



City of Hopkins

1010 1st Street South, Hopkins, MN 55343

952-935-8474 | 952-935-1834 (fax) | www.hopkinsmn.com

Application Number _____

Reasonable Accommodation Request

General Data

Applicant Name (Last, First) _____

The above named individual, firm, or corporation hereby respectfully submits the following supplemental data in support of the preliminary information provided on the accompanying zoning application summary form dated _____ for the purpose of securing an accommodation from existing land use zoning controls, official controls or regulations.

Daytime Phone _____ Other Phone _____

Contact Name (Last, First) _____

Daytime Phone Number _____ Email Address _____

Mailing Address _____ City _____ State ____ ZIP _____

Property Address _____ City _____ State ____ ZIP _____

Owner (if other than applicant) _____

Project Information

Specify the section of the ordinance, official control or regulation from which a reasonable accommodation is sought:

Describe the request for reasonable accommodations. Attach additional sheet(s) as necessary.

Explain why the application of the referenced land use zoning controls, official controls or regulations act as a barrier to fair housing opportunities due to the disability of existing or proposed residents. *(This must include a detailed explanation of why the accommodation is reasonably necessary to make the specific housing available to the person(s), including information establishing that the applicant is disabled under applicable laws.)* Attach additional sheet(s) as necessary.

Describe any proposed changes that will be made to the subject property and structures if the request is approved. Attach additional sheet(s) as necessary.

Check all additional supporting documents which are being submitted to help explain this project proposal.

Site Plan Topographic Map Other (specify) _____



Certification

I hereby certify with my signature that all data on my applications forms, plans, and specifications are true and correct to the best of my knowledge.

X Applicant's Signature _____ **Date** _____

Order Granting or Denying a Reasonable Accommodation (For Office Use Only)

In accordance with the findings stated on the reverse side of this document, the City of Hopkins hereby **approves**, **denies** the foregoing application for a reasonable accommodation. If approved, said approval is subject to the general and special conditions following the Findings section on page 2.

Authorized Signature _____

Title _____ Date _____

Reasonable Accommodation Findings

Strict application of the provisions of the land zoning controls, official controls or regulations **would**, **would not** present a barrier to compliance with the Federal Fair Housing Amendments Act of 1988 because of the finding of facts made in the City's accommodation specialist's attached written decision. If approved, any reasonable accommodation is further subject to the specific conditions that might be outlined in said written decision.

For conditions of the reasonable accommodation, see the attached.