



ST. LOUIS
HOUSING
AUTHORITY

SECTION 504

REASONABLE ACCOMMODATIONS
POLICY AND PROCEDURES

REASONABLE ACCOMMODATION POLICY AND PROCEDURES

I. POLICY STATEMENT

The St. Louis Housing Authority (SLHA) is committed to ensuring that its policies and procedures do not deny individuals with disabilities the opportunity to participate in or benefit from the programs, services and activities offered by SLHA.

Therefore, if an individual with a disability requires an accommodation such as an accessible feature or a modification of a SLHA policy, SLHA will thoroughly and promptly consider such request, and will engage in an open and collaborative dialogue with applicants, residents, tenants and other individuals seeking reasonable accommodations in order to best serve the needs of all parties involved in accordance with applicable laws and SLHA policies.

SLHA will make reasonable accommodations when such accommodations may be necessary to afford a resident, participant or applicant with a disability the equal opportunity to use and enjoy a dwelling unit, including public and common use areas, unless doing so would result in a fundamental alteration in the nature of the program or an undue financial and administrative burden.

A copy of this SECTION 504 REASONABLE ACCOMMODATION POLICY AND PROCEDURES will be posted in the St. Louis Housing Authority office located at 3520 Page Blvd., St. Louis MO 63106, on SLHA's website at <https://www.slha.org>, and in the management office of each property where SLHA public housing or PBV units are located. In addition, individuals may request a copy of this Policy from SLHA's Section 504 Coordinator.

In addition, a Notice of Right to Reasonable Accommodation **[Appendix A]** will be provided to all applicants, and annually to all residents and participants at the time of their recertification.

This Policy should be read consistent with the SLHA Administrative Plan. In the event of any conflict between this Policy, Notice of Rights, and/or the Administrative Plan, the language that is required or consistent with the applicable law(s) then in effect will be controlling.

II. LEGAL AUTHORITY

This Policy is based on and in compliance with: Section 504 of the Rehabilitation Act of 1973 (Section 504); Title II of the Americans with Disabilities Act of 1990 (ADA); the Fair Housing Act of 1968, as amended (Fair Housing Act); the Architectural Barriers Act of 1968; 24 C.F. R. Part 8; and the Missouri Human Rights Act.

III. MONITORING

SLHA has designated an individual as the Section 504 Coordinator. The Section 504 Coordinator is responsible for monitoring SLHA's compliance with this Policy. Individuals who have questions about this Policy, including its interpretation or implementation, can contact SLHA's Section 504 Coordinator as follows:

Attn: Section 504 Coordinator
St. Louis Housing
3520 Page Blvd.
St. Louis, MO 63106

Tel: (314) 531-4770
Fax: (314) 531-0184
TDD: (314) 286-4223
Section504@slha.org

IV. TRAINING

SLHA's Section 504 Coordinator will ensure that appropriate SLHA staff receive adequate training about this Policy and applicable federal, state, and local requirements regarding reasonable accommodations.

V. REASONABLE ACCOMMODATION DEFINED

A "reasonable accommodation" is a change, modification, or adaptation to a policy, program, service, or facility that is necessary to allow an applicant or tenant with a disability the equal opportunity to participate fully in a program and/or take advantage of a service, program, or activity, including the use and enjoyment of a dwelling unit, and public or common use areas.

A disabled person requesting a reasonable accommodation must show an identifiable relationship, or nexus, between the requested accommodation and the individual's disability.

A person with a disability may request a reasonable accommodation at any time during the application process, residency in public housing, or participation in the Housing Choice Voucher Program.

A request does not need to be made in a particular manner or at a particular time. An eligible person does not need to personally make the request; it can be made by a family member or someone else acting on the person's behalf. The decision to approve or deny a request for reasonable accommodation is made on a case-by-case basis, taking all relevant considerations into account.

In general, however, SLHA will grant a request for a reasonable accommodation, unless the individual is not disabled; there is no nexus between the requested accommodation and the disability; or the request is not reasonable because granting the request would impose an undue administrative and financial burden upon SLHA or would fundamentally alter the nature of the programs, services, or activities of SLHA. In the event SLHA denies a request for accommodation, the Section 504 Coordinator will offer alternative accommodation, if feasible.

VI. WHO MAY REQUEST A REASONABLE ACCOMMODATION

This Policy applies to all applicants to and participants in SLHA's public housing and voucher programs with a disability or disabilities. The definition of "disability" for purposes of this Policy is "a physical or mental impairment that substantially limits one or more major life activity." Therefore, a person with a disability for purposes of this Policy is "an individual who has a physical or mental impairment that substantially limits one or more major life activity, or who has a history of, or who is regarded as having, such an impairment." Major life activities include functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, and learning.

The definition of disability does not include current use of alcohol that prevents the individual from participating in an SLHA program or interferes with the rights of others; any individual who is currently engaged in illegal drug use; and any person with a disability who poses a direct threat or substantial risk of harm to others that cannot be controlled with a reasonable accommodation.

VII. REQUESTING A REASONABLE ACCOMMODATION

A person with a disability may request a reasonable accommodation at any time during the application process or participation in one of SLHA's housing programs.

Requests for reasonable accommodation may be made to SLHA staff or directly to the Section 504 Coordinator either in person at SLHA's office (3520 Page Blvd., St. Louis, MO) or by any of the following means:

**Attn: Section 504 Coordinator
St. Louis Housing Authority
3520 Page Blvd.
St. Louis, MO 63106**

Tel: (314) 531-4770

Fax: (314) 531-0184

TDD: (314) 286-4223

Section504@slha.org

VIII. PROCESSING REQUEST FOR REASONABLE ACCOMMODATION

A "Request for Reasonable Accommodation" ("Request Form") **[Appendix B]** will be provided to all applicants, residents, and/or individuals who may want to request a reasonable accommodation. However, requests for reasonable accommodation may be submitted in writing, orally, or by any other equally effective means of communication. If needed, SLHA will assist the individual in completing the Request Form. The Request Form may also be provided in an alternative format, upon request.

Upon receipt of a request (regardless of the form of request – written, oral or otherwise) by an SLHA employee, that employee will forward the request to the Section 504 Coordinator. Within fourteen (14) calendar days of the date on the request, the Section 504 Coordinator will respond to the request in writing, acknowledging receipt of the request. The Section 504 Coordinator will notify the individual at that time if additional information or documentation is needed. The written notification will provide the individual with a deadline for submitting the information requested.

Additional information or documentation may be required if, for example, the individual's disability or need for the accommodation is not apparent or readily known to SLHA. If SLHA requires verification of the individual's disability and/or need for the accommodation, the Section 504 Coordinator will send a Reasonable Accommodation Verification Form **[Appendix C]** to the person identified in the Request Form within fourteen (14) days of receipt of the completed Request Form containing the identity of the person to whom verification can be sent.

Within twenty-eight (28) calendar days of receipt of the request or receipt of all required supporting documentation (including verification of disability and/or need for the requested accommodation), whichever is later, the Section 504 Coordinator will provide written notification to the resident (or applicant) of its decision on the request. Verifications are discussed further in Section VIII below. Upon request, the written notification will be provided in an alternate format.

If additional information or documentation is required and the Section 504 Coordinator does not receive this information or if the information or documentation does not establish that the individual is eligible for the accommodation, the request will be denied. In denying the request, SLHA will inform the individual of the reason(s) for the denial and the right to request a meeting and/or hearing pursuant to SLHA's Grievance Policy.

If SLHA believes that the request is not reasonable (i.e., it would impose an undue financial or administrative burden or it would fundamentally alter the nature of SLHA's programs), SLHA will engage in an interactive process with the individual where they will discuss whether there is an alternative accommodation that would effectively address the individual's disability-related needs that is reasonable. If the alternative accommodation would effectively meet the individual's disability-related needs and is reasonable, SLHA will grant it. If there is not such an alternative accommodation, however, SLHA may deny the request. In denying the request, SLHA will inform the

individual of the reason(s) for the denial and the right to request a meeting and/or hearing pursuant to SLHA's Grievance Policy.

If a reasonable accommodation is approved, it will be implemented promptly.

IX. Verification

SLHA may request documentation of the need for a reasonable accommodation as identified on the Request Form. SLHA may also need to verify the existence of a disability, to the extent necessary to ensure that the individual who made the request has a disability-based need for the requested accommodation.

SLHA will **not** require individuals to disclose confidential medical records in order to verify disability and will **not** require specific details regarding the individual's disability or the nature or extent of the disability. SLHA will only request documentation to confirm the disability-related need for the requested reasonable accommodation using the Reasonable Accommodation Verification Form **[Appendix C]**.

If SLHA receives documentation that contains an individual's specific diagnosis, information regarding the individual's treatment, and/or information regarding the nature or severity of the individual's disability, SLHA will immediately dispose of this confidential information and note in the individual's file that it received verification of disability (**without** referencing the specific diagnosis), the date received, and the name and address of the person/organization that provided the verification.

Verification of a disability and the need for the requested accommodation(s) may be provided by and of the following:

- a. a doctor or other health professional;
- b. a peer support group;
- c. a non-medical service agency; or
- d. a reliable third party who is in a position to know about the disability.

X. Denial of Request for Reasonable Accommodation

SLHA will deny a request for reasonable accommodation if:

- a. there is no disability;
- b. there is no disability-related need for the accommodation;
- c. granting the requested accommodation would result in violation of state and/or federal law; or
- d. granting the requested accommodation would cause, any one of the following:
 - i. a fundamental alteration in the nature of SLHA's programs;
 - ii. an undue financial burden on SLHA; or
 - iii. an undue administrative burden on SLHA.

If a request for reasonable accommodation is denied, SLHA will provide a written explanation of the reason for the denial. If an applicant or participant has additional information that may support the request for reasonable accommodation, the Section 504 Coordinator may review that additional information in further consideration of the request for reasonable accommodation.

XI. Transfer as a Reasonable Accommodation

SLHA will not require a person with a disability to accept a transfer in lieu of providing a reasonable accommodation. However, if a public housing resident with a disability requests a dwelling unit modification that involves structural changes, including, but not limited to, widening entrances, rooms, or hallways, and there is a vacant, comparable, and appropriately sized UFAS-compliant unit at that resident's current public housing site or an adjacent site, SLHA may offer to transfer the resident to the vacant unit in his/her current site or adjacent site in lieu of providing structural modifications.

If the resident rejects the offered transfer, SLHA will make modifications to the resident's unit unless doing so would be structurally impracticable or would result in an undue financial and administrative burden.

If the resident accepts the transfer, SLHA will work with the resident to obtain moving expenses from social service agencies or other similar sources. If that effort to obtain moving expenses is unsuccessful within thirty (30) days of the assignment of the dwelling unit, SLHA shall pay the reasonable moving expenses, including utility connection fees and deposits.

XII. Housing Choice Voucher - Reasonable Accommodations [24 C.F.R. § 8.28 (a)]

Examples of reasonable accommodations for participants or applicants to SLHA's voucher programs may include, but are not limited to:

- A. **Issuing a Voucher.** When issuing a voucher as an accommodation, SLHA will include a list of current available accessible units known to SLHA, if requested by the participant and, if necessary, otherwise assist the family in locating an available accessible dwelling unit.
- B. **Extension to Voucher.** Extensions beyond the maximum term of one hundred twenty (120) days are available as a reasonable accommodation to eligible individuals with disabilities. These extensions are subject to documentation that a diligent effort to locate a unit has been conducted considering any impediments to searching because of a family member's disability.
- C. **Exception/Increase to Payment Standard.** SLHA may, if necessary, as a reasonable accommodation for an individual with a disability, approve a family's request for an exception to the payment standard amount under the Housing Choice

Voucher Program. Upon request by an applicant, participant, or their representative, SLHA can grant an exception to the payment standard up to 120% of the Fair Market Rent ("FMR"). However, the applicant, participant or the representative, must provide documentation of the need for the exception to the payment standard in accordance with this Policy.

In exceptional cases, SLHA may ask the Assistant Secretary for Public and Indian Housing of the U.S. Department of Housing and Urban Development ("HUD") for an exception payment standard amount over 120% of the FMR, provided the applicant, participant or the representative provides the appropriate supporting documentation.

XIII. Assistance Animals

SLHA will modify or make exceptions to policies governing animals if necessary to permit a person with a disability to utilize the animal for assistance. Assistance animals are not pets. They are animals that do work, perform tasks, assist, and/or provide therapeutic emotional support for individuals with disabilities. There are two types of assistance animals:

- (1) service animals, and
- (2) support animals

Service animal means "a dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual or other mental disability. Under the ADA, other species of animals, whether wild or domestic, trained or untrained, are not service animals for the purposes of this definition. In addition, the work or tasks performed by a service animal must be directly related to the individual's disability. [28 C.F.R. §§ 35.104; 36.104].

Support animal means another animal that does not qualify as a "service animal" but that does work, performs tasks, provides assistance, and/or provides therapeutic emotional support for individuals with disabilities, whether trained or untrained.

Due to the unique nature of housing, a person with a disability may need an assistance animal in their home that provides disability-related assistance, even if the animal is not individually trained as a service animal. However, an animal that does not qualify as either a service animal or a support animal is a pet.

SLHA may request verification in accordance with this Policy.

XIV. Right to Appeal Decision/Grievance Process

If a participant or applicant disagrees with a decision to deny a request for reasonable accommodation, they may request a hearing by emailing Hearings@slha.org. Any such applicant or participant may also submit a written request for hearing at SLHA's office, located at 3520 Page Blvd, St. Louis MO 63106.

If a participant or applicant feels that they have been discriminated against, including that their reasonable accommodation request has been improperly denied, they can contact the Missouri Commission on Human Rights or the local HUD Fair Housing office, as follows:

**Missouri Commission on Human Rights
421 E. Dunklin
P.O. Box 1129
Jefferson City, MO 65102-1129**

**Tele: (573) 751-3325
Fax: (573) 751-2905
Toll-Free Complaint Hotline: 1-877-781-4236
Relay Missouri: 711
Relay Missouri: 1-800-735-2966(TDD)
MCHRIntake@labor.mo.gov**

**U.S. Department of Housing and Urban Development
Office of Fair Housing and Equal Opportunity
Kansas City Regional Office of FHEO
400 State Avenue
Kansas City, Kansas 66101**

**Tele: (913) 551-6958
Toll-Free 1-800-743-5323
TTY (913) 551-6972
ComplaintsOffice07@hud.gov**

APPENDIX A



NOTICE OF RIGHT TO REASONABLE ACCOMMODATION

WHAT IS A REASONABLE ACCOMMODATION?

A "reasonable accommodation" is a change, modification, or adaptation to a policy, program, service, or facility that is necessary to allow an applicant or tenant with a disability the equal opportunity to participate fully in a program and/or take advantage of a service, program, or activity, including the use and enjoyment of a dwelling unit, and public or common use areas.

WHO MAY REQUEST A REASONABLE ACCOMMODATION?

A tenant or applicant with a disability may request a reasonable accommodation at any time during the application process or participation in one of SLHA's housing programs. For purposes of this Policy, the term "disability" is defined as (A) a physical or mental impairment that substantially limits one or more major life activities of such individual; (B) a record of such an impairment; or (C) being regarded as having such an impairment.

HOW DO I MAKE A REQUEST FOR A REASONABLE ACCOMMODATION?

You can make a request for a reasonable accommodation by filing out the Reasonable Accommodation Request Form provided with this notice and submitting it to SLHA's Section 504 Coordinator by mail, fax, or email:

**Attn: Section 504 Coordinator
St. Louis Housing Authority
3520 Page Blvd.
St. Louis, MO 63106**

**Fax: (314) 531-0184
TDD: (314) 286-4223
Section504@slha.org**

If you need help filing out this form or if you want to submit your request in some other way, SLHA's Section 504 Coordinator will help you. You can contact the Section 504 Coordinator by phone at (314) 531-4770 or TDD: (314) 286-4223 or by email at Section504@slha.org.

HOW LONG DOES THE PROCESS TAKE?

SLHA will issue a decision regarding a Request for Reasonable Accommodation within twenty-eight (28) calendar days of receiving the Request unless there is a problem getting the information we need to process the request and issue a decision. If a reasonable accommodation is approved, it will be implemented as soon as possible.

WHAT ARE THE REASONS A REASONABLE ACCOMMODATION REQUEST COULD BE DENIED?

SLHA may deny a request for reasonable accommodation in any of the following circumstances:

- The request for reasonable accommodation was not made by or on behalf of an individual with a disability.
- There is no disability-related need for the accommodation.
- The requested accommodation is not reasonable because it would impose an undue financial or administrative burden on SLHA or would fundamentally alter the nature of SLHA's operations.

WHAT HAPPENS IF MY REQUEST FOR REASONABLE ACCOMMODATION IS DENIED?

If a request for reasonable accommodation is denied, SLHA will explain the reason for the denial. If you have additional information that you believe supports your request for reasonable accommodation, you will be allowed to submit that information. You may also request a hearing by emailing Hearings@slha.org.

In addition, if you believe that you have been discriminated against, including that your reasonable accommodation request has been improperly denied, you can contact the Missouri Commission on Human Rights or the local HUD Fair Housing office, as follows:

Missouri Commission on Human Rights

421 E. Dunklin

P.O. Box 1129

Jefferson City, MO 65102-1129

Tele: (573) 751-3325

Fax: (573) 751-2905

Toll-Free Complaint Hotline: 1-877-781-4236

Relay Missouri: 711

Relay Missouri: 1-800-735-2966(TDD)

MCHRIntake@labor.mo.gov

**U.S. Department of Housing and Urban Development
Office of Fair Housing and Equal Opportunity
Kansas City Regional Office of FHEO
400 State Avenue
Kansas City, KS 66101**

**Tele: (913) 551-6958
Toll-Free 1-800-743-5323
TTY (913) 551-6972
ComplaintsOffice07@hud.gov**

APPENDIX B



REASONABLE ACCOMMODATION REQUEST FORM

Head of Household: _____ Date: ____/____/____
(PRINT NAME)
Address: _____ Phone: (____) _____

Requestor: _____
(IF REQUEST MADE BY SOMEONE OTHER THAN HEAD OF HOUSEHOLD)

A tenant or applicant with a disability may request a reasonable accommodation at any time during the application process or during participation in one of SLHA's housing programs. A "disability" is a physical or mental impairment that substantially limits one or more major life activities; a record of such an impairment; or being regarded as having such an impairment. The following member of the household as a disability:

As a result of this disability, the following accommodation is requested: _____

This accommodation is necessary because: _____

By signing below, I authorize St. Louis Housing Authority to verify that I or a member of my household has a disability and has a need for the specific accommodation requested in this form. I also authorize the provider/practitioner listed below to complete and return the Reasonable Accommodation Verification Form to St. Louis Housing Authority and to answer any other questions the St. Louis Housing Authority may have concerning this request. Information obtained under this authorization is limited to the last twelve (12) months.

In order to verify the information in this Request Form, St. Louis Housing Authority may contact:

Name/Title/Company: _____

Address: _____

Phone/Fax: _____ Email: _____

Signature of Requestor _____ Date: _____

Warning: It is a criminal offense to make any materially false, fictitious or fraudulent statement or representation to any department or agency of the United States as to any matter within its jurisdiction, punishable by a fine and/or imprisonment. 18 U.S.C. 1001.

Section 504 Coordinator, St. Louis Housing Authority, 3520 Page Blvd., St. Louis, MO 63106
Fax: (314) 531-0184; Email: Section504@slha.org

APPENDIX C



DISABILITY VERIFICATION FORM

Name of person requesting accommodation: _____

Description of accommodation requested: _____

The term "disability" is defined at 42 U.S.C. § 12102 (1) as (A) a physical or mental impairment that substantially limits one or more major life activities of such individual; (B) a record of such an impairment; or (C) being regarded as having such an impairment.

The term "major life activities" includes, but is not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. 42 U.S.C. § 12102 (2)(A)

I certify that _____ has a disability as that term is defined above.

I verify that this request is directly related to the above-named person's disability and is necessary to afford the above-named person the opportunity to access housing, maintain housing, or fully use/enjoy housing. (Necessary indicates necessity as opposed to a matter of convenience or preference).

I recommend that the accommodation request described above be approved.

I hereby certify that the information above is true and correct.

Signature: _____ Date: _____

Printed Name: _____ Title: _____

Name of Clinic, Hospital, Agency, etc. _____

Address: _____

Phone Number: _____