

If you would like to apply for advice or advocacy regarding a fair housing incident from the Lynn Housing and Neighborhood Development (LHAND) please complete the following intake form. Please be aware that:

- Submitting this intake form does NOT establish an attorney-client relationship between you and LHAND.
- You must accurately enter your contact information, provide specific names, and any information regarding advertisements for housing and/or property addresses regarding your complaint.

If you have any questions, or prefer to submit an intake in person or by phone, please contact our office at

(781) 581-8632 or send to Fair Housing Committee, 10 Church St. Lynn, MA 01902

You may also submit this form to fairhousing@lhand.org

Client Information

First Name:

Last Name

Street Address:

City

State

Zip

Telephone

Alternate Telephone

Email Address

Housing Subsidy: Yes No

If yes, administering agency and type of subsidy

Disability: Yes No

Personal Information

Marital Status

Language

Race

Gender

Ethnicity

Household Income

Household Information

Number of Adults ____

Number of Children ____

Source of Referral:

Please turn page to complete form.

Complaint *: Please provide a brief description of the discriminatory incident in the space below. Please be as specific as possible, and include any names, advertisements for housing and/or property addresses that have to do with your complaint.