

NEW YORK CITY HOUSING AUTHORITY

REASONABLE ACCOMMODATION - MODIFICATION REQUEST

1. NAME (LESSEE/CO-LESSEE)		6. CASE NUMBER
2. STREET NAME	3. APT. #	7. VOUCHER NUMBER
4. DEVELOPMENT	5. BOROUGH	8. NUMBER OF ROOMS
		9. TELEPHONE #

On this form you are requesting that the Housing Authority provide reasonable accommodation to any member of your household who has Disability, so that your household members can better use your residence and the Housing Authority's facilities and programs. For this purpose, **please read the examples on page 2, check off those areas where you have a problem and complete this form.** You must date, sign, and return this form either to your development management office or upload in NYCHA Portal.

Even after you submit this form, should conditions change, you may fill out and submit a new form to your management office. If you need help in understanding what disabilities or reasonable accommodations are, would like additional information regarding the rights of Persons with disabilities, or need help in completing this form, you may contact your development management office or the Housing Authority's Department of Equal Opportunity, Services for the Disabled at (212) 306-4652 or TDD (212) 306-4845.

A. REASONABLE ACCOMMODATION REQUEST FOR: (HOUSEHOLD MEMBER)

1. LAST NAME	2. FIRST NAME
<input type="text"/>	<input type="text"/>

3. START DATE: <input type="text"/> (mm/dd/yyyy)	4. RELATIONSHIP <input type="text"/>
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5. TENANT'S DISABILITY(IES) (Check all that apply):

- a. Uses Walker, Crutches, Cane, Leg Braces, is an amputee or has difficulty walking or climbing stairs
- b. Uses Wheelchair
- c. Blind or Vision Impaired
- d. Deaf or Hard Of Hearing
- e. Mental or Psychological Disability

f. Other Physical Disability (i.e. breathing impaired) (Describe)

g. Depends on Life-Sustaining Equipment (Describe)



B. TYPE OF MODIFICATION OR ACCOMMODATION REQUESTED: (CHECK ONLY ONE)

- 1. Modification to Policy.
- 2. There is someone in my household with a disability, and I am requesting the Housing Authority to provide an accommodation. I understand that someone from my Management Office will contact me, so that I may specify my disability related problems that I have with my apartment, building, development grounds or Housing Authority's programs. Based upon my response, I understand that the Housing Authority will offer to provide me with a reasonable accommodation, which may include a modification to my present apartment, building, development grounds or Housing Authority programs or offer to transfer me and my household members to a modified apartment.

C. THE REASONABLE ACCOMMODATION REQUESTED: (CHECK ONLY ONE)

- 1. Mold/Mildew removal
- 2. A third air conditioner or more
- 3. Under Occupied Exception
- 4. Home Visit
- 5. Physical modification of existing apartment *(Check all that apply)*
 - a. Widened Doorways *(if structurally possible)*
 - b. Enlarged Bathroom *(if structurally possible)*
 - c. Lever Handle Faucets/Door Knobs
 - d. Adjusted Electrical Switches & Outlets
 - e. Lowered Interviewer
 - f. Lowered kitchen Cabinets
 - g. Self Cleaning Stove/Ranges
 - h. Roll in Showers
 - i. Monoxide Alarms
 - j. Hand Held Showers
 - k. Raised Commodes
- 6. Utility Allowance
- 7. Physical modifications to the grounds or common area
- 8. Assign Third Party to Receive Documents
- 9. Other:

i. Signature of Client/Patient or Parent/Legal Guardian

m. DATE

(mm/dd/yyyy)

A translation of this document is available at 250 Broadway, 2nd floor, New York, NY 10007
La traducción de este documento está disponible en 250 Broadway, 2° Piso, New York NY 10007
С переводом этого документа можно ознакомиться по адресу: 250 Broadway, 2-й этаж, New York, NY 10007
紐約市百老匯大道250號2樓接待處備有文件譯本可供索取
位于纽约市曼哈顿百老汇大道250号2楼办公室备有文件译本可供索取。

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D. EXAMPLES OF REASONABLE ACCOMMODATION BY PROBLEM AREAS:

Note: this list is just a sample and is not meant to be exhaustive

ROOM/AREA OF PROBLEM	TYPE OF DIFFICULTY	TYPICAL ACCOMMODATIONS REQUESTED
Management Office Senior Center Parking Area Laundry Room	<ul style="list-style-type: none"> No easy access. Problems in using the facility 	<ul style="list-style-type: none"> Widen or rehang doors to lay flat against a wall when opened or to swing out instead of into a space. Add or adjust door closers Adjust door for appropriate opening force Provide lever type or other accessible door handles
Mail Delivery/ Trash Disposal		<ul style="list-style-type: none"> Raise or adjust objects that protrude into an accessible route or interfere with required headroom
Building Entrance Interior Lobby/ Path to Apartment		<ul style="list-style-type: none"> If common laundry facilities provided, provide at least one front loading washer/dryer or other accommodation Provide accessible mailbox such as at lower height use different paint color for doors, doorways, windows or baseboards
Building Elevator	<ul style="list-style-type: none"> Problems entering and or exiting Problems using the elevator 	<ul style="list-style-type: none"> Transfer to an unit on the ground floor or to another development with wider elevator cabs Adjust automatic door to close less quickly Provide raised/braille floor indicators for persons with visual impairments
Apartment Interior	<ul style="list-style-type: none"> Problems in easily moving around apartment Hazardous objects in apartment 	<ul style="list-style-type: none"> Modifications to unit to widen interior and exterior apartment doors Intercom installation or lower peep hole Transfer to a 504 accessible unit Cover or protect exposed hot water pipes
Apartment Entrance/Interior Door	<ul style="list-style-type: none"> Have difficulty in identifying at the front door Cannot easily open, close or get through doorway(s) Round doorknob(s) difficulty to pull 	<ul style="list-style-type: none"> Widen or rehang doors to lay flat against a wall when opened or to swing out instead of into a space Provide lever type or other accessible door handles Bevel changes in pathway level exceeding ¼" Attaching a flashing light signal to door bell
Apartment Windows	<ul style="list-style-type: none"> Cannot easily open or close 	<ul style="list-style-type: none"> Provide windows requiring limited force to open
Smoke Detector	<ul style="list-style-type: none"> Cannot hear it 	<ul style="list-style-type: none"> Installation of visual smoke detector
Kitchen	<ul style="list-style-type: none"> No easy access Problem in using the refrigerator, range, sink or cabinets 	<ul style="list-style-type: none"> Modification to unit to make cabinets and appliances more accessible Transfer to a 504 accessible unit
Closet(s)	<ul style="list-style-type: none"> No easy access Problems in using the closet. 	<ul style="list-style-type: none"> Provide accessible or adjustable rods or shelves
Bathroom	<ul style="list-style-type: none"> No easy access Problems in using the tub/shower/sink Problems in using the toilet 	<ul style="list-style-type: none"> Modifications to doorways and fixtures to make bathroom more accessible
Apartment light Switches/Electrical Outlets	<ul style="list-style-type: none"> Problems in using/not enough outlets/not enough power for disability related equipment. 	<ul style="list-style-type: none"> Installation of additional outlets Lower or raise electrical outlets or switches
Apartment Interior	<ul style="list-style-type: none"> Breathing Difficulties 	<ul style="list-style-type: none"> Permit installation of third air conditioner Temporary transfer pending mold/moisture remediation or permanent transfer if the unit is uninhabitable

