



Reasonable Accommodations Request Application Guide

APPLICATION INSTRUCTIONS:

Please use this application for when you are applying for a reasonable accommodation from a zoning regulation or process in order to eliminate barriers to accessing housing opportunities. Pursuant to the City Code Chapter 14-8B-11: "A request for reasonable accommodation may be made by any individual with a disability, his or her representative, or a developer or provider of housing individuals with disabilities, when the application of a regulation, policy, practice, or procedure in Title 14 acts as a barrier to fair housing opportunities".

Following is a list of required items to include with your reasonable accommodations application. For your application to be considered complete, you must provide responses to all required information below. Failure to provide this information may delay the review of your application. If you have any comments, questions, or concerns, please contact our department at 319-356-5230.

Locations Tab

Add Location:

Add the location of where the proposed project will occur. You may search for the location by parcel number or project address using the address number and street name only.

Type Tab

Description:

Please explain the purpose of the reasonable accommodation you are requesting. (Examples: Installing a ramp access to the entrance of the dwelling, request for widened doorways in unit, installing a fence). Please contact Urban Planning staff for assistance in identifying reasonable accommodations request requirements.

Contacts Tab

Add Contacts:

Add required contacts, including the applicant, property owner, and contact person or any other relevant persons. Make sure contact information is current for each contact. Please search the existing contact list first when entering a name to avoid creating duplicate copies of the same contact.

More Info Tab

Please provide a written description to the following questions.

1. **Describe the specific need the disability creates and the requested accommodation.**

2. **Confirm and explain that the requested accommodation is intended to be used by an individual with a disability who resides or will reside on the property.**
3. **Explain why the requested accommodation is necessary to afford an individual with a disability equal opportunity to use and enjoy residential use.**
4. **If we have questions about your request for reasonable accommodation and you would like us to contact someone assisting you with this request, instead of you, please give us that person's name, address, and telephone number.**

Review and Submit Tab

Make sure all the information is accurate and current. Staff will review the application for completeness and contact you with any questions. A decision will be made within 30 days of a complete application. Additional questions can be directed to planningzoning@iowa-city.org or by phone at 319-356-5230.