Standards for "Near UFAS-Compliant Units" to be Created Pursuant to Consent Decree

To constitute "near UFAS-compliant" units as described in paragraph 21 of this Consent Decree, dwelling units in this category shall fully comply with the Uniform Federal Accessibility Standards in all respects with the exception of certain specific UFAS provisions and certain general dimension requirements. These specific provisions and dimension requirements are set forth below. In addition, as set forth below in section C of this document, in some circumstances the modification of certain designated UFAS violations that exist in housing units that are occupied on the effective date of this Decree may be deferred until a later date upon request of the tenants currently occupying those units, and the unit may still be considered an eligible "near UFAS-compliant" unit.

A. Exemption from Compliance with Certain Specific Provisions

Dwelling Units to be considered "Near UFAS-compliant" units are exempt from the following specific UFAS provisions:

Entire Unit

1.	4.34.2(2):	Accessible spaces shall have maneuvering space complying with 4.2.2 and 4.2.3 and surfaces complying with 4.5.

Kitchens:

2.	4.34.6.1:	Clearance. Clearances between all opposing base cabinets, counter tops, appliances, or walls shall be 40 in (1015 mm) minimum, except in U_shaped kitchens, where such clearance shall be 60 in (1525 mm) minimum.
3.	4.34.6.2:	Clear Floor Space. A clear floor space at least 30 in by 48 in (760 mm by 1220 mm) complying with 4.2.4 that allows either a forward or a parallel approach by a person in a wheelchair shall be provided at all appliances in the kitchen, including the range or cooktop, oven, refrigerator/freezer, dishwasher, and trash compactor. Laundry equipment located in the kitchen shall comply with 4.34.7.
4.	4.34.6.4(2):	Base cabinets, if provided, shall be removable under the full 30 in (760 mm) minimum frontage of the counter. The finished floor shall extend under the counter to the wall.

5. 4.34.6.4(3): Counter thickness and supporting structure shall be 2 in (50 mm) maximum over the required clear area.

6. 4.34.6.4(4): A clear floor space 30 in by 48 in (760 mm by 1220 mm) shall allow a forward approach to the counter. Nineteen inches (485 mm) maximum of the clear floor space may extend underneath the counter. The knee space shall have a minimum clear width of 30 in (760 mm) and a minimum clear depth of 19 in (485 mm).

7. 4.34.6.5(3): The depth of a sink bowl shall be no greater than 6_1/2 in (165 mm). Only one bowl of double or triple bowl sinks needs to meet this requirement.

8. 4.34.6.5(5): Base cabinets, if provided, shall be removable under the full 30 in (760 mm) minimum frontage of the sink and surrounding counter. The finished flooring shall extend under the counter to the wall.

9. 4.34.6.5(6): Counter thickness and supporting structure shall be 2 in (50 mm) maximum over the required clear space.

10. 4.34.6.5(7): A clear floor space 30 in by 48 in (760 mm by 1220 mm) shall allow forward approach to the sink. Nineteen inches (485 mm) maximum of the clear floor space may extend underneath the sink. The knee space shall have a clear width of 30 in (760 mm) and a clear depth of 19 in (485 mm).

Bathrooms:

11. 4.19.2: Height and Clearances. Lavatories shall be mounted with the rim or counter surface no higher than 34 in (865 mm) above the finished floor. Provide a clearance of at least 29 in (735 mm) from the floor to the bottom of the apron. Knee and toe clearance shall comply with Fig. 31.

12. 4.19.3: Clear Floor Space. A clear floor space 30 in by 48 in (760 mm by 1220 mm) complying with 4.2.4 shall be provided in front of a lavatory to allow forward approach. Such clear floor space shall adjoin or overlap an accessible route and shall extend a maximum of 19 in (485 mm) underneath the lavatory (see Fig. 32).

13. 4.19.4: Exposed Pipes and Surfaces. Hot water and drain pipes under lavatories shall be insulated or otherwise covered.

14. 4.19.6: Mirrors. Mirrors shall be mounted with the bottom edge of the reflecting surface no higher than 40 in (1015 mm) from the floor (see Fig. 31).

15. 4.21.7: Curbs. If provided, curbs in shower stalls 36 in by 36 in (915 mm by 915 mm) shall be no higher than ½ in (13 mm). Shower stalls that are 30 in by 60 in (760 mm by 1525 mm) shall not have curbs.

Dwelling unit bathrooms in additional units shall be subject to the following **partial** exemptions from specific UFAS provisions:

1. For the water closet rear grab bar only:[1]

   4.34.5.2(3): Structural reinforcement or other provisions that will allow installation of grab bars shall be provided in the locations shown in Fig. 47(b). If provided, grab bars shall be installed as shown in Fig. 29 and shall comply with 4.26.

2. In partial modification of the requirements of UFAS 4.34.5.2(1), the distance between the water closet centerline and the sidewall must be no less than 16" and no greater than 18".
   (Note: The exemption to general dimensions set forth in Section B of this document does not apply to this modified requirement.)

B. Exemption from Compliance with Certain General Dimension Requirements

To constitute "near UFAS-compliant units" under our Consent Decree, dwelling units may vary from compliant dimensions in design by up to (and no more than) 1" (one inch), except in the following Sections, in which they may vary from compliant dimensions by up to (and no more than) 1/4" (one quarter inch):

1. 4.3.8 Changes in Levels

2. 4.5.2 Changes in Levels.

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[1] While the water closet side grab bar is not exempt from UFAS 4.34.5.2(3), the requirements set out in this provision may be modified with respect to the water closet side grab bar in near UFAS-compliant units as follows:

The water closet side grab bar shall be no less than 39" long (as opposed to 42"). Upon approval by the United States of a prototype to be provided by HABC, an extension or pull down side grab bar may be used.

3. 4.26.2 Size and Spacing of Grab Bars and Handrails.

C. Potential Deferral upon Tenants' Request of Requirement that HABC Modify Certain Noncompliant Items in Occupied Housing Units

As described in paragraph 23 of the Consent Decree, upon a tenant's request and after meeting certain conditions, HABC may defer certain designated modification(s) in occupied housing units until that household vacates the unit, or until six (6) years from the effective date of this Consent Decree, whichever is **earlier**. The designated modifications that may potentially be deferred are the following:

Bathrooms:

Re: UFAS Provision 4.34.5.2(1):

Modification of towel bars that protrude into the required clear floor space around water closets in violation of UFAS

Re: UFAS Provision 4.34.5.4(4):

Modification of faucets and other controls in bathtubs that are centered (as opposed to offset) in violation of UFAS

Kitchens:

Re: UFAS Provisions 4.34.6.4(1) and 4.34.6.5(1):

Modification of counter tops/work surfaces and sinks that are above 34" in height in violation of UFAS

Re: UFAS Provision 4.34.6.10(1):

Modification of wall cabinets in which the top of the lowest shelf is above a maximum height of 49" in violation of UFAS

*** Other than the specific exemptions from UFAS requirements noted herein, the design and construction of all HABC dwelling units must comply with all applicable federal, state, and local laws, including state and local building codes.

Immediate Needs Plan

1. **Immediate Needs Plan—Purpose and Definition.**

   a. The Immediate Needs Plan is meant to address HABC residents and designated applicants[1] who have immediate needs because a household member has a disability. An immediate need refers to a family (including a family unit of one) residing in public housing that has a family member with a disability who: a) lacks access to a toilet; b) lacks access to a shower or a bathtub that can be used by a person with a disability; c) lacks access to the kitchen unless the person with the disability is a minor child under age 8 years; d) lacks access to a bedroom; e) lacks access to a bedroom occupied by a minor child/children for whom the person with a disability provides supervision or has child care responsibilities; f) lacks the ability to enter or exit the unit without assistance; or g) is at a substantial health risk, as verified by a health care professional, due to the conditions of the current unit. ("Physical Accessibility" is not the only trigger for the immediate needs category).

   b. As used in this policy, a person with a disability "lacks access" to a room or part of a housing unit if the person is denied the opportunity to independently use such room/part of unit for the function for which it is commonly intended (e.g. toileting, bathing, cooking or obtaining food, sleeping, entry and egress).

   c. This Immediate Needs Plan shall begin immediately and remain in effect until HABC has completed the creation of the total number of UFAS compliant accessible public housing units required under the Consent Decree entered in *Rickey Bailey et al. v. HABC* on **[date entered by court]**.

2. **Response to the Family's Immediate Needs.**

   a. Immediate Needs Meeting with the Family

[1] Designated applicants shall include families with disabilities who reached the top of HABC's public housing waiting list since January 1, 1998 and were offered one or more HABC public housing units but did not lease a unit because there was no unit available that met the family's accessibility needs.

HABC (Family Support Services, Housing Managers and Engineering and Construction) will conduct a meeting at the family's current unit with the family identified as having immediate needs. The purpose of the meeting is to determine the accessibility features required for the current unit to be useable and accessible to the family and whether HABC can make such modifications. HABC will also determine whether the current state of the unit is a threat to the health and safety of any family member. The "Immediate Needs Meeting" (the "meeting") shall occur within ten (10) working days of HABC receiving notification or otherwise becoming aware that a family may meet the definition of immediate needs. HABC may become aware of the immediate needs of a family through written or oral notification from the family or an advocate, through re-certification documentation or staff inspection and observation. The HABC team will work with the family to properly identify both the needs and the range of options that will address the family's immediate needs. The family may invite others to participate in the development of the Plan. Family Support Services may assess the family's service needs. HABC shall ensure that the family receives a summary of the HABC Immediate Needs Policy at the Immediate Needs Meeting. The goal of the meeting is to identify and implement solutions, while working collaboratively with the family with immediate needs. HABC will honor the family's preferences whenever possible.

b. Creation of a Plan to Address Individual Families' Immediate Needs

HABC remains obligated to develop an interim solution for a family with immediate needs until the family no longer has immediate needs as set forth in 1.a. Each family identified as having immediate needs will also be offered permanent solutions (as provided herein) if the individual family plan does not fully and permanently address the family's identified disability related needs. Provided, however, that HABC is deemed to have met its obligation for providing an interim solution if HABC has offered the temporary options specified by individual family plan and all options have been rejected by the family, and any grievance process has been exhausted. HABC remains obligated to offer a permanent solution.

A family may accept a individual family plan that satisfies part of their immediate needs, as long as HABC has offered an individual family plan to fully address the family's immediate needs.

(i) Within five (5) days of HABC receiving notification or otherwise becoming aware of a family who may have immediate needs, HABC shall notify the family in writing that it is aware of the immediate need and that HABC will be arranging the meeting referenced in 2.a *above* at a mutually convenient time.

(ii) Within ten (10) working days of HABC receiving notification or otherwise becoming aware that a family may have immediate needs, HABC shall conduct the meeting referenced in 2.a *above* at a mutually convenient time.

(iii) Within fourteen (14) working days after the initial meeting, HABC shall provide the family with a written plan (the individual family plan) to be based upon the HABC team's observations and assessment of the unit and the family's articulated preferences. This individual family plan will identify the temporary and permanent solutions available for the family.

(iv) The family with immediate needs will have five (5) working days from receipt of the written individual family plan to notify HABC of its choice. HABC will continue to work with the family who does not respond within five (5) working days. HABC shall provide written confirmation to the family of the family's chosen option.

(v) Unless otherwise indicated, HABC shall begin implementation of whatever option the family has chosen, and shall have completed the implementation of the individual family plan within twenty (20) working days of the date the family selects the option.

3. Immediate Needs Interim Solutions

The following options will be offered:

a. Reasonable Accommodations/Modifications in the Current Unit

If remaining in the unit is practicable through the provision of temporary reasonable accommodations/modifications that can be accomplished at a cost not exceeding $5000 and within a timeframe not exceeding twenty (20) working days, then HABC shall offer this option to the family in order to address the family's immediate needs. If the timeframe within which the temporary accommodations can be made exceeds twenty (20) working days, but not more than thirty (30) working days, HABC shall advise the family of the approximate number of additional days it will take to complete the temporary accommodations/modifications and provide the family with the opportunity to:

(i) Choose another option. If the family selects another option, the timelines in 2.b(v) will apply; or

(ii) Continue with the temporary accommodations/modifications despite the delay. If the family chooses to remain in the current unit, and the completion of the modifications exceeds thirty (30) working days, beginning after the thirtieth (30^{th}) working day HABC shall abate the rent pro rata until the temporary accommodations/modifications are complete, provided that the rent abatement will not be available to the extent that any delay has been caused by the family.

b. Reasonable Accommodations/Modifications in the Current Unit with Supportive Services.

This option is identical to 3.a. However, if supportive services are necessary for the family to safely occupy and utilize the unit to the greatest possible extent, HABC, at its discretion, will offer to provide supportive services such as a day attendant, a live-in aide or other means of support in order to temporarily accommodate that family's immediate needs. If supportive services are needed, the services will be in place at the time that the temporary reasonable accommodations/modifications are completed.

(i) If the accommodations/modifications are not completed within thirty (30) working days, HABC will nonetheless ensure that support services are in place if the family chooses to remain in the unit as set forth in 3.a(ii) *above*.

(ii) Support services will remain in place until HABC implements a permanent solution for the family.

c. Support Services even if Temporary Accommodations are not Feasible.

If HABC is not able to temporarily accommodate a family because the current unit cannot be modified, there are no acceptable units for transfer, and the family is not interested in a Section 8 voucher, HABC shall offer temporary support services if necessary for the family to safely occupy and utilize their unit to the fullest possible extent, until a permanent solution is fully implemented.

d. Transfer

An offer to transfer the family to an identified unit that meets the family's immediate needs or to a unit that can be readily modified to address the needs of the family.

Family Split Option--If the only unit available through a transfer option is too small for the entire family, but HABC could separately house the

family while addressing the immediate needs of the family, HABC, where appropriate (i.e. there are adult children who are living in the household who are not serving as the caretaker of the person with the disability), may offer to split the family temporarily so that the family member with the disability may be placed in the unit that addresses the immediate need. (Any family splits will be conducted in accordance with the policies and procedures set forth in the Admissions & Continued Occupancy Plan.) This option is only to be used if the family clearly prefers this alternative and HABC is able to house all family members. HABC will assess whether the family needs support services as set forth in 3.c.

e. Housing Choice or Section 8 Voucher

An offer to provide the family with a Section 8 project-based or tenant-based voucher. As part of this option HABC will apprise the family of the distinctions between the Section 8 program and the public housing program, including all of their obligations as a potential Section 8 voucher holder/tenant; will explain that a family who accepts a Section 8 voucher will be considered permanently relocated, and that if a family who makes the choice to utilize a Section 8 voucher wants to return to Public Housing, that family will have to reapply to Public Housing and will be placed at the bottom of the waiting list.

(i) If a family chooses this option, the family will remain a resident of public housing until the family finds a unit that passes the HABC inspection, a HAP contract has been executed between HABC and the owner/landlord, and the family and the owner/landlord have executed a lease agreement.

(ii) HABC will provide for modifications up to $5000 and security deposits.

f. If no other options are viable, HABC shall provide off-site accommodations that meet the immediate needs of the family. This option will detail how the off-site accommodations will provide for the family's needs, including, if applicable, cooking facilities, transportation costs to keep children in school, for access to medical services, employment, grocery stores and/or storage.

4. Permanent Solutions

a. To the extent the temporary accommodations/modifications do not fully resolve a family's disability-related needs, HABC shall ensure that the individual family plan identifies a permanent solution for the family and includes the timeframe for achieving the permanent solution.

b. HABC will offer at least one option, including but not limited to transfer to a UFAS unit, that can be achieved by August 15, 2004 or within nine (9) months of the date of the individual Family Plan, whichever is later. Permanent solutions that may take more than nine (9) months to achieve may also be offered with an explanation of the time it will take to achieve them. The family may then choose the permanent solution it wants from among those offered.

5. HABC will make reasonable accommodations/modifications at no cost to the family. For all options detailed in the Immediate Needs Plan requiring temporary or permanent relocations, HABC will provide relocation assistance in accordance with the Uniform Relocation Act (URA), including specific details of the individualized Relocation assistance that HABC will offer to each family. Relocation assistance will include moving expenses, utility connection fees, housing counseling, and a small dislocation allowance.

6. Family Grievance.

a. If a family feels that the range of options do not address their immediate needs or the family disagrees with the individual family plan, the family has the right to reject all or part of the plan. HABC will work with the family to resolve the family's concern(s). If this attempt is unsuccessful, the family has the right to an expedited grievance process. If a family disagrees with the individual family plan, they should contact the Fair Housing and Equal Opportunity Office at 410-361-9488 right away and ask for an informal hearing. The informal hearing shall be held within ten (10) working days of the family's request and the hearing officer will render the decision within five (5) working days of the informal hearing. The FHEO office is located at 417 E. Fayette Street, Suite 922, Baltimore, MD 21202.

b. Families may contact the Maryland Disability Law Center to talk to about their choices and/or for representation at the informal hearing. The Law Center is not part of HABC. The lawyers will keep all information private and confidential, and the service is free. The Law Center can be reached at (410) 727-6352, ext. 261.

7. The 504 Coordinator will supervise implementation of the Immediate Needs Plan.

Modifications to be Made to HABC Administrative Offices
417 East Fayette Street & 312 North Martin Luther King Boulevard

417 East Fayette Street

No.	Property Modifications	Deadline For Completion	Location	Modification Required
1	Lobby Counter	04/15/2004	1st Floor - Main Reception	Information counter is greater than 36" high at 52".
2	Signage	05/28/2004	All Floors - Room identification signs	Signs do not have raised characters.
3	Signage	05/28/2004	All Floors - Room identification signs	Signs are mounted between 69" and 75" above the floor, not at between 54" and 66" as required.
4	Signage	05/28/2004	9th Floor - Room identification signs	Sign is mounted 69" above the floor, not at between 54" and 66" as required.
5	Assistive Listening Dev.	05/29/2004	3rd Floor - Conference Rooms	There is no assistive listening device.
6	Door Hardware	05/29/2004	3rd Floor - 346	Knob lockset requires tight twisting or grasping.
7	Door Hardware	05/29/2004	3rd Floor - Conference Rooms	These rooms were constructed recently. Furniture blocks maneuvering space. Knob lockset requires tight twisting or grasping. (2 Locations)
8	Door Hardware	05/29/2004	3rd Floor - Hallway that Leads to 346	Interior door pressure greater than 5 lbs. at 10 lbs.
9	Door Hardware	05/29/2004	2nd Floor - 254	Knob lockset requires tight twisting or grasping.
10	Door Hardware	05/29/2004	2nd Floor - 265	Interior door pressure greater than 5 lbs. at 7 lbs.
11	Door Hardware	05/29/2004	2nd Floor - 265	Knob lockset requires tight twisting or grasping.
12	Door Hardware	05/29/2004	2nd Floor - Conference Room	Knob lockset requires tight twisting or grasping. (2 Locations)
13	Door Hardware	05/29/2004	2nd Floor - Office	Knob lockset requires tight twisting or grasping.
14	Door Hardware	05/29/2004	2nd Floor - Resident's Services Entrance	Knob lockset requires tight twisting or grasping.
15	Door Hardware	05/29/2004	4th Floor - 445	Knob lockset requires tight twisting or grasping.
16	Door Hardware	05/29/2004	4th Floor - Fiscal Hallway	Interior door pressure greater than 5 lbs. at 10 lbs.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
17	Door Hardware	05/29/2004	4th Floor - Fiscal Hallway	Knob lockset requires tight twisting or grasping.
18	Door Hardware	05/29/2004	4th Floor - Fiscal Operations Entrance	Knob lockset requires tight twisting or grasping.
19	Door Hardware	05/29/2004	9th Floor - 916, 920, and 921	Knob lockset requires tight twisting or grasping. (3 Locations)
20	Door Hardware	05/29/2004	13th Floor - 1342, Omsbudsman	Knob lockset requires tight twisting or grasping.
21	Door Hardware	05/29/2004	13th Floor - 1344	Knob lockset requires tight twisting or grasping.
22	Door Hardware	05/29/2004	13th Floor - Exective Offices Entrance	Door is propped open during business hours. However, the local fire code may require it to be shut. People are escorted to their destination but not to the toilet rooms or elevators. Knob lockset requires tight twisting
23	Door Hardware	05/29/2004	9th Floor - Fair Housing and Equal Opportunity Entrance	Knob lockset requires tight twisting or grasping.
24	Door Hardware & Movable Objects	05/29/2004	3rd Floor - Office	Furniture blocks maneuvering space. Knob lockset requires tight twisting or grasping.
25	Fiscal Operations	05/29/2004	4th Floor - Fiscal Hallway	Width of maneuvering space is insufficient beside the door on the designated accessible route side. It is less than 18" at 7".
26	Fiscal Operations	05/29/2004	4th Floor - Fiscal Hallway	Width of maneuvering space is insufficient beside the door on the room side. It is less than 12" at 6 1/4".
27	Fiscal Operations	05/29/2004	4th Floor - Fiscal Hallway	Telephone cord is less than 29"
28	Movable Objects	05/29/2004	9th Floors - Corridor	Clear width past copy machine is less than 32" at 30 1/2".
29	Movable Objects	05/29/2004	13th Floor	Trash receptacle below drinking fountain blocks required forward approach.
30	Movable Objects	05/29/2004	All Floors - All Toilet Rooms	Clear width past furniture is less than 32".
31	Reception Counter	05/29/2004	13th Floor - Reception	Information counter is greater than 36" high at 40 1/4".

No.	Property Modifications	Deadline For Completion	Location	Modification Required
32	Reception Counter	05/29/2004	4th Floor - Fiscal	Counter protrudes from the vertical surface more than 4" at 12 1/2" and its bottom edge is more than 27" above the floor at 39".
33	Reception Counter	05/29/2004	4th Floor - Fiscal Operations	Information counter is greater than 36" high at 44 1/2".
34	Reception Counter	05/29/2004	4th Floor - Fiscal Operations	Information counter is greater than 36" high at 43 1/2".
35	Pedestrian Corner	01/15/2005	Exterior - Fayette Street north side	Curb ramp is excessively sloped greater than 8.33% (1:12) at 9.7%.
36	Pedestrian Corner	01/15/2005	Exterior - Fayette Street north side	Excessive slope on flared side is greater than 8.33% at 19.9%.
37	Pedestrian Corner	01/15/2005	Exterior - Fayette Street south side	Curb ramp is excessively sloped greater than 8.33% (1:12) at 9.3%.
38	Pedestrian Corner	01/15/2005	Exterior - From northbound bus stop on Gay Street	Portions of path are sloped between 5% (1:20) and 8.33% (1:12) at 6.4% and are not constructed as a ramp.
39	Pedestrian Corner	01/15/2005	Exterior - From northbound bus stop on Gay Street	Path cross sloped greater than 2% (1:50) at 4%.
40	Pedestrian Corner	01/15/2005	Exterior - Gay Street west side	Curb ramp is excessively sloped greater than 8.33% (1:12) at 12.1%.
41	Pedestrian Corner	01/15/2005	Exterior - Gay Street west side	Excessive slope on flared side is greater than 8.33% at 17.5%.
42	Pedestrian Corner	01/15/2005	Exterior - Gay Street west side	There is an abrupt vertical rise of 1.5" where the transition must be smooth.
43	Pedestrian Corner	01/15/2005	Exterior - Westbound bus stop east of Gay Street to Gay Street	Path cross sloped greater than 2% (1:50) at 6%.
44	Pedestrian Corner	01/15/2005	Exterior - Westbound bus stop east of Gay Street to Gay Street	Portions of path are cross sloped greater than 2% (1:50) at 6.6%.
45	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	Interior door pressure greater than 5 lbs. at 8 lbs.
46	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	Closer operates less than 3 seconds at 1 1/2 seconds.
47**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	This building was contructed before 1988. Therefore, they may use the alternate stall design when it is impractical to use the standard stall design. Alternate stall is 40" wide, not 36" wide as required.

**In lieu of making the toilet modifications listed in items 47 through 162, HABC may create 1 fully UFAS compliant unisex toilet room on each of the following floors at 417 East Fayette Street: Floors 3, 5, 7, 9, 11, 13.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
48**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	Insufficient maneuvering space outside the stall. There should be 18" beside the door and there is only 3".
49**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	Twisting latching mechanism on stall.
50**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	Coat hook in stall is mounted above 48" at 67 1/2".
51**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	Water closet is more than 18" from the wall at 22 3/4".
52**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	Flush valve handle is mounted on the narrow side.
53**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	Toilet paper dispenser mounted on the wrong wall.
54**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	Toilet paper lacks perforations. Therefore, it cannot be torn without tight grasping.
55**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	Faucet controls require tight twisting or grasping to operate.
56**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	There is no insulation on drain pipe.
57**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Women's	Sanitary Napkin Dispenser controls required tight grasping.
58**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Men's	Interior door pressure greater than 5 lbs. at 10 lbs.
59**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Men's	Paper towel dispenser protrudes from the vertical surface more than 4" at 8 1/2" and its bottom edge is more than 27" above the floor at 29".
60**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Men's	This building was contructed before 1988. Therefore, they may use the alternate stall design when it is impractical to use the standard stall design. Alternate stall is 38" wide, not 36" wide as required.
61**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Men's	Twisting latching mechanism on stall.
62**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Men's	Coat hook in stall is mounted above 48" at 67 1/2".
63**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Men's	There is no rear grab bar.
64**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Men's	Toilet paper dispenser provides less than 1 1/2" clearance below the grab bar.

**In lieu of making the toilet modifications listed in items 47 through 162, HABC may create 1 fully UFAS compliant unisex toilet room on each of the following floors at 417 East Fayette Street: Floors 3, 5, 7, 9, 11, 13.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
65**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Men's	Toilet paper lacks perforations. Therefore, it cannot be torn without tight grasping.
66**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Men's	Faucet controls require tight twisting or grasping to operate.
67**	Restrooms on 1 floor	10/30/2004	3rd Floor - Toilet, Men's	There is no insulation on drain pipe.
68**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	Sign is mounted 69" above the floor, not at between 54" and 66" as required.
69**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	Sign has incised letters which are tactile. Therefore, sign must have raised characters. Also, the stroke- width- to- height ratio is not between 3:5 and 1:10.
70**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	This building was contructed before 1988. Therefore, they may use the alternate stall design when it is impractical to use the standard stall design. Alternate stall is 38" wide, not 36" wide as required.
71**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	Alternate stalls must be 36" wide or at least 48" wide. If more than 36" wide, it must have a rear grab bar. There is no rear grab bar.
72**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	Water closet more than 18" from the wall at 20".
73**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	Faucet controls require tight twisting or grasping to operate.
74**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	There is no insulation on drain pipe.
75**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Men's	Interior door pressure greater than 5 lbs. at 16 lbs.
76**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Men's	Paper towel dispenser protrudes from the vertical surface more than 4" at 8 1/2" and its bottom edge is more than 27" above the floor at 29".
77**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Men's	This building was contructed before 1988. Therefore, they may use the alternate stall design when it is impractical to use the standard stall design. Alternate stall is 38" wide, not 36" wide as required.
78**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Men's	Twisting latching mechanism on stall.
79**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Men's	Coat hook in stall is mounted above 48" at 67 1/2".

**In lieu of making the toilet modifications listed in items 47 through 162, HABC may create 1 fully UFAS compliant unisex toilet room on each of the following floors at 417 East Fayette Street: Floors 3, 5, 7, 9, 11, 13.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
80**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Men's	There is no rear grab bar.
81**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Men's	Water closet is more than 18" from the wall at 19".
82**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Men's	Toilet paper dispenser provides less than 1 1/2" clearance below the grab bar.
83**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Men's	Toilet paper lacks perforations. Therefore, it cannot be torn without tight grasping.
84**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Men's	Faucet controls require tight twisting or grasping to operate.
85**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Men's	There is no insulation on drain pipe.
86**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	Interior door pressure greater than 5 lbs. at 13 lbs.
87**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	Insufficient maneuvering space outside the stall. There should be 18" beside the door and there is only 2 1/2".
88**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	This building was contructed before 1988. Therefore, they may use the alternate stall design when it is impractical to use the standard stall design. Alternate stall is 38" wide, not 36" wide as required.
89**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	Twisting latching mechanism on stall.
90**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	Coat hook in stall is mounted above 48" at 67 1/2".
91**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	Water closet is more than 18" from the wall at 23".
92**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	Flush valve handle is mounted on the narrow side.
93**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	Toilet paper dispenser mounted on the wrong wall.
94**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	Toilet paper lacks perforations. Therefore, it cannot be torn without tight grasping.
95**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	Faucet controls require tight twisting or grasping to operate.
96**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	There is no insulation on drain pipe.
97**	Rest of Restrooms	12/07/2004	2nd Floor - Toilet, Women's	Sanitary Napkin Dispenser controls required tight grasping.

**In lieu of making the toilet modifications listed in items 47 through 162, HABC may create 1 fully UFAS compliant unisex toilet room on each of the following floors at 417 East Fayette Street: Floors 3, 5, 7, 9, 11, 13.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
98**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	Interior door pressure greater than 5 lbs. at 11 lbs.
99**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	Closer operates less than 3 seconds at 2 seconds.
100**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	Paper towel dispenser protrudes from the vertical surface more than 4" at 8 1/2" and its bottom edge is more than 27" above the floor at 29".
101**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	This building was contructed before 1988. Therefore, they may use the alternate stall design when it is impractical to use the standard stall design. Alternate stall is 38" wide, not 36" wide as required.
102**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	Twisting latching mechanism on stall.
103**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	Coat hook in stall is mounted above 48" at 67 1/2".
104**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	There is no rear grab bar.
105**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	Water closet is moare than 18" from the wall at 19 1/2".
106**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	Toilet paper dispenser provides less than 1 1/2" clearance below the grab bar.
107**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	Toilet paper lacks perforations. Therefore, it cannot be torn without tight grasping.
108**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	Faucet controls require tight twisting or grasping to operate.
109**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Men's	There is no insulation on drain pipe.
110**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	Interior door pressure greater than 5 lbs. at 7 lbs.
111**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	This building was contructed before 1988. Therefore, they may use the alternate stall design when it is impractical to use the standard stall design. Alternate stall is 41" wide, not 36" wide as required.
112**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	Insufficient maneuvering space outside the stall. There should be 18" beside the door and there is only 2 1/2".
113**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	Twisting latching mechanism on stall.

**In lieu of making the toilet modifications listed in items 47 through 162, HABC may create 1 fully UFAS compliant unisex toilet room on each of the following floors at 417 East Fayette Street: Floors 3, 5, 7, 9, 11, 13.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
114**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	Coat hook in stall is mounted above 48" at 67 1/2".
115**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	Water closet is more than 18" from the wall at 23".
116**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	Flush valve handle is mounted on the narrow side.
117**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	Toilet paper dispenser mounted on the wrong wall.
118**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	Toilet paper lacks perforations. Therefore, it cannot be torn without tight grasping.
119**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	Faucet controls require tight twisting or grasping to operate.
120**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	There is no insulation on drain pipe.
121**	Rest of Restrooms	12/07/2004	4th Floor - Toilet, Women's	Sanitary Napkin Dispenser controls required tight grasping.
122**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	Paper towel dispenser protrudes from the vertical surface more than 4" at 8 1/2" and its bottom edge is more than 27" above the floor at 32".
123**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	Twisting latching mechanism on stall.
124**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	Coat hook in stall is mounted above 48" at 67 1/2".
125**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	Toilet paper dispenser provides less than 1 1/2" clearance below the grab bar.
126**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Men's	Toilet paper lacks perforations. Therefore, it cannot be torn without tight grasping.
127**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	Interior door pressure greater than 5 lbs. at 9 lbs. (3 Locations)
128**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	Closer operates less than 3 seconds at 2 1/2 seconds.
129**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	This building was contructed before 1988. Therefore, they may use the alternate stall design when it is impractical to use the standard stall design. Alternate stall is 41" wide, not 36" wide as required.
130**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	Insufficient maneuvering space outside the stall. There should be 18" beside the door and there is only 2 1/2".

**In lieu of making the toilet modifications listed in items 47 through 162, HABC may create 1 fully UFAS compliant unisex toilet room on each of the following floors at 417 East Fayette Street: Floors 3, 5, 7, 9, 11, 13.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
131**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	Twisting latching mechanism on stall.
132**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	Coat hook in stall is mounted above 48" at 67 1/2".
133**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	Water closet is more than 18" from the wall at 22".
134**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	Flush valve handle is mounted on the narrow side.
135**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	Toilet paper dispenser mounted on the wrong wall.
136**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	Toilet paper lacks perforations. Therefore, it cannot be torn without tight grasping.
137**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	Faucet controls require tight twisting or grasping to operate.
138**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	There is no insulation on drain pipe.
139**	Rest of Restrooms	12/07/2004	9th Floor - Toilet, Women's	Sanitary Napkin Dispenser controls required tight grasping.
140**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Men's	Interior door pressure greater than 5 lbs. at 13 lbs.
141**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Men's	Paper towel dispenser protrudes from the vertical surface more than 4" at 8 1/2" and its bottom edge is more than 27" above the floor at 32".
142**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Men's	Stall door clear opening less than 32" at 30".
143**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Men's	This building was contructed before 1988. Therefore, they may use the alternate stall design when it is impractical to use the standard stall design. Alternate stall is 38" wide, not 36" wide as required.
144**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Men's	Twisting latching mechanism on stall.
145**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Men's	Coat hook in stall is mounted above 48" at 67 1/2".
146**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Men's	There is no rear grab bar.
147**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Men's	Toilet paper dispenser provides less than 1 1/2" clearance below the grab bar.
148**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Men's	Toilet paper lacks perforations. Therefore, it cannot be torn without tight grasping.

**In lieu of making the toilet modifications listed in items 47 through 162, HABC may create 1 fully UFAS compliant unisex toilet room on each of the following floors at 417 East Fayette Street: Floors 3, 5, 7, 9, 11, 13.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
149**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Men's	Faucet controls require tight twisting or grasping to operate.
150**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Men's	There is no insulation on drain pipe.
151**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	Interior door pressure greater than 5 lbs. at 9 lbs.
152**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	This building was contructed before 1988. Therefore, they may use the alternate stall design when it is impractical to use the standard stall design. Alternate stall is 39 1/2" wide, not 36" wide as required.
153**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	Insufficient maneuvering space outside the stall. There should be 18" beside the door and there is only 2 1/2".
154**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	Twisting latching mechanism on stall.
155**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	Coat hook in stall is mounted above 48" at 67 1/2".
156**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	Water closet is more than 18" from the wall at 22 1/2".
157**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	Flush valve handle is mounted on the narrow side.
158**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	Toilet paper dispenser mounted on the wrong wall.
159**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	Toilet paper lacks perforations. Therefore, it cannot be torn without tight grasping.
160**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	Faucet controls require tight twisting or grasping to operate.
161**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	There is no insulation on drain pipe.
162**	Rest of Restrooms	12/07/2004	13th Floor - Toilet, Women's	Sanitary Napkin Dispenser controls required tight grasping.
163	Visual Alarms	01/23/2005	All Floors - Visual alarms	Flashing lights are only in the corridors.

**In lieu of making the toilet modifications listed in items 47 through 162, HABC may create 1 fully UFAS compliant unisex toilet room on each of the following floors at 417 East Fayette Street: Floors 3, 5, 7, 9, 11, 13.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
164	Entrance Ramp	01/26/05 is acceptable if the costs exceed $25,000 and HABC has to bid it. Otherwise 10/30/04.	Exterior	HABC vehicle was parked in this space during survey. During that time, at least one person with a disability was dropped-off in the busy street because there was no room at the curb. Passenger drop-off access aisle is not apparent and is not identified.
165	Entrance Ramp	01/26/05 is acceptable if the costs exceed $25,000 and HABC has to bid it. Otherwise 10/30/04.	Exterior	Insufficient width for an access aisle to provide designated accessible drop-off. Tree obstructs transferring directly onto the sidewalk.
166	Entrance Ramp	01/26/05 is acceptable if the costs exceed $25,000 and HABC has to bid it. Otherwise 10/30/04.	Exterior	There is a curb to the walkway, but no curb cut.
167	Entrance Ramp	01/26/05 is acceptable if the costs exceed $25,000 and HABC has to bid it. Otherwise 10/30/04.	Exterior	Passenger loading area cross-slope is greater than 2% (1:50) at 8.6%.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
168	Entrance Ramp	01/26/05 is acceptable if the costs exceed $25,000 and HABC has to bid it. Otherwise 10/30/04.	Exterior - Alley east side	Cross slope of curb ramp exceeds 2% (1:50) at 8.8%.
169	Entrance Ramp	01/26/05 is acceptable if the costs exceed $25,000 and HABC has to bid it. Otherwise 10/30/04.	Exterior - Crossing the alley	Path cross sloped greater than 2% (1:50) at 8.3%.
170	Entrance Ramp	01/26/05 is acceptable if the costs exceed $25,000 and HABC has to bid it. Otherwise 10/30/04.	Exterior - From passenger loading zone	Path cross sloped greater than 2% (1:50) at 4.9%.
171	Entrance Ramp	01/26/05 is acceptable if the costs exceed $25,000 and HABC has to bid it. Otherwise 10/30/04.	Exterior - From passenger loading zone to alley	Path cross sloped greater than 2% (1:50) at 6%.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
172	Entrance Ramp	01/26/05 is acceptable if the costs exceed $25,000 and HABC has to bid it. Otherwise 10/30/04.	Exterior - From sidewalk to entrance	Portions of path are sloped between 5% (1:20) and 8.33% (1:12) at 6.7% and are not constructed as a ramp.
173	Entrance Ramp	01/26/05 is acceptable if the costs exceed $25,000 and HABC has to bid it. Otherwise 10/30/04.	Exterior - From the alley to the entrance walkway	Portions of path are cross sloped greater than 2% (1:50) at 10.8%.
174	First 3 Elevators/ Remaining 3 Elevators	3 Elevators completed by 12/30/04 - Remaining Elevators completed by 9/10/05	All Floors - Elevators	The non-contact door safety reopening device is not present or isinoperable.
175	First 3 Elevators/ Remaining 3 Elevators	3 Elevators completed by 12/30/04 - Remaining Elevators completed by 9/10/05	All Floors - Elevators	The emergency communication device is mounted below 35" at 24".
176	First 3 Elevators/ Remaining 3 Elevators	3 Elevators completed by 12/30/04 - Remaining Elevators completed by 9/10/05	All Floors - Elevators	Elevator cab communication device requires tight grasping, pinching, or wrist twisting.

No.	Property Modifications	Deadline For Completion	Location	Modification Required
177	First 3 Elevators/ Remaining 3 Elevators	3 Elevators completed by 12/30/04 - Remaining Elevators completed by 9/10/05	All Floors - Elevators	The emergency communication device requires voice activation.
178	First 3 Elevators/ Remaining 3 Elevators	3 Elevators completed by 12/30/04 - Remaining Elevators completed by 9/10/05	All Floors - Elevators	Floor designations on elevator jambs are not mounted at 60" as required, but are mounted at 47".

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No.	Property Modifications	Deadline For Completion	Location	Modification Required
1		06/30/2004	1st Floor - Corridor door	Width of maneuvering space is insufficient beside the door on the designated accessible route side. It is less than 18" at 7".
2		06/30/2004	1st Floor - Main Entrance	Main entrance door pressure is greater than 5lbs at 17lbs.
3		06/30/2004	1st Floor - Offices	Furniture must be relocated to make at least one (1) office fully accessible for persons who use wheelchairs.
4		06/30/2004	1st Floor - Rehabilitation and Rent Payment Waiting Room	Interior door pressure greater than 5 lbs. at 18 lbs.
5		06/30/2004	1st Floor - Rehabilitation and Rent Payment Waiting Room	Closer operates less than 3 seconds at 1 1/2 seconds.
6		06/30/2004	1st Floor - Vestibule	Interior door pressure greater than 5 lbs. at 9 lbs.
7		06/30/2004	1st Floor - Toilet, Men's	Interior door pressure greater than 5 lbs. at 9 lbs.
8		06/30/2004	1st Floor - Toilet, Men's	Interior threshold is greater than 1/2" at 1".
9		06/30/2004	1st Floor - Toilet, Men's	Width of maneuvering space is insufficient beside the door on the designated accessible route side. It is less than 12" at 7".
10		06/30/2004	1st Floor - Toilet, Men's	Knee space height at lavatory is less than 29" at 27".
11		06/30/2004	1st Floor - Toilet, Men's	Width of knee space under lavatory is less than 30" because the trash receptacle is in the way.
12		06/30/2004	1st Floor - Toilet, Men's	Toilet seat cover dispenser is mounted too high at 67" where it should be at 54".
13		06/30/2004	1st Floor - Toilet, Women's	Interior door pressure greater than 5 lbs. at 9 lbs.
14		06/30/2004	1st Floor - Toilet, Women's	Interior threshold is greater than 1/2" at 1".
15		06/30/2004	1st Floor - Toilet, Women's	Width of maneuvering space is insufficient beside the door on the designated accessible route side. It is less than 12" at 7".
16		06/30/2004	1st Floor - Toilet, Women's	Sanitary napkin dispenser protrudes from the vertical surface more than 4" at 7" and its bottom edge is more than 27" above the floor at 34".

No.	Property Modifications	Deadline For Completion	Location	Modification Required
17		06/30/2004	1st Floor - Toilet, Women's	Water closet is more than 18" from wall at 19".
18		06/30/2004	1st Floor - Toilet, Women's	Knee space height at lavatory is less than 29" at 27".
19		06/30/2004	1st Floor - Toilet, Women's	Width of knee space under lavatory is less than 30" because the trash receptacle is in the way.
20		06/30/2004	1st Floor - Toilet, Women's	Toilet seat cover dispenser is mounted too high at 61" where it should be at 54".
21		06/30/2004	1st Floor - Toilet, Women's	Sanitary Napkin Dispenser controls required tight grasping.
22		10/30/2004	Exterior - East side of the driveway entrance	Curb ramp is excessively sloped greater than 8.33% (1:12) at 9.5%.
23		10/30/2004	Exterior - East side of the driveway entrance	Cross slope of curb ramp exceeds 2% (1:50) at 3.7%.
24		10/30/2004	Exterior - East side of the driveway entrance	Excessive slope on flared side is greater than 8.33% at 12.7%.
25		06/30/2004	Exterior - From curb ramp to walkway that is parallel to building	Portions of path are cross sloped greater than 2% (1:50) at 6.1%.
26		06/30/2004	Exterior - From parking	Curb ramp is excessively sloped greater than 8.33% (1:12) at 12.8%.
27		06/30/2004	Exterior - From parking	Excessive slope on flared side is greater than 8.33% at 18.8%.
28		06/30/2004	Exterior - Walkway that is parallel to building	Portions of path are cross sloped greater than 2% (1:50) at 3.9%.
29		06/30/2004	Exterior - West side of the driveway entrance	Curb ramp is excessively sloped greater than 8.33% (1:12) at 11.8%.
30		06/30/2004	Exterior - West side of the driveway entrance	Excessive slope on flared side is greater than 8.33% at 12%.

HOUSING AUTHORITY OF BALTIMORE CITY
REASONABLE ACCOMMODATIONS POLICY AND PROCEDURES

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HOUSING AUTHORITY OF BALTIMORE CITY

REASONABLE ACCOMMODATIONS POLICY AND PROCEDURES IN PUBLIC HOUSING

INTRODUCTION

This Reasonable Accommodation Policy and Procedures, comprised of **Part A and Part B,** sets forth the policy and procedures of the Housing Authority of Baltimore City ("**HABC**") in connection with making reasonable accommodations for qualified applicants or residents with disabilities for participation in HABC's public housing programs and activities. A copy of this Reasonable Accommodation Policy and Procedures is posted in the HABC Offices of Housing Applications and Section 8, 300 Cathedral Street, Baltimore, Maryland 21201, 410-396-4046 , and the Management Office at each public housing development. Additionally, a copy of this Reasonable Accommodation Policy and Implementation Procedures may be obtained upon request from the HABC Fair Housing and Equal Opportunity Office, 417 E. Fayette Street, Suite 922, Baltimore, Maryland 21202, 410-396-3246.

PART A. POLICY.

SECTION 1. DEFINITIONS.

1.1. The term "**ADA**" shall mean the Americans with Disabilities Act.

1.2. The term "**FHA**" shall mean the Fair Housing Act of 1968.

1.3. The term "**HABC**" shall mean the Housing Authority of Baltimore City.

1.4. The phrase "**individual with disabilities**" shall have the same meaning as the term "individual with handicaps" under 24 C.F.R. §8.3, as follows:

> **24 C.F.R. § 8.3. Definitions.**
>
> .....
>
> "Individual with handicaps" means any person who has a physical or mental impairment that substantially limits one or more major life activities; has a record of such an impairment; or is regarded as having such an impairment.

1.5. The term "**Policy**" shall mean Part A of this Reasonable Accommodation Policy and Procedure, as adopted by the HABC Board of Commissioners, and as may be amended.

1.6. The term "**Procedures**" shall mean Part B of this Reasonable Accommodation Policy and Procedure, as may be revised from time to time.

1.7. The term "**reasonable accommodation**" means a modification or change in HABC's rules, policies, practices, or services, that will provide the opportunity to participate in

HABC's programs and services and to meet HABC's essential requirements of tenancy to an otherwise eligible individual with a disability.

SECTION 2. POLICY STATEMENT.

HABC is committed to ensuring that its policies and practices do not deny individuals with disabilities the opportunity to participate in, or benefit from, nor otherwise discriminate against individuals with disabilities in connection with, the operation of HABC's housing services or programs, solely on the basis of such disabilities. Therefore, if an individual with a disability requires an accommodation, such as an accessible feature or modification to HABC policy, HABC will provide such accommodation, unless doing so would result in a fundamental alteration in the nature of the program or an undue financial or administrative burden. In such a case, HABC will make another accommodation that would not result in a financial or administrative burden.

SECTION 3. PURPOSE.

This Policy is intended to:

- communicate HABC's position regarding reasonable accommodations for persons with disabilities in connection with the agency's housing programs services, and policies;
- establish a procedural guide for implementing such Policy; and
- comply with applicable federal, state and local laws to ensure accessibility for persons with disabilities to housing programs, benefits and services administered by HABC.

SECTION 4. AUTHORITY.

The requirements of this Policy are based upon the following statutes or regulations:

- Section 504 of the Rehabilitation Act of 1973, as amended ("Section 504") prohibits discrimination on the basis of disability status and states that:

  "No qualified individual with handicaps shall, solely on the basis of handicap be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives Federal financial assistance from the Department";

- The Fair Housing Act ("FHA") prohibits discrimination in the sale, rental and financing of dwellings. The FHA requires reasonable accommodations in rules,

policies, practices, services and reasonable modifications to dwelling units and public common areas;

- Title II of the Americans With Disabilities Act ("**ADA**"), prohibits discrimination on the basis of disability status by public entities. Except as provided in §35.102 (b), of 28 CFR Part 35, the ADA applies to all services, programs and activities provided or made available by public entities (State and local governments); and

- Part 8, of Code of Federal Regulations, Title 24, Housing and Urban Development, entitled Non-Discrimination Based On Handicap In Federally Assisted Programs and Activities of the Department of Housing and Urban Development applies to recipients of federal funds and implements the requirements of the Rehabilitation Act.

SECTION 5. MONITORING AND ENFORCEMENT.

The HABC Fair Housing and Equal Opportunity Office ("**FH&EO Office**") is responsible for monitoring HABC's compliance with, and enforcing the requirements under this Policy. Questions regarding this Policy, its interpretation or implementation should be made by contacting the HABC FH&EO Office in writing, or in person by appointment, at 417 E. Fayette Street, Suite 922, Baltimore, Maryland 21202; or by calling the Office at 410-393-3246. The FH&EO Office may require the submission of data from HABC public housing developments and field offices in order to evaluate and document HABC's compliance with this Policy.

SECTION 6. GENERAL PRINCIPLES FOR PROVIDING REASONABLE ACCOMMODATIONS.

Listed below are the general principles which provide a foundation for the Policy and which HABC staff should apply when responding to requests for reasonable accommodations within all HABC housing programs:

6.1 It is presumed that the individual with a disability is usually knowledgeable of the appropriate types of, and methods for providing, reasonable accommodations needed when making a request. However, HABC reserves the right to investigate and offer equally effective alternatives to the requested accommodation, and/or alternative methods for providing the requested accommodation.

6.2. The procedure for evaluation and responding to requests for a reasonable accommodation relies on a cooperative relationship between HABC and the applicant/resident. The process is **NOT** adversarial.

6.3. HABC shall inform all applicants and residents of alternative forms of communication. The Request Form is designed to assist HABC and our applicants/residents. If an applicant/ resident does not, or can not use the Request

Form, HABC will still respond to the request for an accommodation. The applicant/resident may also request assistance with the Request Form or such applicant/resident may request that the Request Form be provided in an equally effective format or means of communication.

Example(s): Some examples of alternative equally effective forms of communication are include the following: Qualified interpreters, printed material, telecommunications devices for deaf persons (TDD's), Maryland Relay System, or other aurally delivered materials available to persons with hearing impairments. Qualified readers, taped texts audio recordings, Brailled materials, large print materials, or other effective methods of making visually delivered materials available to individuals with visual impairments.

6.4. If the accommodation is reasonable (see Procedures 3 below), HABC will grant it.

6.5. In accordance with Procedure 3 (below), , HABC will grant the request for a reasonable accommodation only to the extent that an undue financial and administrative burden is not created thereby.

6.6. All written documents required by or as a result of this Policy must contain plain language and be in appropriate alternative formats in order to communicate information and decisions to the person requesting the accommodation.

6.7. Any required meetings with a person with a disability will be held in an accessible location.

SECTION 7. AMENDMENT.

7.1. Policy. The Policy may be amended only by resolution of the Board of Commissioners.

7.2. Procedures. The Procedures may be amended within the scope of the Policy by the Executive Director of HABC.

7.3. Legal Compliance. Any amendment to the Policy or Procedures shall be consistent with all applicable laws and regulations.

SECTION 8. STAFF TRAINING

The Special Assistant to the Commissioner for the FH&EO Office will ensure that training sessions are held at least annually concerning the Policy and the Procedures and all applicable federal, state and local requirements regarding reasonable accommodations.

PART B. PROCEDURES.

PROCEDURE #1 - COMMUNICATION WITH APPLICANTS AND RESIDENTS

1. At the time of application, all applicants must be provided with the Request for Reasonable Accommodation Form (the "**Request Form**") (copy of which is affixed hereto as **Attachment 1**), or, upon the applicant's request, the Request Form must be provided in an equally effective format.

2. HABC Residents seeking accommodations may contact the housing management office located within their housing development or the management office for their scattered site residence. Residents may also contact the FH&EO office directly to request the accommodation.

3. HABC is responsible for informing all residents that a request may be submitted for reasonable accommodations for an individual with a disability. All residents will be provided the Request Form when requesting a reasonable accommodation. However, a resident may submit the request in writing, orally, or use an other equally effective means of communication to request the accommodation. Upon receiving the request, housing management and/or the FH&EO office will respond to the request within twenty (20) business days[1]. If additional information or documentation is required, a written request should be issued to the resident by using the Request For Information or Verification Form ("**Request for Information**"), a copy of which is affixed hereto as **Attachment 2.** A submission date should be specified in the Request for Information so as not to delay HABC's review of the request. "

4. HABC will consent to or deny the request within thirty (30) business days after receiving all needed information and documentation from the resident. All decisions to grant or deny reasonable accommodations will be communicated in writing or if required, in an alternative format in order to communicate the decision to the applicant/resident. Exceptions to the 30 business day period for notification of HABC's decision on the request should be provided to the resident in writing setting forth the reasons for the delay. A copy each of the **Letter Denying Request for Reasonable Accommodations** and the **Letter Approving Request for Reasonable Accommodations** are affixed hereto as **Attachment 3** and **Attachment 4**, respectively.

5. HABC will maintain at its Housing Admissions Office; Management Offices; and Central Office written materials which summarizes this Policy and highlights the procedures for making a request for reasonable accommodations.

[1] The term "**business days**" shall mean those days of the week, excluding Saturdays, Sundays and holidays observed by HABC

PROCEDURE #2 - SEQUENCE FOR MAKING DECISIONS

1. Is the applicant/resident a qualified "individual with a disability"?

    (a) If **NO**, we are not obligated to make a reasonable accommodation; therefore, we may deny the request.
    (b) If **YES,** go to Step 2.
    (c) If more information is needed, either write for more information using the standard *Request for Information* letter, or request a meeting using the standard *Request for Meeting* letter. (A copy of the Request for Meeting letter is affixed hereto as **Attachment 5**).

2. Is the requested accommodation related to the disability?

    (a) If **NO**, we are not obligated to make the accommodation; therefore, we may deny the request.
    (b) If **YES**, go to step 3.
    (c) If more information is needed, either write for more information using the *Request for Information* Letter, or request a meeting using the *Request for Meeting* Letter.

3. Is the requested accommodation reasonable? This determination will be made by following Procedure #3 - Guidelines for Determining Reasonableness.

    (a) If **YES**, we will approve the request for reasonable accommodation. A written description of the accommodation will be prepared and included in the Letter Approving *Request for Reasonable Accommodations* .
    (b) If **NO**, we may deny the request. Submit the denial using the Letter Denying *Request for Reasonable Accommodations* .
    (c) If more information is needed, either write for more information using the Letter Approving *Request for Reasonable Accommodations* , or request a meeting using the *Request for Meeting* Letter.

PROCEDURE #3 - GUIDELINES FOR DETERMINING REASONABLENESS

1. In accordance with Policy Principle 6.1, HABC will consider the requested method for providing reasonable accommodations for an individual with a disability. However, HABC is required to evaluate the requested method and may require the individual with a disability to provide further information to demonstrate the need for the requested accommodation to enable access to and use of the housing program. Additionally, HABC may offer equally effective alternatives to the requested accommodation, and/or alternative methods for providing the requested accommodation.

2. Requests for reasonable accommodations will be considered on a case-by-case basis. Decisions regarding reasonable accommodations will be made in compliance with all applicable accessibility laws and requirements. Additionally, in those circumstances where HABC deems that a proposed reasonable accommodation would fundamentally alter the service, program, or activity, or would result in undue financial and administrative burdens, HABC has the burden of proving such result(s).

3. The responsibility for the decision that a proposed reasonable accommodation would result in such alteration or burdens shall rests with the Executive Director or his/her designee after considering all resources available for use in the funding and operation of the service, program, or activity, and must be accompanied by written statement of the reasons for reaching that conclusion. If an action would result in such an alteration or such burdens, HABC shall propose any other action that will not result in or require an alteration or burden.

4. Live-in-Aides. In some cases, an individual with a disability may require a live-in-aide. In accordance with the provisions of the HABC dwelling lease, HABC may permit a live-in to reside in the dwelling unit to assist a individual with a disability. A live-in-aide means a person (a) determined by HABC to be essential to the care and well being of a family member with a disability; (b) is not obligated to support the family member; and (c) would not be living in the unit except to provide the supportive services. A live-in-aide would not be required to share a bedroom with another member of the household [see 24 CFR 966.4(d)(3)]. Prior to granting permission, the live-in aide must submit to a criminal background check in accordance with HABC's policies and procedures. Additionally, medical verification of the need for a live-in aide is required., and the following factors will be considered by HABC in determining whether to approve a live-in aide:

    (1) whether the addition of a new occupant would create a situation of overcrowding in the dwelling unit, thereby requiring a transfer to another dwelling unit;

    (2) the availability of an appropriate dwelling unit; and/or

    (3) HABC's obligation to make reasonable accommodation for persons with disabilities.

5. Verification. The PHA may verify a person's disability only to the extent necessary to ensure that applicants are qualified for the housing for which they are applying; that applicants are qualified for deductions used in determining adjusted income; that applicants are entitled to any preference they may claim; and that applicants who have requested a reasonable accommodation have a need for the requested accommodation. A PHA may not require applicants to provide access to confidential medical records in order to verify a disability nor may a PHA require specific details as to the disability. A PHA may require documentation of the manifestation of the disability that causes a need for a specific accommodation or accessible unit. A PHA may not ask what the specific disability is.

ATTACHMENTS TO PROCEDURES

ATTACHMENT 1 -REQUEST FOR A REASONABLE ACCOMMODATION

ATTACHMENT 2 - REQUEST FOR INFORMATION OR VERIFICATION

ATTACHMENT 3 - LETTER DENYING REQUEST FOR REASONABLE ACCOMMODATIONS

ATTACHMENT 4 - LETTER APPROVING REQUEST FOR REASONABLE ACCOMMODATIONS

ATTACHMENT 5 - REQUEST FOR MEETING

REQUEST FOR A REASONABLE ACCOMMODATION

[Our return address - Example: Housing Application Office, Housing Management Office, Fair Housing Office]

If you need:

- a change in our policies or procedures
- a repair or change in your apartment
- a repair or change to some other part of the property
- a change in the way we communicate with you

because of a disability, you may ask for this change, which is called a "reasonable accommodation."

If your request is reasonable, if it is not too expensive, and if it is not too difficult to arrange, we will try to make the changes you need.

We will make every effort to render a decision within thirty (30) business days.
We will let you know if we need more information or verification from you or if we would like to discuss other ways of meeting your needs.

If we turn down your request, we will explain our decision, and you may give us additional information.

Please advise us if you need help in using the form, or if you wish to receive this Request Form in an alternative format to meet your communication needs.

REQUEST FOR A REASONABLE ACCOMMODATION

The following member of my household has a disability:

Please provide this reasonable accommodation (specify accommodation(s)):

I need this reasonable accommodation because:

Date: _____

Name: _____

Address: _____

Telephone: _____

REQUEST FOR INFORMATION OR VERIFICATION

[Our return address - Example: Housing Application Office, Housing Management Office, Fair Housing Office]

Date: _____

To: _____
_____
_____

Dear Applicant or Resident:

We have received your Request for a Reasonable Accommodation. We need to know more about [issue, simply and clearly stated] before we can decide.

We need to know more because [reason, simple and clearly stated].

You can give us more information by [acceptable methods of verification]. If this is a problem for you, other ways of providing the information may also be acceptable.

We will not make a decision until we have this new information.

If you think that you have given us this information, or if you think that we should not ask for this information, please call us at [our telephone number]. Please call if you have any other questions.

[signature and closing]

DENIAL OF REQUEST FOR REASONABLE ACCOMMODATION

[Our return address - Example: Housing Application Office, Housing Management Office, Fair Housing Office]

Date: _____

To: _____
_____
_____

Dear Applicant or Resident:

You requested the following change or accommodation [describe request]. We have attached a copy of your request form. We have **denied** your request because:

– You do not meet the definition of an individual with handicaps and we are not required to provide a reasonable accommodation.

– We think the accommodation you requested is not reasonable because we have decided:

You do not need this accommodation in order to enjoy or participate equally in our housing.

It will create undue financial and administrative burdens for us.

It will change the fundamental nature of our program.

We have decided this because [give reasons, in clear and simple language].

We relied on these facts to deny your request [give facts, in clear and simple language].

To make this decision we [tell what documents or records we reviewed, tell which people we spoke with, describe other aspects of our investigation process].

If you disagree with our decision, you may contact the Fair Housing and Equal Opportunity (FH&EO) Office at 410-396-3246. The FH&EO Office is located at 417 E. Fayette Street, Suite 922, Baltimore, Maryland 21202. You may also contact the following agencies:

Baltimore Neighborhoods, Inc. 2217 St. Paul Street Baltimore, MD 21218 Telephone: 410-243-4400	Maryland Commission on Human Relations 6 St. Paul Street 9th Floor Baltimore, MD 21202 Telephone: 410-767-8600
U.S. Department of Housing and Urban Development 10 South Howard Street Baltimore, MD 21201 Telephone: 410-962-2520 ext. 3056	Baltimore Community Relations Commission 10 N. Calvert St. Suite 915 Baltimore, MD 21202 Telephone: 410-396-3141

[signature and closing

APPROVAL OF REQUEST FOR A REASONABLE ACCOMMODATION

[Our return address - Example: Housing Application Office, Housing Management Office, Fair Housing Office]

Date: _____

To: _____
_____
_____

Dear Applicant or Resident:

We have approved your request for the following change or reasonable accommodation [description]:

– We can provide you with this accommodation by [date].

– To make the change you requested, we must have three bids and then arrange installation. This is why we are not able to provide you with the accommodation immediately.

– [other reason for delay].

Please call us at [our telephone number] if you have any questions.

If you think this change or reasonable accommodation is not what you requested, if it is not acceptable, or if you object to the amount of time it will take to provide it, you may contact the Fair Housing and Equal Opportunity (FH&EO) Office at 410-396-3246. The FH&EO Office is located at 417 E. Fayette Street, Suite 922, Baltimore, Maryland 21202. You may also contact the following agencies:

Baltimore Neighborhoods, Inc. 2217 St. Paul Street Baltimore, MD 21218 Telephone: 410-243-4400	Maryland Commission on Human Relations 6 St. Paul Street 9th Floor Baltimore, MD 21202 Telephone: 410-767-8600
U.S. Department of Housing and Urban Development 10 South Howard Street Baltimore, MD 21201 Telephone: 410-962-2520 ext. 3056	Baltimore Community Relations Commission 10 N. Calvert St. Suite 915 Baltimore, MD 21202 Telephone: 410-396-3141

[signature and closing]

REQUEST FOR A MEETING

[Our return address- Example: Housing Application Office, Housing Management Office, Fair Housing Office]

Date: _____

To: _____
_____
_____

Dear Applicant or Resident:

We have received your request for a reasonable accommodation. It would help us make our decision if we could meet with you. You may bring someone to assist you with the meeting.

We would like to meet on [date, time, place]. If you cannot come at that time, please call us at [our telephone number].

We will talk about [describe issue, simply and clearly] at this meeting.

Please come ready to talk to us about the changes you want. Please bring copies of any information that you would like to give us.

We look forward to meeting with you.

[signature and closing]

Attachment E

CITY OF BALTIMORE

MARTIN O'MALLEY, Mayor

HOUSING AUTHORITY OF BALTIMORE CITY
PAUL T. GRAZIANO, Executive Director
Lyle Schumann, Deputy Executive Director
417 East Fayette Street
Baltimore, Maryland 21202-3134
Telephone: 410-396-3232 Facsimile: 410-545-7771

January 15, 2003

Dear HABC Applicants:

The Housing Authority of Baltimore City (HABC) is an equal opportunity provider of housing. Thus, in accordance with the provisions of federal law and HABC's non-discrimination policy, HABC does not discriminate on the basis of race, color, religion, sex, disability, familial status (having one or more children), or national origin.

Persons with Disabilities and Equal Opportunity to Accessible Housing

In addition, HABC is committed to adopting and enforcing policies, procedures and practices that allow individuals with disabilities the chance to participate in and benefit from the housing services and programs that it provides. As a result, HABC has adopted a reasonable accommodation policy in accordance with applicable federal requirements to ensure that the programs and services operated by HABC are fully accessible to individuals with disabilities. To make it easier to request reasonable accommodations, HABC has also developed a Request for Reasonable Accommodation Form ("Request Form").

Copies of HABC's reasonable accommodation policy and the Request Form may be obtained as follows:

- From the Customer Relations Center or;
- From HABC's Fair Housing and Equal Opportunity (FHEO) Office or;
- From HABC's web site (policy only).

Under HABC's reasonable accommodation policy, if a person with a disability or a household member with a disability requires a modification or alteration to an HABC rule, policy, practice or service, in order to provide an opportunity to participate in HABC programs, HABC will provide such an accommodation unless the modification or alteration would result in a fundamental change to the program or an undue financial hardship.

Here are some examples of what might be considered a reasonable accommodation:

- Installing grab bars in a bathroom to allow a person with mobility impairment to get into a bathtub;
- Providing a sign-language interpreter to a hearing impaired applicant or resident when conducting an interview;
- Allowing a person who has a physical or emotional disability the use of a service animal;
- Providing visual smoke detectors for the hearing impaired.

A reasonable accommodation also includes providing alternate document formats and appropriate aids to individuals with hearing and visual impairments in order to effectively communicate with these individuals about HABC programs, policies, information and application process.

HABC uses the Maryland Relay System to communicate with people with hearing impairments over the telephone. The Maryland Relay System may be accessed by dialing 711 or 1-800-735-2258.

Requesting a Reasonable Accommodation

For HABC applicants, the applications for public housing and for the Housing Choice Voucher Program each include a section to be completed if the applicant or a household member of the applicant needs a reasonable accommodation due to a disability. The applications and General Information Guides for the applications include information for applicants who need help to complete the application because of a disability about how to obtain that assistance.

If you need help filling out the application or want to request a reasonable accommodation because you have a disability, please contact:

The Customer Relations Center at
410-396-4046

If you have general questions regarding HABC's Non-Discrimination Policy or our Reasonable Accommodation Policy, you can contact:

Fair Housing and Equal Opportunity Office
417 E. Fayette Street, Suite 922
Baltimore, MD 21202
410-396-3246

**For the Hearing Impaired call The Maryland Relay System at:
711 or 1-800-735-2258.**

Sincerely,

Paul T. Graziano
Executive Director

Attachment F

CITY OF BALTIMORE

MARTIN O'MALLEY, Mayor

..OUSING AUTHORITY OF BALTIMORE CITY
PAUL T. GRAZIANO, Executive Director
Lyle Schamaana, Deputy Executive Director
417 East Fayette Street
Baltimore, Maryland 21202-3134
Telephone: 410-[illegible]-5252 Facsimile: 410-[illegible]-7771

January 15, 2003

Dear HABC Residents:

Are you in need of a change in your unit, an HABC policy or procedure or the way you communicate with HABC housing staff to make HABC programs more accessible to utilize? If you are an HABC resident and you have a disability, you can request such changes as a reasonable accommodation.

The Housing Authority of Baltimore City (HABC) is an equal opportunity provider of housing. Thus, in accordance with the provisions of federal law and HABC's non-discrimination policy, HABC does not discriminate on the basis of race, color, religion, sex, disability, familial status (having one or more children), or national origin.

Persons with Disabilities and Equal Opportunity to Accessible Housing

In addition, HABC is committed to adopting and enforcing policies, procedures and practices that allow individuals with disabilities the chance to participate in and benefit from the housing services and programs that it provides. As a result, HABC has adopted a reasonable accommodation policy in accordance with applicable federal requirements to ensure that the programs and services operated by HABC are fully accessible to individuals with disabilities. To make it easier for residents to request reasonable accommodations, HABC has also developed a Request for Reasonable Accommodation Form ("Request Form").

Copies of HABC's reasonable accommodation policy and the Request Form may be obtained as follows:

- From the management office of the development in which you live or, if you live in one of the scattered sites, from the management office that manages that scattered site;
- From HABC's Fair Housing and Equal Opportunity (FHEO) Office or;
- From HABC's web site (policy only).

Under HABC's reasonable accommodation policy, if a person with a disability or a household member with a disability requires a modification or alteration to an HABC rule, policy, practice or service, in order to provide an opportunity to participate in HABC programs, HABC will provide such an accommodation unless the modification or alteration would result in a fundamental change to the program or an undue financial hardship.

Here are some examples of what might be considered a reasonable accommodation:

- Installing grab bars in a bathroom to allow a person with mobility impairment to get into a bathtub;

- Providing a sign-language interpreter to a hearing impaired applicant or resident when conducting an interview;
- Allowing a person who has a physical or emotional disability the use of a service animal.

A reasonable accommodation also includes providing alternate document formats and appropriate aids to individuals with hearing and visual impairments in order to effectively communicate with these individuals about HABC programs, policies, information and application process.

HABC uses the Maryland Relay System to communicate with people with hearing impairments over the telephone. The Maryland Relay System may be accessed by dialing 711 or 1-800-735-2258.

Requesting a Reasonable Accommodation

If you are an HABC resident and you believe that because of a disability either you or a household member needs a reasonable accommodation to afford an equal opportunity to receive, use and enjoy the programs or services administered by HABC, you should submit a Request Form to the housing management office within your housing development or to the management office for the scattered site where you live. HABC residents may also submit the Request Form to the FHEO Office. While HABC would prefer that you submit your request in the Request Form, you may also submit your request orally, in writing (a written letter or note) or using an alternate effective communication format.

If you want to request a reasonable accommodation, please contact:

The Housing Management Office in your development.

If you do not know the phone number of your Housing Management Office you can call Housing Operations at 410 396-4195 to obtain the correct information.

If you have general questions regarding HABC's Non-Discrimination Policy or our Reasonable Accommodation Policy you can contact:

Fair Housing and Equal Opportunity Office
417 E. Fayette Street, Suite 922
Baltimore, MD 21202
410-396-3246

For the Hearing Impaired call The Maryland Relay System at:
711 or 1-800-735-2258.

Sincerely,

Paul T Graziano
Executive Director

Attachment G

April 6, 2004

Dear HABC Housing Choice Voucher Holder:

The Housing Authority of Baltimore City (HABC) is an equal opportunity provider of housing. Thus, in accordance with the provisions of federal law and HABC's non-discrimination policy, HABC does not discriminate on the basis of race, color, religion, sex, disability, familial status (having one or more children), or national origin.

Persons with Disabilities and Equal Opportunity to Accessible Housing

In addition, HABC is committed to adopting and enforcing policies, procedures and practices that allow individuals with disabilities the chance to participate in and benefit from the housing services and programs that it provides. As a result, HABC has adopted a Reasonable Accommodations Policy in accordance with applicable federal requirements to ensure that the programs and services operated by HABC are fully accessible to individuals with disabilities. To make it easier for program participants to request reasonable accommodations, HABC has also developed a Request for Reasonable Accommodation Form ("Request Form").

Copies of HABC's Reasonable Accommodations Policy and the Request Form may be obtained as follows:

- From the Customer Relations Center;
- From HABC's Fair Housing and Equal Opportunity (FHEO) Office or;
- From HABC's web site.

Under HABC's Reasonable Accommodations Policy, if a person with a disability or a household member with a disability requires a change to an HABC rule, policy, practice or service, in order to provide an opportunity to participate in HABC programs, HABC will provide such an accommodation unless the modification or alteration would result in a fundamental change to the program and an undue financial hardship.

Reasonable Accommodations by HABC

If the head of household or a member of your family has a disability and you are searching for housing with a voucher, you can make a reasonable accommodation request that HABC extend the period of time that you have to search for housing. Similarly, if you require a larger bedroom size than subsidy standards permit due to a verified disability which would not allow persons to share a bedroom, you can request as a reasonable accommodation that HABC grant an exception to the subsidy standard.

Other examples of what might be considered a reasonable accommodation include:

- Providing a sign-language interpreter to a hearing impaired applicant or participant when conducting an interview;

- Providing alternate document formats and appropriate aids to individuals with hearing and visual impairments in order to effectively communicate about HABC programs, policies, information and application process.

HABC uses the Maryland Relay System to communicate with people with hearing impairments over the telephone. The Maryland Relay System may be accessed by dialing 711 or 1-800-201-7165.

Requesting a Reasonable Accommodation from HABC

If you need to request a change in an HABC policy, procedure or the way in which you communicate with HABC staff, you can submit a Request Form for a reasonable accommodation to the Customer Relations Center. While we would prefer that you submit your request in the Request Form, you may also submit your request orally, in writing (a written letter or note) or using an alternate effective communication format.

Reasonable Accommodations by Landlord

Under the Fair Housing Amendments Act of 1988 ("FHAA"), a private owner of a property or a landlord that accepts your Housing Choice Voucher is required to make reasonable accommodations in rules, policies or practices to afford a person with a disability an equal opportunity to use and enjoy the housing that they provide. Reasonable accommodations include structural or physical modifications or changes to a unit. This means that if you have a disability and due to that disability you require a modification to your unit such as the addition of a grab bar or a raised toilet seat in order for you to occupy and fully use your unit, your landlord must allow you to make such alterations. Any modifications that you make to your unit will be at your own expense and a landlord may also require that you restore the unit to the way it was before you made the changes when you move, again at your own expense. If you need a reasonable accommodation from your landlord, you should contact your landlord directly to make such a request.

If you have general questions regarding HABC's Non-Discrimination Policy or our Reasonable Accommodation Policy you can contact:

Fair Housing and Equal Opportunity Office
417 E. Fayette Street, Suite 922
Baltimore, MD 21202
410-396-3246

Sincerely,

Paul T. Graziano
Executive Director

April 6, 2004

Dear HABC Housing Choice Voucher Holder:

The Housing Authority of Baltimore City (HABC) is an equal opportunity provider of housing. Thus, in accordance with the provisions of federal law and HABC's non-discrimination policy, HABC does not discriminate on the basis of race, color, religion, sex, disability, familial status (having one or more children), or national origin.

Persons with Disabilities and Equal Opportunity to Accessible Housing

In addition, HABC is committed to adopting and enforcing policies, procedures and practices that allow individuals with disabilities the chance to participate in and benefit from the housing services and programs that it provides. As a result, HABC has adopted a Reasonable Accommodations Policy in accordance with applicable federal requirements to ensure that the programs and services operated by HABC are fully accessible to individuals with disabilities. To make it easier for program participants to request reasonable accommodations, HABC has also developed a Request for Reasonable Accommodation Form ("Request Form").

Copies of HABC's Reasonable Accommodations Policy and the Request Form may be obtained as follows:

- From the Customer Relations Center;
- From HABC's Fair Housing and Equal Opportunity (FHEO) Office or;
- From HABC's web site.

Under HABC's Reasonable Accommodations Policy, if a person with a disability or a household member with a disability requires a change to an HABC rule, policy, practice or service, in order to provide an opportunity to participate in HABC programs, HABC will provide such an accommodation unless the modification or alteration would result in a fundamental change to the program and an undue financial hardship.

Reasonable Accommodations by HABC

If the head of household or a member of your family has a disability and you are searching for housing with a voucher, you can make a reasonable accommodation request that HABC extend the period of time that you have to search for housing. Similarly, if you require a larger bedroom size than subsidy standards permit due to a verified disability which would not allow persons to share a bedroom, you can request as a reasonable accommodation that HABC grant an exception to the subsidy standard.

Other examples of what might be considered a reasonable accommodation include:

- Providing a sign-language interpreter to a hearing impaired applicant or participant when conducting an interview;

- Providing alternate document formats and appropriate aids to individuals with hearing and visual impairments in order to effectively communicate about HABC programs, policies, information and application process.

HABC uses the Maryland Relay System to communicate with people with hearing impairments over the telephone. The Maryland Relay System may be accessed by dialing 711 or 1-800-201-7165.

Requesting a Reasonable Accommodation from HABC

If you need to request a change in an HABC policy, procedure or the way in which you communicate with HABC staff, you can submit a Request Form for a reasonable accommodation to the Customer Relations Center. While we would prefer that you submit your request in the Request Form, you may also submit your request orally, in writing (a written letter or note) or using an alternate effective communication format.

Reasonable Accommodations by Landlord

Under the Fair Housing Amendments Act of 1988 ("FHAA"), a private owner of a property or a landlord that accepts your Housing Choice Voucher is required to make reasonable accommodations in rules, policies or practices to afford a person with a disability an equal opportunity to use and enjoy the housing that they provide. Reasonable accommodations include structural or physical modifications or changes to a unit. This means that if you have a disability and due to that disability you require a modification to your unit such as the addition of a grab bar or a raised toilet seat in order for you to occupy and fully use your unit, your landlord must allow you to make such alterations. Any modifications that you make to your unit will be at your own expense and a landlord may also require that you restore the unit to the way it was before you made the changes when you move, again at your own expense. If you need a reasonable accommodation from your landlord, you should contact your landlord directly to make such a request.

If you have general questions regarding HABC's Non-Discrimination Policy or our Reasonable Accommodation Policy you can contact:

Fair Housing and Equal Opportunity Office
417 E. Fayette Street, Suite 922
Baltimore, MD 21202
410-396-3246

Sincerely,

Paul T. Graziano
Executive Director

Please bring these papers with you to your re-certification meeting.

Annual Re-Certification

Reasonable Accommodation Information

If you or someone in your household has a disability that makes it hard for you or them to use HABC's housing or services, please read this form. HABC will help you fill out this form at your re-certification meeting. Read this form before your meeting. Then take this form with you to your meeting. By filling out this form, you can get changes in your housing or in HABC services.

Changes made to help a person with a disability are called "reasonable accommodations". For example:

- You may want HABC to put grab bars in your bathroom or up your stairs, or to widen a doorway;
- You may want to move to a unit that is built for persons who use wheelchairs (an "accessible" unit);
- You may want HABC to send notices to you in large print; or
- You may need a ramp to get into the management office.

This form will help HABC serve you. This form will be filled out at your re-certification meeting. But, you can also ask for a change in your housing or services at any time. Talk to your housing manager.

Name: _____

Current Address: _____

Phone: _____

Number of Bedrooms: _____

Today's Date: _____

DISABILITY:

A disability may be physical, health, developmental, emotional or mental health related (such as polio, kidney disease, mental retardation, or schizophrenia). HABC does not need specific information about your disability. HABC only needs to know that you have a disability and how it affects your ability to use your housing unit or HABC services.

Do **you** or does **any member of your household** (a person living with you) have a disability?

☐ **Yes** ☐ **No**

If you answered "No," you have completed the form. Thank you for your time.
If you answered "Yes", please continue.

1. Does your unit currently have any features or changes that were made to accommodate you or someone with a disability?

   ☐ **Yes** ☐ **No**

2. Does the person who needs or needed the changes still reside in the unit?

   ☐ **Yes** ☐ **No**

3. If changes were made to the unit to accommodate a disability, please list changes below.

4. If there are changes that you still need, please list them:

Please check everything below that applies to you or to anyone in your household (anyone who lives with you) who has a disability. For example, the question asks, "Do you have trouble getting into your unit?". You should check "yes" if you or any household member has trouble getting into the unit because of a disability. Also, answer the questions by thinking about whether you can use the unit by yourself. For example, the question says, "Do you have trouble getting out of the shower?". Check "yes" if you can not use the shower unless someone else helps you.

Housing Unit

General:

1. Do you need a fully accessible unit? (For example, a ramp or no steps to enter unit, wider doorways, lowered light switches, larger bathrooms, wider hallways and lowered cabinets in

the kitchen. These units are usually needed by persons who use wheelchairs or scooters or who have trouble with their balance or cannot reach above their shoulders.)

☐ **Yes** ☐ **No**

2. Do you need a unit all on the first floor with no steps?

☐ **Yes** ☐ **No**

3. Do you need a bedroom and bathroom on the first floor?

☐ **Yes** ☐ **No**

Changes requested:

Entrance

1. Do you have trouble getting in and out of your unit because:
   (a) The door is too heavy or the knob is hard to grip?

   ☐ **Yes** ☐ **No**

   (b) You need a ramp to gain entry/exit?

   ☐ **Yes** ☐ **No**

   (c) You have a ramp, but it is not in good condition, it is too steep, it doesn't have handrails or there is another problem?

   ☐ **Yes** ☐ **No**

   (d) You need handrails on your steps?

   ☐ **Yes** ☐ **No**

   (e) The doorway is not wide enough to allow a wheelchair or walker to get through?

   ☐ **Yes** ☐ **No**

   (f) Other? Please describe briefly.
2. Do you need a lowered peephole for the front door?

   ☐ **Yes** ☐ **No**
3. Can you reach the light switch by the door?

   ☐ **Yes** ☐ **No**
4. Do you have other concerns for using your front or back door? Describe.

Changes requested:

Bathroom

1. Do you have difficulty getting to the bathroom because it is upstairs?

   ☐ **Yes** ☐ **No**
2. Do you have trouble getting into and out of the bathroom because the door is not wide enough?

   ☐ **Yes** ☐ **No**
3. Can you reach the light switch?

   ☐ **Yes** ☐ **No**
4. Do you need grab bars or handrails for the toilet or bathtub?

   ☐ **Yes** ☐ **No**
5. Do you need a raised seat for the toilet?

   ☐ **Yes** ☐ **No**
6. Do you have difficulty flushing the toilet?

   ☐ **Yes** ☐ **No**
7. Do you have difficulty using the bathtub or shower?

   ☐ **Yes** ☐ **No**
8. Do you or anyone in the household have difficulty reaching and/or easily turning the faucet for the sink, bath or shower?

   ☐ **Yes** ☐ **No**
10. Do you sit while using the sink? (Hot water and drain pipes may need insulation.)

    ☐ **Yes** ☐ **No**
11. Do you have difficulty using the sink counter?

    ☐ **Yes** ☐ **No**
12. If you use a wheelchair, do you have enough turning space while in the bathroom?

    ☐ **Yes** ☐ **No**
13. Do you have other concerns for using your bathroom? Please describe.

Changes requested:

Kitchen

1. Do you have trouble getting into or out of the kitchen because the door is not wide enough?

   ☐ **Yes** ☐ **No**
2. Do you have trouble using or reaching any part of your kitchen because of your disability?

☐ **Yes** ☐ **No**

(a) Are cabinets too high or are you unable to use the countertops because they are difficult to reach?

☐ **Yes** ☐ **No**

(b) Is the range or stovetop, or the stove controls, easy for you to use?

☐ **Yes** ☐ **No**

(c) Does reaching the range or stovetop controls require you to reach across the burners?

☐ **Yes** ☐ **No**

(d) Do you have trouble opening or using your refrigerator/freezer?

☐ **Yes** ☐ **No**

(e) If you sit while using the sink, are your legs near pipes that can get hot?

☐ **Yes** ☐ **No**

(f) Do you have difficulty using the sink?

☐ **Yes** ☐ **No**

(g) Do you have difficulty reaching the light switch, the waste disposal switch or electrical outlets above the kitchen counter?

☐ **Yes** ☐ **No**

(h) If you use a wheelchair, do you have enough clearance and turning space while in the kitchen?

☐ **Yes** ☐ **No**

(i) Do you have other concerns about using your kitchen? Please describe.

Changes requested:

Bedrooms

1. Do you have any trouble using your bedroom?

☐ **Yes** ☐ **No**

2. Is it difficult for you to get to the bedroom because it is upstairs?

☐ **Yes** ☐ **No**

3. Do you or have trouble getting into and out of the bedroom because the door is not wide enough?

☐ **Yes** ☐ **No**

4. If using a wheelchair, do you have enough clearance and turning space while in the bedroom?

☐ **Yes** ☐ **No**

5. Do you have difficulty reaching the bedroom or playroom of a child for whom you are responsible?

☐ **Yes** ☐ **No**

6. Do you have difficulty reaching the light switch?

☐ **Yes** ☐ **No**

7. Do you need a separate bedroom for a live in aide?

☐ **Yes** ☐ **No**

8. Can you reach the shelves in your closets?

☐ **Yes** ☐ **No**

9. Do you have other concerns about your bedroom?

☐ **Yes** ☐ **No**

If yes, please describe.

Changes requested:

Living Room

1. Can you reach the light switch and thermostat?

☐ **Yes** ☐ **No**

2. Do you have any concerns about your living room?

☐ **Yes** ☐ **No**

If yes, please describe.

Changes requested:

Dining Room

1. Can you reach the light switch and thermostat?

☐ **Yes** ☐ **No**

3. Do you have any concerns about your dining room?

☐ **Yes** ☐ **No**

If yes, please describe.

Changes requested:

Hallways

1. Are the hallways too narrow or are there barriers that make it difficult to go through the hallway?

☐ **Yes** ☐ **No**

2. Do you have other concerns about your hallways?

☐ **Yes** ☐ **No**

If yes, please describe.

Changes requested:

Outside:

1. Can you get to common areas of the development, such as the management office, the laundry facilities, meeting and recreation rooms, child care facilities, garbage disposal, maintenance, bus stops, other? (Reminder: check "yes" if you can get thee without needing assistance from someone else.)

☐ **Yes** ☐ **No**

2. If you use a wheelchair, do the sidewalks have curb cuts that allow a wheelchair user to cross the street?

☐ **Yes** ☐ **No**

3. Are the curb cuts useable or are they too steep, or blocked?

☐ **Yes** ☐ **No**

4. Are the sidewalks too steep? Does the slope of the walk make it hard to stand, walk or use a wheelchair, scooter or cane?

☐ **Yes** ☐ **No**

5. Do you have other concerns about the outside or common areas?

☐ **Yes** ☐ **No**
If yes, please describe.

Changes requested:

Parking

1. Do you need an accessible (handicapped) parking space?

☐ **Yes** ☐ **No**
2. If you already have a space, do you have trouble using it?

☐ **Yes** ☐ **No**
3. Are there usable curb cuts in the sidewalk close to the handicapped parking space?

☐ **Yes** ☐ **No**
4. Do you have other concerns about the parking?

☐ **Yes** ☐ **No**
If yes, please describe.

Changes requested:

Other

1. Are the lights in your housing unit bright enough for you to see well?

☐ **Yes** ☐ **No**
2. Do you have difficulty hearing the smoke detector or a building-wide fire alarm?

☐ **Yes** ☐ **No**
3. Is there a fire safety plan for all residents in your building to escape in case of fire?

☐ **Yes** ☐ **No**
4. Are you satisfied that you are able to use this plan?

☐ **Yes** ☐ **No**
5. Do you need a strobe (flashing) light fire alarm?

☐ **Yes** ☐ **No**
6. Do you need an amplified (extra loud) doorbell?

☐ **Yes** ☐ **No**

7. Do you need a doorbell that flashes instead of rings?

☐ **Yes** ☐ **No**

8. Do you have any other concerns?

☐ **Yes** ☐ **No**

If yes, please describe.

Changes requested:

Changes to HABC Policies:

1. Do you need help understanding or using the Public Housing program because of your disability?

☐ **Yes** ☐ **No**

2. Do you need HABC to send a copy of important notices to another person who can help you understand them?

☐ **Yes** ☐ **No**

3. Do you need help during Annual Re-certification to make sure you understand the process?

☐ **Yes** ☐ **No**

4. Do you need your HABC notices sent to you in large print?

☐ **Yes** ☐ **No**

5. Do you have other concerns that HABC may help you with?

☐ **Yes** ☐ **No**

If yes, please describe.

Changes requested:

Requests for Help

1. Have you previously made any of the requests noted in this survey?

☐ **Yes** ☐ **No**

2. If yes, when and to whom were they made?

3. Was a Work Order generated as a result of your request(s)?

☐ **Yes** ☐ **No** ☐ **Not sure**

Thank you for completing this survey!

If you have requested changes to your unit or to HABC services, HABC will respond to your request within 30 days. If you do not receive a response within 30 days, contact HABC's Office of Fair Housing and Equal Opportunity at (410) 361-9488.

You can update your answers to this form at any time in writing or by talking to your housing manager. Also, HABC's Reasonable Accommodations Policy and Immediate Needs Policy are available to you upon request.

Signature of Resident: _____

Copy provided to Resident

☐ **Yes** ☐ **No**

For Office Use Only

If during the Annual Re-certification, a resident requires a reasonable accommodation or has an Immediate Need, the Housing Manager should log this information into the Reasonable Accommodations database and follow all policies related to Reasonable Accommodations and Immediate Needs.

Please list any maintenance concerns identified by the resident. Indicate impact on resident's disability, if applicable.

Date referred to maintenance staff: _____

Date maintenance work completed: _____

Date entered into Reasonable Accommodation Database: _____

Does the resident have an Immediate Need?

☐ **Yes** ☐ **No**

If yes, was the resident provided a copy of the HABC Immediate Needs Policy and informed about this process?

☐ **Yes** ☐ **No**

Date the resident's information was entered into the database to schedule a meeting regarding their immediate needs: _____

If the resident requested changes to his or her unit or to HABC policies or programs, was the resident given a copy of the HABC Reasonable Accommodation Policy and informed about this policy?

☐ **Yes** ☐ **No**

HABC Employee Completing Form: _____ **Date:** _____

Attachment I

FROM

NAME, TITLE: **Anita McCoy-Muhammad, Assoc Deputy Director**

DIVISION OR SECTION: **Housing Operations**

SUBJECT: **Housing Managers Desk Reference-Procedures for Responding to Reasonable Accomodation Requests**

Housing Authority of Baltimore City

MEMO

HABC

TO Housing Managers

DATE: February 26, 2003

Please refer to Reasonable Accomodation Policy and Procedures

Communication and Decision Making

a) Provide the Request for Reasonable Accommodation Form and Inform all Residents that a request may be submitted for an individual with a disability
   - At Move-In
   - At Re-exam Interview
   - At Time of Accommodation Request

   Requests may be submitted by contacting the site management office either in person, in writing or by phone (with a follow up form sent)

   All requests for service (work orders) outside of the standard unit equipment should be referred to the Manager as a reasonable accommodation request. (i.e. grab bars, visual or hearing impaired aides, ramps, hand-held showers)

b) The Housing Manager shall immediately acknowledge receipt of a Reasonable Accommodation Request using the attached Acknowledgement Form and follow up with the resident within **five** business days of receiving the request.

c) The follow-up will consist of :
   1) entering the accommodation request into the reasonable accommodation database accessible on the "G" drive
   2) Making decisions in accordance with Procedure # 2 – Sequence for Making Decisions

d) At the end of the **five** (5) day period the Housing Manager will:
   - Request more information
   - Request a meeting, or
   - Approve the request
   - Enter the follow-up actions in the reasonable accommodation database

No reasonable accommodation request will be denied before requesting additional information and/or meeting with the resident. Denial of any reasonable accommodation request must be approved by the Regional Director for the site prior to issuing a denial letter.

e) Residents will be given **ten** (10) business days to provide the requested information or meet with the Housing Manager.

f) At the end of the **ten** (10) day period the Housing Manager will:

- Determine the receipt of all needed information and documentation from the resident.
- Make decisions in accordance with Procedure #2 Sequence for Making Decisions
- Approve the request
- Deny the request with prior approval of the Regional Director
- Enter the follow-up actions in the reasonable accommodations database

HABC will approve or deny the request within 30 business days after receiving all needed information and documentation from the resident.

Checklist of Private Rental Unit Accessibility Features

Address: _____ **Date Completed:** _____

Instructions: Please note below any accessible features in the unit. This information will enable HABC to make Section 8 voucher holders with disabilities aware of units that may meet their needs.

Entrance

_____ Number of steps to enter the unit
_____ Number of steps inside the unit
□ Doorway wider than in typical units
□ Ramp
□ Bedroom and Bath on the first floor

Bathroom

□ Roll-in shower
□ Grab bars for bathtub/shower
□ Grab bars for toilet
□ Raised toilet seat
□ Doorway wider than in typical units

Kitchen

□ Cabinets/countertops lower than in typical units

Bedroom

□ Doorway wider than in typical units

General

□ Peephole lower than in typical units
□ Accessible parking
□ Curb cuts
□ Ramps
□ Lift/Elevator
□ Smoke detector (visual alert)
□ Light switches and thermostats lower than in typical units; outlets higher
□ Other, please describe:

_____

_____

Common Areas

□ Ramp
□ Elevator

HABC/HCD Communications Protocol

It is the policy of the Housing Authority of Baltimore City (HABC) and the City's Department of Housing and Community Development (HCD) to effectively communicate with all persons. This Protocol is designed to facilitate communications at HABC and HCD and to ensure equal access to the services provided by HABC and HCD. All HABC and HCD employees are to follow this protocol when preparing written documents and materials, or otherwise communicating with clients and the public.

The HABC Reasonable Accommodation Policy and this protocol govern communications with residents in and applicants to the public housing program and the Housing Choice Voucher Program.

General Provisions

These Guidelines apply to written materials created by HABC and HCD staff, including: letters, flyers, departmental forms, faxes and memos. They also apply to meetings and in person transactions.

Written Communications – when communicating with clients you should be aware that some clients who are elderly or have disabilities (e.g., blindness and other vision impairments or learning disabilities) may have difficulties reading standard printed forms and letters. To ensure effective communication with these individuals, it may be necessary to use alternative formats (large type, Braille, electronic communications such as email or documents on computer diskette, or tape recordings). If you will be communicating with these individuals in writing, it is important to ask them if they can read standard printed forms or letters or if they need written materials to be provided in an alternative format. Many individuals who cannot read letters or complete forms independently when the letters and forms are provided in standard print format may be able to do so if the letters and forms are provided in an alternative format.

Fonts

When communicating with clients via letters, flyers, forms or memos, all HABC and HCD staff should use Microsoft Word. The default typeface is Times New Roman. HABC and HCD staff should always use readable fonts such as Arial, Times New Roman or Tahoma. All letters, flyers, forms and memos should have 1-inch margins. The minimally acceptable size font for all communications excluding e-mail is 12-point size font (for e-mail, the minimally acceptable font is 11-point size).

If a document or email is being sent to any elderly or visually impaired persons, the minimally acceptable font is 14-point size. However, persons with vision impairments often need printed materials to be prepared in large print, which is 16 to 18-point size, or even larger. if someone requests written materials to be provided in large print, you should provide the document in the point size requested. Readability is improved by using bold typeface with the addition of white space around lines (e.g. using line spacing at 1.5 or 2.0 instead of single spaced lines). Also, contrast improves readability so that typeface color should stand out from the background color (e.g. don't use yellow type on an orange flyer; or red type on white paper). Remember to use high contrasting color (white text on black background or black text on white background) on emails as well as print documents.

Document Clarity

Prior to sending out any form of communication, all documents should be checked for proper spelling and grammatical accuracy. Additionally, when communicating with the public, all correspondence should be clear, easy to understand and written in short sentences. Staff should notify their supervisor and/or the Communications Director if they have knowledge of any unclear written document or a document containing incorrect information so that the document may be clarified or corrected.

Contact Information

Letters, flyers, forms and memos should all contain specific contact information, including an e-mail address and access information for persons who use TTY's. When using forms to collect information, the form should include or be accompanied by a cover sheet with specific contact information. Communications should be reviewed by a supervisor before being sent out to ensure that they conform to the general standards outlined above.

Alternative Print Formats

Alternative print formats (audiotape, Braille, electronic, and large print) aid individuals who have vision impairments and other disabilities in having access to standard print materials. All HABC and HCD documents must carry an Alternative Format Notice. This requirement means that all HABC and HCD correspondence (e.g. letters, memos and forms) must contain the following statement:

"This information is available in large print, audiotape, Braille, on computer disk, and by email."

Anyone with access to a computer or copy machine is able to create large print documents. Print size will depend upon the needs of the individual. However, large print is usually defined as 16 to 18 point bold type depending on the typeface used. It is best to use a font that is sans serif (typeface without finishing strokes going off the ending of lines of a letter) for alternative formats. Arial or Tahoma are the clearest.

When the type is larger than 18-point size, fewer words appear on each page making it difficult for a person to make sense of the document. Bold characters also make the print clearer.

- Arial (11 point): Arial (12 point): Arial (14 point): Arial (16 point): Arial (18 point):

Arial is known as a sans serif typeface

- Tahoma (12 point): Tahoma (14 point): Tahoma (16 point): Tahoma (18 point):

Tahoma is also known as a sans serif typeface

Sans serif typefaces, such as Arial and Tahoma, are easier to read in larger type sizes and in smaller quantities. Items such as flyers, charts, and short letters lend themselves especially well to sans serif typefaces.

It is best to enlarge the font size of documents in electronic form before printing. However, if the document is not available in electronic form, documents may also be enlarged by duplicating them on a copy machine. To enlarge print from standard 12 point original text to 16-18 point, use the 150-165% enlargement setting on a photocopier. Copies should be made from an original, not a copy, when duplicating documents. The copy made from the original should be straight and clear. Crooked or unclear copies should not be used or distributed.

Logos

All communications must contain either the HABC or HCD logo. This is required for all letterhead, flyers, forms and memos. Additionally, all HABC communications must include the Fair Housing/Equal Housing Opportunity logo.

Equal Opportunity Employer language should also be included on all correspondence related to employment matters at HABC and HCD.

Flyers and any other materials advertising public meetings and events that are being held in accessible locations should have the international symbol of accessibility on them, so persons who use wheelchairs or have other mobility impairments will know that the meeting space is accessible.

Providing Information About Alternative Forms of Communication

Translation of Documents Advisory

When sending a notice or standard message to all or a significant portion of residents/clients or applicants, that communication document should contain a translation advisory. The translation advisory is a bilingual message that says:

"This is an important message. Please have it translated".

In determining whether to translate documents written in English into another language, HABC/HCD will consider the following:

- The number of applicants and residents in the jurisdiction who do not speak English and speak the other language;
- Estimated cost of translation per client;
- Availability of local organizations to provide translation services to non-English speaking families; and
- Availability of bilingual staff to provide translation for non-English speaking families.

Reasonable Accommodation Message

When communicating with HABC applicants/clients or residents, it may be necessary to provide a reasonable accommodation in order to allow for effective communications with all individuals. The following notice should be used on individual determinations and notices to individuals issued by HABC:

"If you are a person with a disability and are unable to comply with the requirements of the notice or letter or do not understand the contents of this document, you have the right to ask HABC to make a reasonable accommodation for you. To make such a request, please contact your [manager, leasing agent etc.] at [telephone number and Maryland Relay number]."

This specific message should be used on letters or forms sent out to the public by HABC.

When using flyers to publicize a public event, the following language should be used:

'If you are a person with a disability and require a reasonable accommodation to attend or participate in this [meeting, event, program, etc.], please call [name] at [phone number and Maryland Relay number]."

If you are unclear on when to use the Reasonable Accommodation Message, talk to your supervisor for clarification.

Maryland Relay System

HABC and HCD use the Maryland Relay System to communicate with deaf or hard of hearing individuals over the telephone. List the Maryland Relay number, 711 or 1-800-201-7165 anywhere there is an HABC or HCD phone number. The following offices also have TTY equipment and can answer TTY calls from applicants and residents: [fill in].

Meetings

HABC meetings, applicant interviews, conferences and hearings sponsored by or for HABC resident task forces, advisory boards and property management companies, will to the extent possible, be held in facilities that are free from architectural and communication barriers. The international symbol of accessibility should be included on all letters, flyers or memos only when the meeting location is accessible. If a meeting has been scheduled for an inaccessible location, it must be moved to an accessible location if a person with a mobility impairment needs or wishes to attend.

All **public** meetings held by HABC or HCD must be held in accessible places. Public meetings are those which a member of the public may attend. Therefore, all flyers and any other materials advertising public meetings and events should have the international symbol of accessibility on them indicating that the meeting space is accessible. In addition, arrangements should be made to have qualified sign language interpreters at the meeting and, when print materials are being distributed, those materials must be also available in large type, Braille, and audio recording.

In Person Transactions

At locations where counter heights are too high to be accessible, an alternate transaction area will be identified and/or lapboards or clipboards will be provided as an assistive device.

Sign language interpreters may be needed for in person transactions with individuals who are deaf.

Individuals with vision impairments or learning disabilities and elderly individuals may need assistance reading and completing forms.

Location of Posters

Flyers and posters should be hung so that the top edge is 60" above the floor.

Information on HABC Intranet Site

Document templates, the translation notice, and the accessibility, equal opportunity and Baltimore Housing logos can be found on the Baltimore Housing Intranet Site on the Communications Division's page.

Information on the HABC Internet Site

All information on the HABC's public internet site must be available in a format that can be used by persons with a variety of disabilities, including persons who use assistive technology such as screen readers and voice recognition software. Documents in portable document format (PDF) are not accessible to many persons who use screen readers; consequently, if a document is provided in PDF format, it must also be provided in a format that is accessible, such as HTML or a text format. To ensure that the public website is accessible, make sure that accessible elements are used, including alt tags, long descriptions, and captions, as needed. If images are used, including photos, graphics, scanned images, or image maps, make sure to include alt tags and/or long descriptions for each. If you use online forms and tables, make those elements accessible.

Questions

Questions regarding the information in this HABC/HCD Communications Protocol may be directed to the 504 Coordinator, Tracy Richardson, at (410) 361-9488 or to the Fair Housing and Equal Opportunity Office at (410) 396-3246.

List of Appointed Officials,Officers,and Employees subject to Training Requirements of Consent Decree

Division Name	No. of Employees	Position	Per Position
Members of the Board of Housing Commissioners	5		
Commissioner's Office	13	*Assoc Exec Dir FH&EO*	*1*
		Chief of Staff	*1*
		Consitiuent Services Liaison	*1*
		Executive Assistant	*1*
		Executive Director	*1*
		Facilities Director	*1*
		Inspector General	*1*
Dep Exec Director's Office	18	*Assoc Dep Dir Const & Engineer*	*1*
		Assoc Dep Dir Development	*1*
		Assoc Dep Dir Hsg Oper	*1*
		Assoc Dep Dir Section 8	*1*
		Business Develop Spec	*1*
		Chief Assoc Deputy Director	*1*
		Chief Information Officer	*1*
		Chief of HABC Police Force	*1*
		Dep Exec Director	*1*
		Dir of RAB	*1*
		Exec Asst to Board	*1*
		Executive Assistant	*2*
		Principal Clerk	*1*
		Safety Officer	*1*
		Spec Asst Impl & Compliance	*1*
		Special Advisor to DED	*1*
		Sr Admin Asst	*1*
Employment & Empowerment	37	*Admin Asst*	*2*
		Business Develop Spec	*2*
		Case Manager (WTW)	*1*
		Case Manager-Jobs Plus	*1*
		Community Dev Spec	*1*
		Community Service Worker	*1*
		Counselor III	*6*
		Counselor IV	*3*
		Job Development Spec	*7*
		Pesticide Trainee (P/T)	*1*

		Principal Clerk	*1*
		Program Administrator	*3*
		Program Supv	*1*
		Resid Initiative Prog Asst	*1*
		Resident Aide Trainee	*1*
		Resident Aide-Jobs Plus	*1*
		Resident Facilitator	*1*
		Secretary	*1*
		Social Work Supv II	*1*
		Special Programs Supv	*1*
Engineering	49	*Admin Asst*	*6*
		Construct Project Supv	*1*
		Dir of Engineer & Capital Impr	*1*
		Electrical Engineer	*1*
		Environmental Engineer	*1*
		Inspection Supv	*2*
		Inspector II	*15*
		Prog Compliance Officer	*1*
		Project Mgr II	*9*
		Sect Chief- Insp & Constr Mgmt	*1*
		Section Chief	*1*
Fair Housing/EEO	8	*Admin Analyst - Spec Init*	*1*
		Admin Asst	*2*
		Dir of FH/EO	*1*
		Dir Special Initiatives	*1*
		Equal Oppor Spec	*3*
Family Support Services	167	*Admin Asst*	*2*
		Assoc Dep Dir Resident Serv	*1*
		Case Manager	*2*
		Child Care Coord	*1*
		Community Health Worker	*1*
		Cook	*5*
		Counselor I	*5*
		Counselor II	*3*
		Counselor III	*16*
		Counselor IV	*10*
		Custodian	*6*
		Dir of Econ Dev & Empower	*1*
		Dir of FSS	*1*
		Director I	*5*
		Director II	*5*

		Grants Writer	*1*
		Housekeeper	*16*
		Program Administrator	*3*
		Program Supv	*6*
		Program Supv - CASA	*1*
		Recreation Program Specialist	*1*
		Registered Nurse	*2*
		Resident Aide	*15*
		Staff Aide	*7*
		Teacher I	*3*
		Teacher's Aide	*28*
		Youth Activity Leader	*3*
		Youth Activity Worker	*7*
HABCCO	3	*Construct Project Mgr*	*1*
		Dir of HABCo	*1*
Housing Management	508	*Account Clerk*	*22*
		Admin Asst	*6*
		Admin Specialist	*1*
		Air Conditioning Coord	*1*
		Application Supervisor	*1*
		Asst Carpentry Supv	*1*
		Asst Electrical Supv	*1*
		Asst Exterm Supv	*1*
		Asst Housing Mgr	*30*
		Asst Landscape Supv	*2*
		Asst Mech Shop Supv	*1*
		Asst Painting Supv	*2*
		Asst Pipefitter Supv	*1*
		Asst Plant Oper Supv	*1*
		Asst Plastering Supv	*1*
		Asst Supv-Lands (Un Pr)	*1*
		Asst Supv-Undergrd Dist	*1*
		Bench Mechanic	*2*
		Carpenter	*20*
		Carpentry Supv	*1*
		Cashier Coord	*1*
		Cement Finisher	*3*
		Central Supply Supv	*1*
		Certified Welder	*1*
		Chief Maint Mechanic	*1*
		Chief of Spec Maint Oper	*1*
		Community Liaison	*2*

Data Entry Oper I	*1*
Dir of Hsg Mgmt - Admin	*1*
Electrical Supv	*1*
Electrician	*8*
Electrician (Linesman)	*1*
Emergency Maint Mech	*1*
Energy Mgmt Coord	*1*
Equipment Oper/Backhoe	*1*
Executive Assistant	*1*
Extermination Supv	*1*
Exterminator	*4*
Gardener	*3*
Housing Mgr I	*11*
Housing Mgr II	*4*
Housing Mgr III	*3*
Housing Mgr IV	*1*
Interviewer	*4*
Leasing Agent	*3*
Leasing Supervisor	*1*
Maint Clerk I	*2*
Maint Clerk II	*4*
Maint Clerk III	*5*
Maint Control Clerk	*1*
Maint Heating Mechanic	*8*
Maint Mechanic	*105*
Maint Oper Plnr & Sched	*1*
Maint Supv I	*13*
Maint Supv II	*5*
Maint Supv III	*5*
Maint Worker I	*1*
Maint Worker II	*95*
Maint Worker III	*9*
Maint Worker IV	*3*
Management Analyst	*1*
Mason	*1*
Materials Handler	*3*
Mechanical Shop Supv	*1*
Mgmt/Maint Analyst	*1*
MTCS Supervisor	*1*
Office Assist	*1*
Office Assist-Applications	*1*
Office Assist-Leasing	*1*
Painter	*19*
Painting Supv	*1*

		Partnership Hsg Coord	*1*
		Paving & Drainage Supv	*1*
		Pipefitter	*8*
		Pipefitter Supv	*1*
		Plant Oper Supt	*1*
		Plant Oper Supv	*2*
		Plasterer	*10*
		Plastering Supv	*1*
		Principal Clerk	*4*
		Program Coordinator	*1*
		Program Mgr	*1*
		Quality Assurance Specialist	*3*
		Receptionist	*1*
		Regional Director	*3*
		Regional Maint Serv Supv	*2*
		Regional Supply Clerk	*1*
		Relocation Manager	*1*
		Resident Reloc Spec	*4*
		Roofer	*2*
		Roofing Supv	*1*
		Senior Analyst	*2*
		Sr Clerk Typist	*1*
		Supt-Rehab Hsg	*1*
		Tile Setter	*1*
		Tree Trimmer	*2*
		Welder	*1*
		WOC Clerk	*4*
		WOC Program Coor	*1*
Legal Affairs	9	*General Counsel*	*1*
		Legal Secretary	*1*
		Paralegal	*1*
		Secretary	*1*
		Senior Counsel	*4*
		Spec Asst Counsel	*1*
Ombudsman's Office	6	*Admin Specialist*	*1*
		Dir of Ombudsman	*1*
		Ombudsman	*3*
		Senior Ombudsman	*1*
Police Force	199	*Admin Asst*	*1*
		Bldg Monitor Supv I	*2*
		Bldg Monitor Supv II	*1*

		Building Monitor	*112*
		Field Investigation Analyst	*1*
		Planning & Research Mgr	*1*
		Police Dispatcher	*7*
		Police Lieutenant	*2*
		Police Major	*2*
		Police Officer	*54*
		Police Sergeant	*10*
		Principal Clerk	*3*
		Receptionist	*1*
		Sr Admin Asst	*1*
Section 8	76	*Admin Asst*	*1*
		Admin Asst-Ops	*1*
		Admin Program Admin	*1*
		Admin Program Integrity	*1*
		Admin Site Based Programs	*1*
		Continued Assist Manager	*1*
		Customer Relations Manager	*1*
		Housing Inspector-SB	*1*
		Inspection Manager	*1*
		Inspection Scheduler	*2*
		Inspector	*11*
		Lease & Contract Manager	*1*
		Office Assist-Apps & WL	*1*
		Office Assist-SB	*1*
		Production QC-Apps & WL	*1*
		Production QC-CA	*1*
		Production QC-CR	*1*
		Production QC-Inspect	*1*
		Production QC-Integrity	*1*
		Production QC-Lease/Contract	*1*
		Production QC-SB	*1*
		Prog Integrity Spec II	*1*
		Prog Spec I-Apps & WL	*4*
		Prog Spec I-CA	*12*
		Prog Spec I-Contract	*4*
		Prog Spec II-Cont Adm	*1*
		Prog Spec II-CR	*3*
		Prog Spec II-Elig	*3*
		Prog Spec II-Lease	*5*
		Prog Spec II-SB	*2*
		Program Analyst	*2*
		Pub & Asst Hsg Prog Asst	*1*

		Receptionist	*1*
		Sr Admin Asst	*1*
Resident Advisory Board	1	*Principal Clerk*	*1*
Step-Up	1	*Admin Asst*	*1*
Urban Revitalization Demonst	12	*Admin Asst*	*3*
		Consent Decree Proj Coord	*1*
		Development Project Mgr	*1*
		Dir of Capital Planning	*1*
		Real Estate Dev Analyst	*3*
		Real Estate Dev Mgr	*3*

NOTICE TO APPLICANTS AND RESIDENTS WITH DISABILITIES WHO MAY HAVE BEEN DISCRIMINATED AGAINST BY THE HOUSING AUTHORITY OF BALTIMORE CITY

On _____ , 2004, the Federal District Court of Maryland entered a Consent Decree settling a housing discrimination lawsuit brought by the United States Department of Justice and individual persons with disabilities (represented by the Maryland Disability Law Center) against the Housing Authority of Baltimore City (HABC). The lawsuit alleged that HABC discriminated against persons with disabilities in violation of several federal laws.

Under the Consent Decree, people who have physical, mental or emotional disabilities and who believe they were discriminated against by HABC may be eligible to receive money damages. If you or a member of your household has a disability and you believe HABC has discriminated against any of you in at least one of the ways listed below, you should file a Claim Form. To do so, please contact the Claims Administrator by [insert date as listed below], using the contact information provided at the end of this Notice.

You or a member of your household has a disability, and:

a. Requested a reasonable accommodation or any changes to HABC rules or polices that you needed because of your disability, and HABC did not respond to the request or provided an insufficient response, or HABC improperly denied your request.

Or:

b. Lived in an HABC public housing unit that was not fully accessible to you or a member of your household because of a disability, even though you or a member of your household asked HABC to make changes to your unit that would have made it accessible.

Or:

c. Reached the top of HABC''s public housing waiting list and were not able to move into a public housing unit, or were delayed in moving into a housing unit, because you or a family member needed a unit with accessible features and the units HABC offered to you did not have the necessary accessible features.

Or:

d. Needed a Zero or One-Bedroom unit, and were not allowed to apply for or move into "mixed population" public housing (previously referred to as "Senior

Housing") or at some point were discouraged by HABC from applying for mixed-population housing.

Or:

e. Were provided with a Section 8 Voucher (Housing Choice Voucher) to rent a unit from a private landlord but you were not able to use your voucher due to disability-related reasons, and you requested assistance from HABC but HABC did not provide you with the additional help it should have provided because of your disability.

Or:

f. Had difficulty getting into or using services at HABC''s administrative offices (300 Cathedral Street, 417 E. Fayette Street, 1501 St. Paul Street, 312 North Martin Luther King Boulevard) or the common use areas at HABC''s public housing developments, because of your disability.

Or:

g. HABC denied you the opportunity to live in public housing or to participate in the Section 8 program, or otherwise discriminated against you on the basis of your disability.

If you or a member of your household has a disability and either of you had one of the experiences listed above, or HABC has discriminated against you in other ways because of your disability, please contact the Claims Administrator to obtain a claims form using the contact information below.

[insert name, address, fax # and
toll-free phonenumber of Claims Administration firm]

You must file your Claim Form with the_____ on or before [date]. The Claim Form must be postmarked no later than [same date] or sent by fax by that date

Definition of Aggrieved Persons

"Aggrieved persons" are persons who:

(1) Have the following relationship to the Housing Authority of Baltimore City (HABC):

(a) Are current residents of HABC public housing programs or have been residents of HABC public housing programs within ten years prior to the effective date of the Consent Decree; or

(b) Are current participants in the Section 8 voucher program operated by HABC or have participated in the Section 8 voucher program operated by HABC within ten years prior to the effective date of the Consent Decree. As used herein, a Section 8 "participant" is a person who has received a Section 8 voucher; or

(c) Have applied for HABC public housing or applied for participation in the Section 8 voucher program operated by HABC within ten years prior to the effective date of the Consent Decree.

AND:

(2) Meet or met the definition of being a person with a disability, or have or had a household member who met or meets the definition of being a person with a disability, during the time that they (or the household member) have or had the relationship to HABC as set forth in (1) above. The definition of a person with a disability is met if the person or the household member meets or met one of the definitions established in any one of the following laws[1]:

(a) The Fair Housing Act, 42 U.S.C. §§ 3601 et seq.

(b) The Americans with Disabilities Act of 1990, 42 U.S.C. §§ 12131-12134, or

(c) The Rehabilitation Act of 1973, 29 U.S.C. §§ 794, et seq;

[1] While receipt of any particular type of public assistance is not required to make such a showing, evidence that an individual receives Supplemental Security Income or Social Security Disability Insurance benefits under the Social Security Act shall be sufficient to establish that an individual meets the definition of a person with a disability.

AND:

(3) Fits into one or more of the following categories:

(a) Made a request for a reasonable accommodation or modification that was ignored, received an insufficient response, or was improperly denied by HABC. In the event that HABC failed to respond to a request for an accommodation within 30 business days after receiving all needed information and documentation from the resident, the request shall be considered to have been denied.

Or:

(b) Resided in a public housing unit that was not fully accessible to them or a household member with a mobility impairment and/or vision or hearing impairment, or did not include the accessible features that they or the household member required. (Fully accessible as used in this section means the unit or common area complies with the Uniform Federal Accessibility Standards (UFAS), 24 C.F.R. § 8.32, Appendix A to C.F.R. § 40, and the Americans with Disabilities Act Standards for Accessible Design (ADA Standards), Appendix A to § 36, excluding the elevator exception included in §§ 4.1.3(5) and 4.1.6(1)(K) of the ADA standards). This category includes residents who paid for modifications to public housing units because the units were not accessible and seek reimbursement for those disability related modifications.

Or:

(c) Were denied the opportunity to reside in or were delayed in residing in HABC public housing because there were no units or no units of a particular size available to meet the disability related needs of the person or household member with a disability. This category includes, but is not limited to, persons who were offered one or more public housing unit(s) but did not accept the unit(s) because the offered unit(s) did not have the accessibility features needed by the person or a household member.

Or:

(d) Were provided a Section 8 voucher and did not lease a unit using the voucher or were delayed in their ability to lease a unit using the voucher because HABC failed to comply with its obligation to provide assistance to Section 8 applicants and participants with disabilities under applicable HUD regulations.

Or:

(e) Were denied the opportunity to apply for or to reside in "mixed population" public housing because HABC was improperly favoring elderly individuals in its admissions to this type of housing. A person is considered to have been denied the opportunity to apply for or to reside in mixed population public housing if he or she:

(i) was under 62 years of age when he or she applied for housing;
(ii) had a disability or a household member with a disability during the time he or she applied or were waiting for housing;
(iii) applied for public housing or to the Section 8 program within ten years prior to the effective date of the Consent Decree,
(iv) needed a zero or one bedroom unit, and
(v) did not state that he or she would be unwilling to accept a unit in mixed population public housing if they were offered that opportunity.

Or:

(f) Were unable to access or had difficulty accessing common areas in HABC housing developments or HABC's administrative offices and would have been better able to access such areas if the site(s) complied with applicable requirements under Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act, the Fair Housing Act, and/or applicable regulations. This category includes residents who paid for modifications to common areas because they were not accessible and seek reimbursement for those disability related modifications.

Or:

(g) Were denied public housing by HABC, denied the opportunity to participate in HABC's Section 8 program, or were otherwise discriminated against by HABC with respect to housing on the basis of their disability.

RELEASE OF CLAIMS

For the sole consideration of payment to me of $_____ and the covenants and agreements made and reflected in the Consent Order entered in _____[Case Name]_____, Case No. ___[Case No.]___ (D. Md), I hereby remise, release and forever discharge the Housing Authority of Baltimore City, its present and former elected and appointed officials, directors, employees, agents and attorneys from all legal and equitable or administrative claims or causes of action arising out of any of the allegations made in the above referenced case and all claims which were or could have been pursued based on these allegations, including attorney fees and costs. I understand that this release of claims shall be binding upon my heirs, successors, executors, administrators and assigns. I also understand and acknowledge that the United States, the Maryland Disability Law Center, the Housing Authority of Baltimore City, and/or the Court are the entities responsible for the implementation and enforcement of the aforementioned Consent Order. I hereby waive any right that I may have to take legal action in the future to implement, enforce, or attempt to modify the terms of the Order.

This release constitutes the entire agreement between the Housing Authority of Baltimore City and myself, without exception or exclusion.

I have read this release and understand the contents thereof and I execute this release of my own free act and deed. I also acknowledge that I have had the opportunity to review the terms of this Release with an attorney of my choosing, and to the extent that I have not obtained that legal advice, I voluntarily and knowingly waive my right to do so.

_____
Name

_____
Social Security Number

STATE OF MARYLAND

SUBSCRIBED and sworn to before me
this _____ day of _____, 200__.

_____
Notary Public
My Commission expires: