

PORTLAND SUPPLEMENTAL NOTICE OF DENIAL

Following individualized Assessment



LANDLORD NAME: _____

PROPERTY NAME: _____

PROPERTY ADDRESS: _____

APPLICANT'S NAME: _____

TODAY'S DATE: _____

Supplemental Evidence: Supplemental evidence (check one) ☐ was ☐ was not received from applicant(s)

Supplemental Evidence Description (If Received): If supplemental evidence was received from applicant, then it is described as follows: _____

Basis For Denial: Landlord has conducted an individualized assessment of the applicant, including, without limitation, a consideration of (a) the nature and severity of incidents involving applicant and which were attributable to Landlord's decision to deny applicant's application, (b) the number and type of such incidents, (c) the time elapsed since the date the incidents occurred, and (d) the age of the individual at the time the incidents occurred. The basis for the denial of the application is as follows: _____

Explanation of Inadequacy of Supplemental Evidence (If Received): Notwithstanding the foregoing individualized assessment and basis for denial, if supplemental evidence was received by Landlord, it did not adequately compensate for the factors that informed Landlord's decision to reject the application, for the following reasons: _____

Fair Housing Statement: Landlord believes that this does not violate the Fair Housing Act, the FAIR Ordinance, or any other applicable federal, state or local laws.

LANDLORD NAME: _____

LANDLORD'S ADDRESS: _____

LANDLORDS TELEPHONE #: _____

APPLICANT'S NAME: _____

LANDLORD'S EMAIL ADDRESS: _____

