



HOUSING SENIORS | CREATING HOPE | PILOTING CHANGE

Reasonable Accommodations for Housing Applications

WHAT IS A REASONABLE ACCOMMODATION?

A reasonable accommodation is a request to change the policies or practices of a property to allow a person with a disability an equal opportunity to live in an apartment.

Reasonable accommodations can be used to request changes to a specific housing unit or to make an allowance to housing policies at the property once a resident is living there. Reasonable accommodations can also be used to request an allowance to the screening criteria of a property so that people with disabilities are able to access housing.

USING REASONABLE ACCOMMODATIONS TO OVERCOME SCREENING BARRIERS

If you have poor credit, eviction history, bad landlord references, or criminal history that prevents you from being approved for housing and you are disabled, you may qualify for a Reasonable Accommodation.

To request a Reasonable Accommodation to the screening criteria, you must provide documentation from a professional that says you have a disability, and the requested accommodation is necessary because of your disability.

If your barriers happened when your disability was untreated and you are now receiving treatment, it is helpful to provide documentation of your treatment as well. For example, if you received a poor reference because of your conduct in housing while you were not receiving treatment, and now you are getting care and not having any conduct issues, you will want to provide a letter from your provider confirming your current treatment.

SAMPLE LETTERS

Two sample Reasonable Accommodation requests are attached: one that addresses poor credit history, and one that addresses criminal history. Both of these sample letters came from Disability Rights Oregon's Fair Housing Handbook. For more detailed information about Reasonable Accommodations and for more sample letters, go to <https://www.drOREgon.org/housing> or call Disability Rights Oregon at 503-243-2081.

*For updates or changes to this information please contact Northwest Pilot Project at
(503) 227-5605 or housing@nwpilotproject.org
Updated 9-2026*

**Sample Letter: Reasonable Accommodation Request
for Modification of Admissions Policy re: Poor Credit History**

[Your Name]
[Your Address]
[Your City, State, Zip Code]

[Date of the letter]
[Name of Apartment Manager/Housing Authority/Landlord]
[Housing Complex]
[Address]
[City, State, Zip Code]

Dear [Apartment Manager/Housing Authority/Landlord]:

I am applying to be a tenant at [address]. I have poor credit history due solely to my disability. My poor credit is the result of hospital bills which I incurred for treatment of my disability.

I am requesting that you modify your rules regarding credit history and disregard my poor credit as a reasonable accommodation under the Fair Housing Act. I am enclosing proof that I have sufficient income to cover rent. If necessary, I can arrange to have a co-signer on my lease.

Attached please find documentation from my [your professional (physician, psychiatrist)] of my disability and proof of my ongoing treatment.

Please reply in writing regarding this request for an accommodation within 10 business days. Thank you for your consideration and I look forward to receiving your reply.

Sincerely,

[Your Signature]
[Your Name]

Sample Letter: Reasonable Accommodation Request for Modification to Admissions Policy re: Criminal History

[Your Name]
[Your Address]
[Your City, State, Zip Code]

[Date of the letter]
[Name of Apartment Manager/Housing Authority/Landlord]
[Housing Complex]
[Address]
[City, State, Zip Code]

Dear [Apartment Manager/Housing Authority/Landlord]:

I am applying to be a tenant at [address]. I have a criminal record due solely to my disability. At this time, I am in treatment and have been for [period of time you have been receiving proper medical treatment for your disability]. I am requesting that you modify your rules regarding criminal history and disregard my criminal record as a reasonable accommodation under the Fair Housing Act.

Attached please find documentation from my [your professional (physician, psychiatrist)] of my disability and proof of my ongoing treatment. In addition, please find attached documentation from my [your professional (attorney, judge)] that my crime was the result of my disability, that I have received effective treatment and as a result will not re-offend.

Please reply in writing regarding this request for an accommodation within 10 business days. Thank you for your consideration and I look forward to receiving your reply.

Sincerely,

[Your Signature]
[Your Name]