p> <p>Are you alleging that a member of your household or someone associated with you has a physical or mental impairment? If so, what is the disabled person's relationship to you? Describe the impairment?</p> <p>Are you currently receiving SSI or SSDI benefits?</p>

<i>HOUSING PROVIDER'S KNOWLEDGE OF DISABILITY</i>
<p>Do you believe that the housing provider (Landlord) is aware that you have a disability, or thinks you have a disability?</p> <p>If the housing provider (Landlord) is aware of your disability, when do you believe the housing provider became aware of your disability?</p> <p>How did the housing provider (Landlord) become aware of your disability?</p>

REASONABLE ACCOMMODATION

Definition: A reasonable accommodation is a change, exception, or adjustment to a rule, policy, practice, or service that may be necessary for a person with disabilities to have an equal opportunity to use and enjoy a dwelling.

Did you request a reasonable accommodation, due to disability? Yes _____ No _____

Did you make this request in writing or verbally?

Date reasonable accommodation was requested: _____

To whom was the request made:

Name(s):

Position/Title:

Method and Location of Delivery:

HOUSING PROVIDER'S RESPONSE TO REASONABLE ACCOMMODATION

Did the housing provider deny, delay or ignore your request for accommodation/modification?

What did the housing provider do or say in response to your request? Explain.

If the housing provider failed or refused to make the requested accommodation/modification, what reason was given?

REASONABLE ACCOMMODATION RELATED TO EVICTION

Have you been summoned to court for eviction?

Reason For Eviction Hearing (Please check one):

Nonpayment of Rent _____, Nonrenewal/Hold-over _____, Lease Violations _____, Criminal Activity _____

Date of Eviction Hearing: _____

What was the outcome of the hearing?

ADDITIONAL AGGREGATED PERSONS

MEMBERS OF YOUR HOUSEHOLD (Include full names, date of birth and relationship to yourself):

Please provide copies of any documents or correspondence to or from your housing provider that you believe might be helpful in this investigation.