California Tenants – Use this letter if you are a tenant who needs a change in policy or to modify your home because of a disability.

Instructions:

1. Click here to open a Microsoft Word version of this sample letter
2. The Microsoft Word-version will have the same blank spaces as this version, but will not have the comments in the margin. Fill out the blanks in the Microsoft Word-version using the comments on the margins of this version as a guide.
3. Use this sample letter if you are a tenant who needs a change in policy or to modify your home because of a disability.
4. Please note that you should tailor this letter to the facts in your case. This template is not a substitute for legal advice. If you need help finding a tenant attorney, please see the Tenants Together Directory.
5. Once filled out with your information and sent to your landlord, keep a copy for your records.

Sent via Certified Mail- Return Receipt Requested

Dear (__________),

I have been a tenant at (__________) since (__________). I write to request a reasonable accommodation as permitted under the Federal Fair Housing Act (42 U.S.C. §§ 3601-3619) and the California Fair Employment and Housing Act ("FEHA") (Ca Civil Code §§ 54, et seq).

Under the Fair Housing Act and California FEHA, a landlord is required to accommodate a tenant with a disability by changing or making an exception to a rule or policy, as long as the requested accommodation is reasonable and related to the disability. Additionally, a landlord cannot refuse to
permit a tenant to make reasonable modifications of existing premises if such modifications may be necessary to afford the tenant equal opportunity to use and enjoy the dwelling.

I or a member of my household request that:

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

This request is related to my or a member of my household’s disability because:

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Please respond to this request in writing within [_____] days. I can be contacted at [_________]. I have kept a copy of this letter for my records. Thank you for your attention to this serious matter.

Sincerely,

[_________]
[_________]