Sample Response to a Request for Reasonable Accommodation Form

Note: A form such as this sample should be used to inform a tenant whether his or her accommodation request has been granted. All reasonable accommodation policies and forms should be reviewed by legal counsel prior to implementation.

Dear_________________ [fill in tenant name]:

You requested the following change or reasonable accommodation(s): [describe request]

□ We have granted your request and we expect to complete the modification by this date:

□ We have denied your request because:

☐ You have not established that you meet the definition of a person with a disability and we are not required to provide a reasonable accommodation.

☐ We think the accommodation you requested is not reasonable because:

☐ You do not need this accommodation in order to enjoy or participate equally in our program.

☐ It will cost too much money and/or is more work than our staff can do (an undue financial and/or administrative burden).

☐ It will change the fundamental nature of our program.

☐ Based on the documentation you provided, we do not believe the accommodation you requested is likely to enable you to participate in or complete our program.

Reasons for Denial:
We decided this because [give reason in clear, simple language].

We used these facts to deny your request [give facts in clear, simple language].

To make this decision we [list documents or records reviewed, people spoken with, and other aspects of investigative process].

Note: This document is included within the Housing Operations section of CSH’s Toolkit for Developing and Operating Supportive Housing, which is available at [www.csh.org/toolkit]. This document has been adapted from CSH’s Supportive Housing Property Management Operations Manual, which is available at [www.csh.org/publications].
If you have questions, please feel free to contact the Operations Manager/Property Supervisor at [insert phone #].

Next Steps:
If you disagree with this decision, you may appeal to:

If you are still unhappy with the results, you may appeal to:
[Insert name of executive staff or committee able to consider such appeals. In some cases, this may be a governmental body.]

____________________________________________________________
[Signature of Building Manager or Operations Manager/Property Supervisor]

____________________________________________________________
[Date]