

**HAWAII PUBLIC HOUSING AUTHORITY**  
**REASONABLE ACCOMMODATION/MODIFICATION REQUEST FORM**

**\*\* This page to be completed by Requestor or office upon verbal request. Please print legibly. \*\***

Date: \_\_\_\_\_

AMP No. \_\_\_\_/Project Name (Federal or State): \_\_\_\_\_

Name of Requestor (head of household): \_\_\_\_\_

Requestor's Address (for mailing determination): \_\_\_\_\_

\_\_\_\_\_ Phone: \_\_\_\_\_

Please describe the reasonable accommodation or modification you are requesting: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why do you need this accommodation/modification? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Did you receive the HPHA policy on reasonable accommodations?	YES	NO
Do you understand the policy and the process?	YES	NO
If "No," were your questions answered to your satisfaction?	YES	NO
Do you authorize the HPHA's Section 504 Coordinator to contact you regarding this request?	YES	NO

Contact information of doctor or other person who can verify the medical needs of (name of household member who requires an accommodation): \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

A statement from this person verifying the need for my request (circle one) IS / IS NOT attached.

*By signature below, I hereby authorize the HPHA to make any lawful inquiries as to my need for the above requested accommodation(s); specifically, whether I am an individual with a disability as defined by HUD regulations and have a need for the requested accommodation. These inquiries will not involve disclosure of the nature or extent of my disability and will be in conformance with the HUD-US Department of Justice guidance on reasonable accommodations and modifications.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**WARNING:** Under Sections 17-2028-9 (federal) and 15-193-9 (state) of the Hawaii Administrative Rules, a tenant who submits false information, or makes willful misstatements may be denied continued eligibility and have the rental agreement terminated.

NEIL ABERCROMBIE  
GOVERNOR



HAKIM OUANSAFI  
EXECUTIVE DIRECTOR

BARBARA E. ARASHIRO  
EXECUTIVE ASSISTANT

**STATE OF HAWAII**  
DEPARTMENT OF HUMAN SERVICES  
HAWAII PUBLIC HOUSING AUTHORITY  
1002 NORTH SCHOOL STREET  
HONOLULU, HAWAII 96817

IN REPLY REFER TO:

**ADMINISTRATIVE MEMORANDUM**

ADMIN. NO. 4  
February 16, 2012,  
replacing Memo issued on February 18, 2010

To: All Offices, Branches, Sections, and Units

From: Hakim Ouansafi  
Executive Director

Subject: **REASONABLE ACCOMMODATION AND MODIFICATION POLICY &  
PROCEDURES FOR HAWAII PUBLIC HOUSING AUTHORITY  
(HPHA)**

**I. GENERAL**

The purpose of this administrative memorandum is to establish that the Hawaii Public Housing Authority (HPHA) recognizes its obligations to reasonably accommodate individuals with disabilities in all phases of its operations. This includes applicants from housing operated by the HPHA, residents in housing managed by the HPHA, including residents of privately managed housing projects owned by the HPHA, and employment applicants and the employees of HPHA.

This policy supersedes the reasonable accommodations and modification policy and procedures adopted by the HPHA Board on February 18, 2010.

**II. POLICY**

In accordance with the regulations, and in recognition of the HPHA's obligations, the HPHA's statement of non-discrimination policy is set forth in Resolution No. 24 (copy attached).

The HPHA will make reasonable accommodations and/or modifications to rules, policies, practices and procedures to enable an individual with a disability to benefit from the program(s) offered by the HPHA where the individual is an applicant, resident, or employee. The HPHA will make accommodations that are both *reasonable* and *necessary* to afford equal opportunity to an individual with a disability.

It shall be the responsibility of the HPHA or management company retained by the HPHA to explain its reasonable accommodations and modifications policy to all job and housing applicants, residents and employees. Since HPHA is prohibited from assuming any need for reasonable accommodations, it is the responsibility of the applicant, resident, or employee to request such an accommodation pursuant to this policy.

A "reasonable accommodation" is a change, exception, or adjustment to a rule, policy, practice, or service that may be necessary for a person with a disability to have an equal opportunity to use and enjoy a dwelling, including common and public areas.

A "reasonable modification" is a structural change made to existing premises, occupied or to be occupied by a person with a disability, in order to afford such person full enjoyment of the premises.

"Employee" means an employee of the HPHA.

"Staff" or "staff person" includes employees of HPHA, entities and employees of entities contracted by the HPHA to manage or operate HPHA's housing programs.

Each staff person shall be provided a copy of this reasonable accommodation policy. Each staff person shall comply with the following:

- A. When a staff person receives a request for a reasonable accommodation or modification from an applicant, tenant, or other program participant, the request must be reported as soon as practicable to the staff person's supervisor. The word or phrase "reasonable accommodation" or "reasonable modification" does not need to be used. Any request for a change to HPHA rules, policies, practices and procedures, or facilities due to a disability may be considered a request for a reasonable accommodation;

- B. Disclosure or sharing of confidential disability-related information is prohibited, except for the specific purpose of making or assessing a decision to grant or deny a reasonable accommodation or modification request or when disclosure is required by law;
- C. Each staff person must cooperate with HPHA management to effect compliance with the reasonable accommodation/modification provisions of Section 504 of the Rehabilitation Act of 1973, the Fair Housing Act, as amended, and Title II of the Americans with Disabilities Act. Failure to comply with the reasonable accommodations law may result in a violation of fair housing laws and the payment of damages to the complainant.
- D. Retaliation against any individual who has exercised their right to request a reasonable accommodation/modification is prohibited.

**II. PROCEDURES**

It shall be the responsibility of all Office, Branch, Project, and Unit supervisors to disseminate or communicate this policy to all staff in a timely and appropriate manner. The HPHA Compliance Office shall have a Section 504/Fair Housing Officer who is responsible for monitoring the implementation of these policies, and recommending changes/updates to the HPHA's policy on non-discrimination.

**A. Eligibility**

In order to be eligible for a reasonable accommodation and/or modification, an individual must be considered an individual with a disability by federal and/or state law. A disabled person or person with a disability is defined as someone who:

1. Has a physical or emotional impairment which substantially limits one or more major life activities (functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working. This list is not exhaustive.);
2. Is regarded as having such an impairment; or
3. Has a record of such an impairment.

The manager/supervisor or designated person receiving the request must explain to the individual their responsibility to provide the

appropriate request and verifications pertinent to the reasonable accommodation request when the disability and/or need for the accommodation are/is not obvious or apparent.

The HPHA should not inquire as to the nature and severity of an individual's disability. The HPHA should, however, explain to the individual the HPHA's rights to request relevant supplemental information, if the information submitted does not clearly explain the nature of the disability (for the purposes of verifying that the individual meets the Fair Housing Act's definition of disabled, when it is not "obvious or readily known"), need for accommodation, or does not otherwise clarify how the requested accommodation will assist the individual.

## **B. Process**

1. A person with a disability does not need to personally make the reasonable accommodation request; the request can be made by a family member or someone else who is acting on his/her behalf. Staff may also assist an individual in completing the request form.

A reasonable accommodation request can be made orally or in writing. It is required that the staff person receiving the oral request, document the request in writing. This will help prevent misunderstandings regarding what is being requested, or whether the request was made.

If an oral request is made to a staff person who is not designated as a person to receive such requests, the staff person will as soon as practicable report the request to their supervisor or designated person to follow up with the person orally requesting a reasonable accommodation or modification.

2. Verification through a third party is the responsibility of the Asset Management Project, Branch, Section, or Office receiving the request. If additional information is needed a letter should be sent to the individual requesting the additional information or arranging to meet with the individual. Documentation is important to show the interactive process between HPHA and the individual.

Any request for which the individual's disability is "obvious or readily known" and the nexus between the disability request is

also "obvious or readily known" the HPHA shall not require additional verification to approve any request for reasonable accommodation or modification.

The person requesting a reasonable accommodation/modification may be asked to sign an authorization form to allow the HPHA to verify the need for an accommodation, whether the request is made in writing, orally, or on behalf of another. The person may refuse authorization. If authorization is refused, the request may be denied due to the HPHA's inability to verify the need for the accommodation.

3. Any request for minor accommodations, or for which the individual's disability is "obvious or known" and the nexus between the disability and the request is also "obvious or known" may be approved by the Project Manager and submitted to the Compliance Office within 5 working days of that approval, except where a request for reasonable modification would exceed \$1,000.00. Where a request for reasonable modification would exceed \$1,000.00, the Project Manager shall forward that request to the Compliance Office for approval.

For example, the approval of grab bars for a mobility impaired person, strobe lights for a hearing impaired person, or assistive/service animal for a vision impaired person may be approved by the Project Manager without prior consultation with the Compliance Office. All approved or denied requests, however, must be submitted within 5 working days to the Compliance Office for tracking and compliance monitoring.

4. If a person's disability is not "obvious or readily known", the disability must be verified. Once the disability has been verified the request must be faxed to the Compliance Office to determine whether a request is reasonable and necessary.
5. Upon determination, the Compliance Office will respond in writing at the address listed on the request form or in a manner understandable to the individual within 20 working days from the date of request, unless there is a need for additional verification or a delay in receiving the authorization and/or response from the individual. Approvals of minor accommodations and modifications delegated to Project Managers in #3 above will be communicated to the individual by the Project Manager.

6. HPHA will make accommodations and/or modifications that are both reasonable and necessary to afford an individual with a disability equal opportunity.
7. HPHA does not by law have to honor a request for reasonable accommodations which would result in:
  - a. A fundamental alteration in the nature of the program, which means that management does not have to provide services which are not presently being provided. In such a case, the individual may obtain service(s) on his or her own.
  - b. An undue financial and administrative burden. An undue financial burden means an accommodation which cannot be accomplished without a substantial financial investment which is prohibited by the nature and size of the program or could be accomplished only with a rent increase (prohibited by HUD) or a reduction in benefits and/or services to other tenants. An undue administrative burden means the accommodation would not easily be accomplished with existing staff and would require the hiring of additional staff. If the request requires staff to invest more than ten (10) hours per month, it is an administrative burden.
8. If an accommodation request falls into one of the two categories in #7 above, management will endeavor to identify an equally effective means of meeting the individual's need, not on preference.

Management may also, where a request is denied for reasons permitted by law, allow the individual to make modifications at their own expense. In some cases, HPHA may require the individual to escrow money so that any modification made can be restored at the conclusion of an individual's tenancy.

9. Approved requests for reasonable accommodations and modifications will be addressed within a reasonable time by the appropriate staff, taking into consideration the resources available at the time. The requestor shall be kept informed of the status of any approved requests.

10. Management will allow service animals essential for a physical or emotional disability, and may verify the need for this accommodation if the requestor's disability is not "obvious or known", or the need for the accommodation is not "obvious or known". The tenant is responsible for the conduct of the service animal at all times in a manner consistent with the lease.
11. If an individual believes that his/her reasonable accommodation request has been improperly handled or denied, the individual should contact the HPHA's Section 504/Fair Housing Officer at:

Kiriko U. Oishi  
Section 504/Fair Housing Officer  
P.O. Box 17907  
Honolulu, Hawaii 96817  
Telephone: (808) 832-4680  
TTY: (808) 832-6083

12. This reasonable accommodation and modification policy and procedures also applies to employees of HPHA with disabilities that meet the definition of a person with a disability contained in this policy. Employees of HPHA with disabilities shall, subject to the limitations described in #6 above, be eligible for reasonable accommodations or modifications that will permit them to perform the essential functions of the job.
13. Consideration of all accommodation and/or modification requests shall be made on a case-by-case basis.
14. Individuals who believe they have been discriminated against on the basis of their disability may bring their complaint to the HPHA Section 504/Fair Housing Officer listed in #11 above, and may also file a complaint alleging discrimination with:

Office of Fair Housing and Equal Opportunity  
U.S. Department of Housing and Urban Development  
451 Seventh Street, S.W. Room 5204  
Washington, D.S. 20410

Or, by completing the on-line complaint form available on the HUD internet site: <http://www.hud.gov>

Employees of HPHA and applicants for employment with HPHA who believe they have been discriminated against on the basis of their disability may also file a complaint alleging discrimination with:

U.S. Equal Employment Opportunity Commission  
Roybal Federal Building  
255 East Temple St., 4th Floor  
Los Angeles, CA 90012  
Phone: 1-800-669-4000  
TTY: 1-800-669-6820

III. VIOLATION OF POLICY

Employees of HPHA who fail to comply with this policy and procedures may be subject to disciplinary action, up to and including discharge, in accordance with the respective collective bargaining agreement.

IV. IMPLEMENTATION

This policy shall be effective as of the date of approval and shall remain in effect until cancelled or superseded.

Attachment: Acknowledgment (Appendix A)