

REASONABLE ACCOMMODATION
REQUEST FORM

Date: _____

Property Manager's Name: _____

Address: _____

Dear Management Representative,

I live in Apartment No. _____ at _____. I have a disability that prevents me from _____.

I am therefore requesting a reasonable accommodation. I have attached verification from _____ of my disability and the functional limitations I experience

as well as the accommodation(s) I need in order to compensate for my disability. I am asking for this accommodation so that I can have full use and enjoyment of my home.

Please reply to my request in writing within the next ten (10) business days of receipt of this letter. I look forward to your response and appreciate your attention to this matter.

Sincerely,

[Person Requesting]

[Manager & Date Received]

Phone #: _____

Email: _____