



## Fair Housing Complaint Form

Fill out this form if you live in Elyria and need assistance because you are experiencing discrimination, require a disability-related accommodation or modification, or have another fair housing issue that may benefit from advocacy.

**Please note: We do not have any attorneys on staff, and cannot provide legal advice.**

Your Name \_\_\_\_\_

Your Address \_\_\_\_\_

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Cellular Number \_\_\_\_\_

**I believe, I may have experienced:**

☐ Discrimination

☐ Harassment

☐ Retaliation

**Because of my actual or perceived:**

☐ Race

☐ Military Status

☐ Color

☐ Familial Status

☐ Sex (Sexual Orientation)

☐ Disability

☐ National Origin

☐ Ancestry

☐ Religion

☐ Other



**I believe, I was:**

- ☐ Denied Loan/Homeowners Insurance
- ☐ Denied Equal Terms and Conditions
- ☐ Denied Reasonable Accommodation( Disability Discrimination Only)
- ☐ Denied Reasonable Modification(Disability Discrimination Only)
- ☐ Denied Rental/Lease/Sale
- ☐ Wrongfully Evicted
- ☐ Retaliated Against for making a complaint
- ☐ Subjected to Discriminatory Statements/Advertisements
- ☐ Subjected to Discriminatory Zoning/Land Use
- ☐ Subjected to Restrictive Rule/Covenant
- ☐ Other, specify\_\_\_\_\_

When did the act of discrimination occur? (Most Recent Date)\_\_\_\_\_

Who do you believe discriminated against you? ☐Owner ☐Management Company ☐Both

Name \_\_\_\_\_ Address\_\_\_\_\_

Company\_\_\_\_\_ Phone No.\_\_\_\_\_

Name \_\_\_\_\_ Address\_\_\_\_\_

Company\_\_\_\_\_ Phone No.\_\_\_\_\_



CITY OF  
**ELYRIA**

Office of Community Development  
131 Court St., Suite 302  
Elyria, Ohio 44035 (440)326-1541

Where did the alleged act occur?

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What kind of house or property was involved?

☐ Single-Family House   ☐ A house or building for 2,3 or 4 families

☐ A building for 5 families or more   ☐ Other, including vacant land held for residential use

(explain): \_\_\_\_\_

Does the owner live at this address   ☐ Yes   ☐ No   ☐ Unknown

What other organizations (if any) have you contacted about this concern?

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Are you currently working with an attorney/advocate for this matter?   ☐ Yes   ☐ No

If so, please provide their contact information:

Name \_\_\_\_\_ Address \_\_\_\_\_

Company \_\_\_\_\_ Phone No. \_\_\_\_\_



**Please write a summary of what happened:**


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

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

Approved 06.10.2025



Resource List for Lorain County Residents

Fair Housing Center for Rights & Research

2728 Euclid Ave. #200

Cleveland, Oh 44115

Phone: (216)361-9240

[advocates@thehousingcenter.org](mailto:advocates@thehousingcenter.org)

[www.thehousingcenter.org](http://www.thehousingcenter.org)

Ohio Civil Rights Commission

Cleveland Regional Office

615 W. Superior Ave #885

Cleveland, Oh 44113

Phone: (216)787-3150

<https://civ.ohio.gov>

The Legal Aid Society of Cleveland

1223 W. 6<sup>th</sup> St.

Cleveland, Oh 44113

Phone: (888)817-3777

<https://lasclev.org>

The Legal Aid Society of Cleveland (Lorain County Office)

1530 West River Road N.

Suite 301

Elyria, Oh 44035

Phone: (440)324-1121

<https://lasclev.org/elyria/>