



Request for a Reasonable Accommodation/Modification Due to a Disability

What Is Reasonable Accommodation or Modification?

If you are a person with a disability and you need:

- ✓ a change in Housing Authority rules or policies or how we do things that would make it easier for you to live here and use the facilities or take part in programs on site;
- ✓ a change or repair on your apartment or special type of apartment that would make it easier for you to live here and use the facilities or take part in programs on site;
- ✓ a change or repair to some other part of the housing site that would make it easier for you to live here and use the facilities or take part in programs on site; or
- ✓ a change in the way we communicate with you or give you information.

You can then ask for this kind of change which is called "Reasonable Accommodation" or "Reasonable Modification," depending on the nature of the request. If you can show that you have a legal disability and the accommodation and/or modification that you are requesting will satisfy the needs of that disability, if your request is deemed reasonable, and does not cause a financial hardship to the condition of the apartment complex financial status - we will make every effort to make the changes you request.

We will give you an answer in writing as soon as possible.. We will let you know if we need more information or verification from you, or if we would like to talk to you about other ways to meet your needs. We will always open up an active dialogue with you about your request.

If your request is denied, we will explain the reasons and you can give us more information if you think that will help. If you need help filling out the form, or if you want to give us your request in some other way, we will help you. You can get a *Resident Request for a Reasonable Accommodation/Modification* form at Loveland Housing Authority, 375 W. 37th Street, Suite 200, Loveland, CO 80538, by calling (970) 667-3232 or visiting our website:

www.lovelandhsg.org



**RESIDENT REQUEST FOR A REASONABLE ACCOMMODATION
DUE TO DISABILITY**

Date of Request: _____

Resident Name: _____

Mailing Address: _____

Possibly moving to or living at what Property? _____

During the daytime, what is the best time to reach you? _____

Daytime Phone Number: _____ Evening Phone Number: _____

1. Name of resident who is disabled: _____

2. Please provide the following change or changes so that the person listed above can live in Housing Authority housing as easily and successfully as other residents. Check the kind of change(s) you need.

_____ A change in my apartment or other part of the housing complex.

_____ A change in a rule or way you do things. I understand that I may ask for changes in how I meet the terms of the lease.

3. Please tell us what you need (please be specific).

4. Why will this accommodation or modification specifically meet the disability that you have:



5. In what ways do you NEED this accommodation or modification?

6. Please note that your disability will be verified by a third party qualified individual.

Please list below name and address of the person verifying the disability and requested need.

Name & Title: _____

Address: _____

City/State/Zip: _____ Phone: _____

Once you have completed filling out this form, please return it to the Loveland Housing Authority Administrative Offices - 375 W. 37th Street, Suite 200, Loveland, CO 80538.

We will respond back to you in writing and confirm our understanding of your request. Thank you.