Request for Accommodation Due to Disability

Fair Housing Amendments Act 42 U.S.C. § 3601 et. seq. & 42 U.S.C. § 12111(9)(B)

То:_____

(Name and address of Landlord or Manager)

From: _____

(Name of and address of Tenant)

I am writing to you as owner/operator of the rental property commonly known as:

(address of rental unit)

I am a person with a "Disability" under the Americans with Disabilities Act, or the "ADA" and the California Fair Employment and Housing Act, or the "FEHA." My condition is commonly known as:

(common name of condition or briefly describe Tenant's disability)

This is a request for reasonable accommodation under the ADA and the California FEHA. If you are not the appropriate person to receive this request, please notify me immediately, and forward this letter on to the person who handles requests for reasonable accommodations. Due to my disability, I need the following Reasonable Accommodation:

(Briefly describe the accommodation you are seeking and how it relates to your disability.)

Please let me know if you require reasonable medical documentation of my condition, or if you wish to propose alternative accommodations to those I have requested.

Sincerely,

(Tenant's Signature)

(Date)

This form is provided for free as a community service by *So Cal Tenants Resource* 12631 Imperial Blvd. Suite. B-202 Santa Fe Springs, California 90670 • (562) 863-5200 *For More Free Tenant Forms go to www.SoCalTenantsResource.com*