

[Date]

[Landlord or Property Manager Name]

[Management Company Name]

[Property Address]

[City, State, Zip Code]

RE: Reasonable Accommodation Request for Additional Bedroom

Dear [Name of Landlord or Property Manager],

I am writing to formally request a reasonable accommodation regarding my housing at [Your Current Address or Unit Number].

I am a person with a disability as defined under the Fair Housing Act. Due to my medical condition, I require the use of specialized medical equipment that is essential for my daily care and health maintenance. This equipment includes: [List equipment, e.g., hospital bed, dialysis machine, oxygen concentrators, lift systems, etc.].

Because of the size, quantity, and specific operational requirements of this equipment, my current living space is insufficient. I require an additional bedroom to safely house and utilize this medical machinery. This extra space is necessary to ensure the equipment functions correctly and to allow for the safe administration of my medical treatment.

Attached is a letter from my healthcare provider confirming my disability and the medical necessity of an extra bedroom to accommodate my equipment.

I look forward to your response regarding this request by [Date]. Please let me know if you require any further information that is consistent with Fair Housing Act guidelines.

Sincerely,

[Your Name]

[Your Phone Number]

[Your Email Address]