



**REQUEST FOR ACCOMODATIONS UNDER  
THE AMERICANS WITH DISABILITIES ACT**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt.: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_@\_\_\_\_\_. \_\_\_\_\_

Preferred Communication Method:  Phone  Email

What is the best time to reach you by phone? \_\_\_\_\_

Provide the location (address, nearest Intersection, or other location description) for your request:

Provide a description of the request:

Have you previously reported this request to anyone in City government? If so, please describe.

Is there any other information you can provide that would help to identify or address the request?  
You may include photos and attachments.