

Portofino of Vacaville Homeowners Association

C/O C & C Property Management

APPLICATION FOR A FAIR HOUSING ACCOMMODATION - PARKING

1. Name of Applicant: _____
2. Address: _____
3. Email Address:: _____
4. Telephone Number: _____
5. Describe the accommodation you are requesting, and the specific rule, policy, practice, or procedure which needs to be changed to meet the needs of your disability:

6. Give the reason that the accommodation is necessary for you to use and enjoy the housing:

7. If we have questions about your request for reasonable accommodation and you would like us to contact someone who is assisting you with this request, instead of you, please give us that person's name, address, and telephone number. _____

8. _____
Signature of Applicant

Date

Please attach any documents that you think support your request for reasonable accommodation and would assist us in considering your request.

Visit our Website! www.vacavilleportofino.org

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