



COMMUNICATING WITH TENANTS

Dear Owner/Property Management Agent,

The Unit Occupancy Survey is to be used in gathering information about the accessibility needs of your tenants and to assist you in completing the Utilization Survey of Occupancy Summary Excel Sheet.

When completing occupancy surveys, it is not necessary to verify or investigate a disability-related request. You may ask tenants and applicants:

“Do you need any accessible features because you or someone in your household has a disability? If so, what type of accessible features or accessible housing do you need?”

It may be helpful to give examples of accessible features from the lists in the policy manual, or to explain that “accessible features are things like ramps, grab bars, lowered cabinets, and blinking doorbells that help people with disabilities use the unit.”

You may not ask about the nature or severity of the disability, and you may not ask for medical records, medical diagnoses, or verification from third parties. Some disabilities are intermittent or not apparent, and different individuals with similar disabilities may need different features, so you should not guess or assume what an individual may need.

Developments are required to maintain accurate records of all surveys and make them available upon request to the Accessible Housing Program (AChP). One survey is required per unit.



Unit Occupancy Survey



Please fill this out to the best of your knowledge. The Property Management will provide an Individual with a Disability auxiliary aids and services upon request. If you need assistance to complete this form, you or someone acting on your behalf may submit a request to the Property Manager. One survey per household is required.

Property Name:

Property Address:

Date of Survey:

Unit #:

Tenant Name:

Email and/or Phone #:

Preferred method of contact (email, phone, sign language interpreter, video relay service, etc.):

Preferred Language:

Total # of persons in the household:

Accessibility Need Information:

Do you need accessible features? Yes No

If yes, please list which features you need (see below for examples):

Mobility features: Accessible doors and hardware such as lever type handles, Adjustable counter heights, Grab bars, Ground floor unit, Shower seats, Lowered kitchen counters, widened doorways, Lower controls (light switches, thermostats, intercom, doorbells, etc.), Roll-in shower, Wheelchair ramp, Adjustable closet rods, Appliances with buttons/knobs.



Unit Occupancy Survey



Hearing/Vision features: Audible/visual fire and smoke alarms, Audible/visual carbon monoxide detectors, Telephone volume controls and hearing aid compatibility, Protections against protruding objects, Protections against pipes and surfaces, Push button controls for telephones, Range, cooktop, and oven controls, Appliances with buttons/knobs for shape recognition, Braille signs.

Have you requested those features? Yes No

Were the features provided? Yes No

Do you need an accessible unit? Mobility Hearing/Vision No, I don't need
(An accessible unit must be certified by the City and contain specific Mobility Features or specific Hearing/Vision Features.)

Have you requested to transfer to an accessible unit? Yes No Don't know

If yes, what size unit? No. of Bedroom(s): _____ No. of Bathroom(s): _____

Do you have an Assistance Animal(s) (incl. service animals and other types of Assistance Animals)? Yes No

Comments:

Name of person filling out this form:

Print Name

Tenant Signature (optional):
