



Housing Authority and Urban Renewal
Agency of Polk County

204 S.W. Walnut Avenue, Dallas, OR 97338

Phone (503) 623-8387 • Fax (503) 623-6907 • VRS (877) 326-3877

www.wvpha.org



REQUEST FOR REASONABLE ACCOMMODATION

If you or anyone in your family is a person with disabilities, and you require a specific accommodation in order to fully utilize our programs and services, please complete and submit this request to West Valley Housing Authority, 204 SW Walnut Ave, Dallas, OR 97338.

If you need assistance with this form or have any additional questions, please contact the Housing Authority at (503) 623-8387.

HEAD OF HOUSEHOLD: _____ Date: _____

ADDRESS: _____

PHONE NUMBER: _____

- 1) Please indicate the name of the **disabled household member** who is requesting the accommodation: _____
- 2) Please describe the reasonable accommodation you are requesting: _____

- 3) How does the requested reasonable accommodation relate to the disability? _____

- 4) How will the requested reasonable accommodation provide the disabled household member an equal opportunity to enjoy our housing programs, the unit and/or common areas? _____

- 5) Please list the name, address and phone number of your doctor, health care provider or other qualified individual. The Housing Authority will request verification from the person you list to verify that your request: (1) is related to your disability; and (2) would provide you with an equal opportunity to enjoy our housing programs or that your disability restricts you from performing this task.

Name: _____

Address: _____

Phone Number: _____
