

CITY OF PLANO

REASONABLE ACCOMMODATION REQUEST TO THE BUILDING STANDARDS COMMISSION

Reasonable Accommodation #: _____
\$150-RESIDENTIAL (HOMESTEAD)
\$250-RESIDENTIAL/COMMERCIAL

PLEASE TYPE OR PRINT USING BLACK INK

APPEAL LOCATION:

Street Address: _____ Zoning District: _____

Lot Number: _____ Block: _____ Addition: _____

TO THE HONORABLE BUILDING STANDARDS COMMISSION:

Applicant	Applicant's Phone Number		
Applicant's Street Address	City	State	Zip

In accordance with the provisions of Section 6-3 (c) (1) (f), et seq. of the City of Plano Code of Ordinance, appeal is now made to the Honorable Building Standards Commission to grant the following reasonable accommodation request. (Please be specific in request):

Requests for reasonable accommodations may be approved in the city's Code of Ordinance when needed to provide an individual with a disability an equal opportunity to use and enjoy a dwelling, in accordance with the following procedures:

A request for reasonable accommodation may be made to the Building Standards Commission by any person with a disability, their representative or a developer or provider of housing for individuals with disabilities. The request shall state the reason for the accommodation from the building or fire code and the basis for the request.

The applicant or applicant's representative shall have the burden to demonstrate that:

- a) The applicant (or the person on whose behalf the applicant is requesting the accommodation) suffers from a disability as defined by the Fair Housing Amendment Act:

- b) The applicant (or the person on whose behalf the applicant is requesting the accommodation) demonstrates that the accommodation is both reasonable and necessary. An accommodation under this section is "necessary" if without the accommodation the applicant will be denied an equal opportunity to obtain the housing of his or her choice:

- c) The accommodation would not fundamentally alter the city's land use and zoning patterns or if the use's impact on its surroundings is not greater than that of other uses permitted in the district:

- d) How is the property going to be used?

- e) Is the denial of the reasonable accommodation going to cause a substantial burden on religious activities of the property owner/user? Circle one: Yes / No (If Yes, see question (f) below)

- f) If yes, please explain how the denial of the reasonable accommodation will cause a burden on religious activities of the property owner/user?

This handout is for informational purposes only and should not be relied on in place of official regulations and/or policies. The CITY OF PLANO makes no representations, guarantees, or warranties as to the accuracy, completeness, currency, or suitability of the information provided via the handout. Customers and citizens are personally responsible for complying with all local, state and federal laws pertaining to projects within the city. Copies of the CITY OF PLANO adopted codes and Zoning Ordinances can be found on the city website at www.plano.gov or at the CITY OF PLANO Municipal Center at 1520 Avenue K, Plano, Texas.



A reasonable accommodation for an increase in the number of residents use terminates if the property ceases to be operated as housing for disabled persons as defined by the Fair Housing Amendment Act.

PLEASE CHECK ONE:

_____ I will represent this reasonable accommodation request at the Commission meeting.

_____ I will not be able to represent this reasonable accommodation at the Commission meeting. My authorized representative who will represent this reasonable accommodation before the Building Standards Commission is:

Name Street Address City State Zip

PLEASE COMPLETE THE FOLLOWING IF INFORMATION IS OTHER THAN APPLICANT:

Property Owner Street Address City State Zip

Tenant Name Street Address City State Zip

If the owner of the subject property is not the applicant, by signing below, the owner authorizes the applicant or is authorized representative to make application on owner's behalf and to appeal before the Commission.

(Owner's Signature date)

I hereby certify that the above statements are true and correct to the best of my knowledge.

Applicant's Signature

STATE OF TEXAS
COUNTY OF COLLIN

Subscribed and sworn to before me this _____ day of _____, 20_____

Notary Public

(seal)

My commission expires: _____

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