

# Human Relations Discrimination Complaint - Housing



City of Dallas Fair Housing Office  
 1500 Marilla, Room 1BN  
 Dallas, TX 75201  
 214-670-FAIR (3247)

Instructions: **Please type or print this form.** 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. When 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 6 of a separate complaint form and attach it to the original form. Complaints may be presented in person or mailed to the City of Dallas Fair Housing Office, 1500 Marilla, Room 1BN, Dallas, Texas, 75201.

This section is for office use only.

HR 46 Number:

Jurisdiction:

Signature of office personnel who established jurisdiction:

Yes  Additional

Filing Date:

No Information

§46-1. "It is the policy of the City of Dallas to bring about through fair, orderly, and lawful procedures the opportunity for every person to obtain employment, access to all places of public accommodation, and housing without, regard to sexual orientation. This policy is based upon recognition of the rights of every individual to work and earn wages through gainful employment, to obtain and enjoy goods, services, facilities, privileges, advantages, and accommodations in all places of public accommodation, and to obtain housing. The denial or deprivation of this right because of sexual orientation is detrimental to the health, safety, and welfare of the citizens of Dallas and is within the power and responsibility of the City to prevent." §46-5 "This chapter does not apply to; religious organizations: the United States government, and any of its departments or agencies, or any corporation wholly by it; or the government of the State of Texas or any of its departments, agencies, or political subdivisions." (Chapter 46, City Ordinance No. 24927)

Name of aggrieved person(s) or organization(s) (last name, first name, middle initial)  
 (Mr., Mrs., Miss, Ms.)

Home Telephone: ( )

Alternate Telephone: ( )

Street Address (City, country, State and zip code)

Email address:

2. Against whom is this complaint being filed? (Last name, first name, middle initial)

Telephone: ( )

Street Address (City, county, State and zip code)

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

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

4. 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:

5. Name and identity of others (if any) you believed violated the law in this case:

6. Do you believe that you were discriminated against in a housing situation because of your sexual orientation? (Check  all that apply)

Sexual Orientation

Other basis for discrimination? Please explain for referral purposes: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

# Human Relations Discrimination Complaint - Housing

**Type of Complaint:** (Check  all that apply)

**I. HOUSING**

A. What did the person you are complaining against do? Check  all that apply.

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Refuse to rent, sell, or deal with you  | <input type="checkbox"/> Falsely deny housing was available | <input type="checkbox"/> Engage in blockbusting    | <input type="checkbox"/> Discriminate in broker's services   |
| <input type="checkbox"/> Discriminate in the conditions or terms of sale, rental occupancy, or in services or facilities | <input type="checkbox"/> Advertise in a discriminatory way  | <input type="checkbox"/> Discriminate in financing | <input type="checkbox"/> Intimidate, retaliate, or coerced you to keep you from participating in any manner in the investigation proceeding or hearing under the Dallas City Code Chapter 46 |

Other (explain) \_\_\_\_\_

B. When did the act(s) checked above occur? (Include the most recent date if several dates are involved.) \_\_\_\_\_

<p>C. What kind of house or property was involved?</p> <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)	<p>D. Did the owner live there?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<p>E. Is the house or property:</p> <input type="checkbox"/> Being sold? <input type="checkbox"/> Being rented?	<p>F. What is the address of the house or property? (street, city, county, State, zip)</p>
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G. 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: The City of Dallas will furnish a copy of the complaint to the person or organization against whom the complaint is made.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**II. UNLAWFUL INTIMIDATION, RETALIATION, AND COERCION**

A. Did the person you are complaining against harass, threaten, harm, damage, or otherwise penalize a person for opposing an unlawful practice, filing a complaint, testifying, assisting, or participating in any manner in an investigation, proceeding, or hearing under the City of Dallas Ordinance Chapter 46?  Yes  No

B. 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: The City of Dallas will furnish a copy of the complaint to the person or organization against whom the complaint is made.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I declare under penalty of perjury that I have read this complaint (including any attachments) and that it is true and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_