



## NOTICE OF RIGHT TO REASONABLE ACCOMMODATION

You may ask for a reasonable accommodation, if you or any member of your household has a disability.

### A Reasonable Accommodation is a change in:

- The rules or policies/how we do things that would give you an equal chance to live and use facilities; or take part in on-site programs,
- Your apartment or a special type of apartment that would give you an equal chance to live and use the facilities; or take part in programs on-site,
- Some part of the unit, or housing site where you reside, that would give you an equal chance to live and use the facilities; or take part in on-site programs,
- The way we communicate with you or give you information.

If we know that you have a disability, or we can verify a disability we will try to make the changes you request unless:

- your request is unreasonable,
- will pose “an undue financial and administrative burden (cost too much money to complete),
- it requires a fundamental change in the nature of our programs or services,
- it is structurally infeasible,

### Requesting a Reasonable Accommodation:

The form is available online, at our website at [www.dbhaf1.org](http://www.dbhaf1.org), or any property office, or at the Housing Authority’s Main Office.

or

Contact your Property Manager or HCV Caseworker, at any time to request a Reasonable Accommodation Form, or if you want to give us your request in some other way, they will help you.

We will give you an answer in **10 business days** unless there is a problem getting the required verification, or if need to talk to you about other ways to meet your needs, or you agree to a longer time. If we **turn down** your request, we will explain the reasons, and **you have the right to appeal the decision**, if you think that will help.

I/we have read and understand this Notice of Right to Reasonable Accommodation.

I/we request a Reasonable Accommodation (the request form must be completed).

A Reasonable Accommodation is not required by any household member.

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Applicant/Resident Signature

Date