



5) Authorization for Release of Information:

I hereby certify the information in this Reasonable Accommodation request is true and accurate. I give KCHA permission to gather information from or talk with my knowledgeable professional about my request.

Signature of the applicant/resident requesting the accommodation:

\_\_\_\_\_  
 Signature of Party Requesting Accommodation

\_\_\_\_\_  
 Date

Signature of the Property Manager:

\_\_\_\_\_  
 Property Manager or Designate

\_\_\_\_\_  
 Date

**Title 18, Section 1001 of the U.S. Code states that a person whom knowingly and willingly makes false and fraudulent statements to any department of the United States Government, HUD, a public housing authority (PHA), and any owner (or employee of HUD, the PHA, or the owner) may be subject to penalties that include fines and/or imprisonment.**

**FOR KCHA STAFF USE ONLY**

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- Needs Executive Director/Assistant Director Review
- Approved at property (File completed copies in tenant file and Reasonable Accommodation Log)
- EXPEDITE. (Please check this box if the request should be considered on an emergency basis)