

# Housing Discrimination Complaint

# U.S. Department of Housing and Urban Development

Office of Fair Housing and Equal Opportunity

OMB Approval No. 2529-0011 (Exp. 09/30/95)

Please type or print this form - Do not write in shaded area

Public Reporting Burden for this collection of information is estimated to average 1.0 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and the Office of Management and Budget, Paperwork Reduction Project (2529-0011), Washington, D.C. 20503. Do not send the completed form to any of these addresses.

**Instructions:** Read this form and the instructions on reverse carefully before completing. All questions should be answered. However, if you do not know the answer or if a question is not applicable, leave the question unanswered and fill out as much of the form as you can. Your complaint should be signed and dated. Where more than one individual or organization is filing the same complaint, and all information is the same, each additional individual or organization should complete boxes 1 and 7 of a separate complaint form and attach it to the original form. Complaints may be presented in persons or mailed to the Regional Office covering the State where the complaint arose (see list on back of form), any local HUD Field Office, or the Office of Fair Housing and Equal Opportunity, U.S. Department of HUD, Washington, D.C. 20410.

**This section is for HUD use only.**

Number:	(Check <input checked="" type="checkbox"/> applicable box): <input type="checkbox"/> Referral and Agency (Specify)	Jurisdiction: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Additional Info	Signature of HUD personnel who established jurisdiction:
Filing Date:	<input type="checkbox"/> Systemic <input type="checkbox"/> Military Referral		

1. Name of aggrieved person or organization (last name, first name, middle initial) Mr., Mrs., Miss, Ms.)	Home Phone: ( )	Business Phone: ( )
Street Address(city, county, State and zip code)		

2. Against whom is this complaint being filed? Name (last name, first name, middle initial)	Phone Number: ( )
Street Address(city, county, State and zip code)	

Check the applicable box or boxes which describe(s) the party named above

Builder  Owner  Broker  Salesperson  Supt. or Manager  Bank or Other Lender  Other

If you named an individual above who appeared to be acting for a company in this case, check  this box  and write the name and address of the company in this space:

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

Name and identify others (if any) you believe violated the law in this case

3. What did the person you are complaining against do? Check  all that apply and give the most recent date these act(s) occurred in block No. 6a below.

Refuse to rent, sell, or deal with you  Falsely deny housing was available  Engage in blockbusting  Discriminate in broker's services

Discriminate in the conditions or terms of sale, rental occupancy, or in services or facilities  Advertise in a discriminatory way  Discriminate in financing  Intimidated, interfered, or coerced you to keep you from the full benefit of the Federal Fair Housing Law

Other (explain)

4. Do you believe that you were discriminated against because of your race, color, religion, sex, handicap, the presence of children under 18, or a pregnant female in the family or your national origin? Check  all that apply:

<input type="checkbox"/> <b>Race or Color</b> <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Other	<input type="checkbox"/> <b>Religion</b> (Specify )	<input type="checkbox"/> <b>Sex</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> <b>Handicap</b> <input type="checkbox"/> Physical <input type="checkbox"/> Mental	<input type="checkbox"/> <b>Familial Status</b> <input type="checkbox"/> Presence of children under 18 in the family <input type="checkbox"/> Pregnant female	<input type="checkbox"/> <b>National Origin</b> <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Other (specify)
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5. What kind of house or property was involved? <input type="checkbox"/> Single-family house <input type="checkbox"/> A house or building for 2, 3, or 4 families <input type="checkbox"/> A building for 5 families or more <input type="checkbox"/> Other, including vacant land held for residential use (explain)	Did the owner live there? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Is the house or property? <input type="checkbox"/> Being sold? <input type="checkbox"/> Being rented?	What is the address of the house or property? (street, city, county, State and zip code)
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6. Summarize in your own words what happened. Use this space for a brief and concise statement of the facts. Additional details may be submitted on an attachment. **Note:** HUD will furnish a copy of the complaint to the person or organization against whom the complaint is made.

6a. When the act(s) checked in Item 3 occur? (Include the most recent date if several dates are involved)
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7. I declare under penalty of perjury that I have read this complaint (including any attachments) and that it is true and correct.	Signature and Date:
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## What Does the Fair Housing Amendments Act of 1988 Provide?

The Fair Housing Act declares that it is national policy to provide fair housing throughout the United States and prohibits eight specific kinds of discriminatory acts regarding housing if the discrimination is based on race, color, religion, sex, handicap, familial status or national origin.

1. Refusal to sell or rent or otherwise deal with a person.
2. Discriminating in the conditions or terms of sale, rental, or occupancy.
3. Falsely denying housing is available.
4. "Blockbusting"--causing person(s) to sell or rent by telling them that members of a minority group are moving into the area.
6. Discrimination in financing housing by a bank, savings and loan association, or other business.
7. Denial of membership or participation in brokerage, multiple listing, or other real estate services.
8. Interference, coercion, threats or intimidation to keep a person from obtaining the full benefits of the Federal Fair Housing Law and/or filing a complaint.

## What Does the Law Exempt?

The first three acts listed above do not apply (1) to any single family house where the owner in certain circumstances does not seek to rent or sell it through the use of a broker or through discriminatory advertising, nor(2) to units in houses for two to-four families if the owner lives in one of the units.

## What Can You Do About Violations of the Law?

Remember, the Fair Housing Act applies to discrimination based on race, color, religion, sex, handicap, familial status, or national origin. If you believe you have been or are about to be, discriminated against or otherwise harmed by the kinds of discriminatory acts which are prohibited by law, you have a right, within 1 year after the discrimination occurred to:

1. **Complain to the Secretary of HUD** by filing this form by mail or in person. HUD will investigate. If it finds the complaint is covered by the law and is justified, it will try to end the discrimination by conciliation. If conciliation fails, other steps will be taken to enforce the law. In cases where State or local laws give the same rights as the Federal Fair Housing Law, HUD must first ask the State or local agency to try to resolve the problem.
2. Go directly to Court even if you have not filed a complaint with the Secretary. The Court may sometimes be able to give quicker, more effective, relief than conciliation can provide and may also, in certain cases, appoint an attorney for you (without cost).

**You Should Also Report All Information** about violations of the Fair Housing Act to HUD even though you don't intend to complain or go to court yourself.

**Additional Details.** If you wish to explain in detail in an attachment what happened, you should consider the following:

1. If you feel that others were treated differently from you, please explain the facts and circumstances.
2. If there were witnesses or others who know what happened, give their names, addresses, and telephone numbers.
3. If you have made this complaint to other government agencies or to the courts, state when and where and explain what happened.

## Racial/Ethnic Categories

1. **White (Non Hispanic)**-A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
2. **Black (Non Hispanic)**-A person having origins in any of the black racial groups of Africa.
3. **Hispanic**-A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish Culture or origin, regardless of race.
4. **American Indian or Alaskan Native**-A person having origins in any of the original peoples of North America, and who maintains, cultural identification through tribal affiliation or community recognition.

5. **Asian or Pacific Islander**-A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.

You can obtain assistance (a) in learning about the Fair Housing Act, or (b) in filing a complaint at the HUD Regional Offices listed below:

**Region I - Boston** (Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont)  
HUD - Fair Housing and Equal Opportunity (FHEO)  
Boston Federal Office Building, 10 Causeway Street  
Boston, Massachusetts 02222-1092

**Region II - New York** (New Jersey, New York)  
HUD - Fair Housing and Equal Opportunity (FHEO)  
26 Federal Plaza  
New York, New York 10278-0068

**Region III - Philadelphia** (Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia)  
HUD - Fair Housing and Equal Opportunity (FHEO)  
Liberty Square Building, 105 S. 7th Street  
Philadelphia, Pennsylvania 19106-3392

**Region IV - Atlanta** (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, Tennessee, Puerto Rico, Virgin Islands)  
HUD - Fair Housing and Equal Opportunity (FHEO)  
Richard B. Russell Federal Building, 75 Spring Street, S.W.  
Atlanta, Georgia 30303-3388

**Region V - Chicago** (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin)  
HUD - Fair Housing and Equal Opportunity (FHEO)  
Ralph H. Metcalfe Federal Building, 77 West Jackson Blvd.  
Chicago, Illinois 60604-3507

**Region VI - Fort Worth** (Arkansas, Louisiana, New Mexico, Oklahoma, Texas)  
HUD - Fair Housing and Equal Opportunity (FHEO)  
1600 Throckmorton, P.O. Box 2905  
Forth Worth, Texas 76113-2905

**Region VII - Kansas City** (Iowa, Kansas, Missouri, Nebraska)  
HUD - Fair Housing and Equal Opportunity (FHEO)  
Gateway Tower 11, 400 State Avenue  
Kansas City, Kansas 66101-2406

**Region VIII - Denver** (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming)  
HUD - Fair Housing and Equal Opportunity (FHEO)  
Executive Tower Building, 1405 Curtis Street  
Denver, Colorado 80202-2349

**Region IX - San Francisco** (Arizona, California, Hawaii, Nevada, Guam, American Samoa)  
HUD - Fair Housing and Equal Opportunity (FHEO)  
450 Golden Gate Avenue  
San Francisco, California 94102-3448

**Region X - Seattle** (Alaska, Idaho, Oregon, Washington)  
HUD - Fair Housing and Equal Opportunity (FHEO)  
Suite 200 Seattle Federal Building, 909 1st Ave-  
Seattle, Washington 98104-1000

## Privacy Act of 1974 (P.L. 93-579)

**Authority:** Title VIII of the Civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988, (P. L. 100-430).

**Purpose:** The information requested on this form is to be used to investigate and to process housing discrimination complaints.

**Use:** The information may be disclosed to the United States Department of Justice for its use in the filing of pattern or practice suits of housing discrimination or the prosecution of the person who committed the discrimination where violence is involved; and to state or local fair housing agencies which administer substantially equivalent fair housing laws for complaint processing.

**Penalty:** Failure to provide some or all of the requested information will result in delay or denial of HUD assistance.

**Disclosure of this information is voluntary.**

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For further information call the Toll-free Fair Housing Complaint Hotline 1-800-669-9777.  
Hearing impaired persons may call (TDD) 1-800-927-9275.

**CONTINUATION OF HUD-903 Charging Party's Last Name vs Resp's Last Name, Resp's First Name - FILE NUMBER: File Numer**

**Continuation of Item 1 - Aggrieved Person # 2 Name, Home Phone & Business Phone**

**Name CP #2                      HOME PHONE: Phone                      BUSINESS PHONE: Bus Phone**

**Continuation of Item 2 - Against whom is complaint being filed - Respondent # 2**

**Name: Last Name, First Name                      BUSINESS PHONE: Bus Phone**

**Respondent # 2 Street Address (city, County, State & Zip Code)**

**Address**

**Description of Party Named Above: Description**

**The above named individual appears to be acting for the following company**

**Name of Company: Name**

**Address: Address**

**Continuation of Item 2 - Against whom is complaint being filed - Respondent # 3**

**Name: Last Name, First Name                      BUSINESS PHONE:**

**Respondent # 2 Street Address (city, County, State & Zip Code)**

**Description of Party Named Above:**

**The above named individual appears to be acting for the following company**

**Name of Company: Name**

**Address: Address**

**Continuation of Item 2 - Against whom is complaint being filed - Respondent # 4**

**Name: Last Name, First Name                      BUSINESS PHONE:**

**Respondent # 2 Street Address (city, County, State & Zip Code)**

**Description of Party Named Above:**

**The above named individual appears to be acting for the following company**

**Name of Company: Name**

**Address: Address**