

**HOUSING AUTHORITY OF THE CITY AND COUNTY OF DENVER  
REQUEST FOR AN ALTERNATIVE FORM OF COMMUNICATION**

The Housing Authority of the City and County of Denver (“DHA”) shall, upon request, provide alternative forms of communication for individuals who are visually, hearing, mentally or manually impaired. Some examples of alternative forms of communication include, but are not limited to, provision of a sign language interpreter, having material explained orally by staff, or having a third party representative (a friend, relative or advocate) receive, interpret and explain housing materials and be present at all meetings.

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

Address: \_\_\_\_\_  
(Street Address, City, State & Zip Code)

Telephone: \_\_\_\_\_

Please explain what type of alternative communication you require:  
(Example: sign language interpreter, large print documents)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you are requesting a third-party representative, please provide the following information about the individual who will act as your third-party representative:

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

Address: \_\_\_\_\_  
(Street Address, City, State & Zip Code)

Telephone: \_\_\_\_\_

How long will you require a third-party representative? \_\_\_\_\_

**Please note that in certain circumstances DHA, in its sole and absolute discretion, may require you to complete the Request for Accommodation process, as outlined in the Reasonable Accommodation in Housing Guidelines, in order to determine if the requested alternative form of communication is reasonable.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Representative (if applicable)

\_\_\_\_\_  
Date