

HOUSING DISCRIMINATION COMPLAINT

Date: _____
Inquiry Number: _____
Case Number: _____

Your Name: _____

Your Address: _____

City: _____ State: _____ Zip Code: _____

Use the TAB key to move forward through the fields, You can also use the SHIFT + TAB key to move backwards. DO NOT use the ENTER key.

Daytime Phone: _____ Evening Phone: _____ Time to Call: _____
(Enter 999-999-9999, Including dashes)

Who else can we call if we cannot reach you? (Enter telephone numbers as 999-999-9999, including dashes, for example, 214-999-1234)

1 Contact's Name: _____ Daytime Phone No: _____

Best time to call: _____ Evening Phone No: _____

2 Contact's Name: _____ Daytime Phone No: _____

Best time to call: _____ Evening Phone No: _____

Enter complaint information.

1. What happened to you? How were you discriminated against? For example: were you refused an opportunity to rent or buy housing? Denied a loan? Told that housing was not available when in fact it was? Treated differently from others seeking housing? State briefly what happened.

Why do you believe you are being discriminated against?

It is a violation of the law to deny you your housing rights for any of the following factors:

- race - color - religion - sex - national origin - familial status (families with children under 18) – disability, sexual orientation.

For example: were you denied housing **because of** your race? Were you denied a mortgage loan **because of** your religion? Or turned down for an apartment **because** you have children? Were you harassed because you assisted someone in obtaining their fair housing rights? Briefly explain why you think your housing rights were denied **because of** any the factors listed above.

2. Who do you believe discriminated against you? Was it a landlord, owner, bank, real estate agent, broker, company, or organization?

Name: _____

Address: _____

N O T E: THE FAIR HOUSING OFFICE WILL FURNISH A COPY OF THIS COMPLAINT TO THE PERSON OR ORGANIZATION AGAINST WHOM IT IS FILED.

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3. Where did the alleged act of discrimination occur? Provide the address. For example:
Was it at a rental unit? Single family home? Public or Assisted Housing? A Mobile
Home? Did it occur at a bank or other lending institution?

Address: _____

City: _____ State: _____ Zip Code: _____

When did the last act of discrimination occur?

Enter the date: _____ (mm/dd/yyyy)

Is the alleged discrimination continuous or on going? _____ (Select Yes or No)

Please sign and date this form:

I declare under penalty of perjury that I have read this complaint (including any attachments)
and that it is true and correct.

Signature

Date

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