## REPORT OF FAIR HOUSING or DISCRIMINATION INCIDENT

If you feel you've been discriminated against, please complete this form. Completing this form will start the process of an investigation. Once completed you must print out the form and deliver it to:

**Raleigh Housing Authority** 

**Attn: Spec Asst to the Executive Director** 

900 Haynes Street Raleigh, NC 27604 Fax: 919-831-6160 Email: info@rhaonline.com **CONTACT INFORMATION:** First and Last Name:\_\_\_\_\_ Address\_\_\_\_\_\_
City \_\_\_\_\_\_State \_\_\_\_\_Zip code\_\_\_\_\_
Phone \_\_\_\_\_Email \_\_\_\_\_ Please check off the appropriate box below if you believe it played a role in your discrimination complaint: □ Age □ Children Marital Status National Origin □ Color Disability □ Familial Status □ Race Religion ☐ Gender Identity and Expression □ Sexual Orientation □ Sexual Harassment □ Other\_\_\_\_ What else do we need to know about you? (ex. Translation, Reasonable Accommodation) Have you filed this Allegation of discrimination with anyone else?

**COMPLAINT INFORMATION:** DISCRIMINATION AND/OR HARASSMENT STATEMENT: Describe in detail how you were treated differently because of your actual or perceived race, color, sex, age, national origin, religion, disability, marital status, familial status, sexual orientation, or gender identity or expression; or how you were retaliated against or sexually harassed. Provide the first and last names of all people involved. **Please explain on an additional sheet of paper if necessary and sign and date all attachments**.

1) Why do you believe you were discriminated against?	
2) Who do you believe discriminated against yo	ou? (Name, address and phone)
3) Detail what happened? (Continue on addition	nal sheet of paper if necessary)
4) When did the discrimination happen? (Dates	·)
5) Where did the discrimination happen? (Prov	
6) What would you like to see happen as a re	esult of this discrimination?
PLEASE SIGN AN	D DATE THIS FORM
	ding any attachments, if applicable) is true and
Complainant's Signature	Date