

UPPER DUBLIN TOWNSHIP HUMAN RELATIONS COMMISSION

TOWNSHIP MANAGER
370 Commerce Drive
Fort Washington, PA 19034

COMPLAINT

Under Chapter 128 of the Township Code

UDHRC No _____

1. Complainant: (Individual filing Complaint)	2. Respondent: (Person/Entity Complaint is filed against)
Name: _____	Name: _____
Address: _____	Business Name: _____
City: _____	Address: _____
State: _____	City: _____
Zip: _____	State: _____
Phone/Type: _____	Zip: _____
Phone/Type: _____	Phone: _____
Best time to call: _____	
Email : _____	
Is it okay to email?: _____	

I, the Complainant, believe that I was discriminated against by the Respondent.

3. This Complaint is related to: (check all that are applicable)

Employment

Employer has 4 or more employees Yes No

Public Accommodation

Housing

Commercial Property

4. The discrimination took place on:

Earliest Date: _____

Latest Date: _____

5. This Complaint is based on discrimination due to: (check all that are applicable)

- Race Color Religious Creed Ancestry Age Sex
- National Origin Disability/Handicap
- Use of guide or support animals because of blindness, deafness or physical disability/handicap of user or because user is a handler or trainer of support or guide animals
- Sexual Orientation (actual or perceived) Gender Identity
- Gender Expression

6. The particulars of this Complaint are as follows:

If there are additional facts you believe should be considered, record them on additional pages and attach them to this form. If you have any documents, letters or receipts that support your complaint, please attach a copy to this Complaint.

VERIFICATION

I hereby verify that the statements contained in this Complaint are true and correct to the best of my knowledge, information and belief. I understand that false statements herein are subject to the penalties of 18 Pa.C.S. § 4904 relating to unsworn falsifications to authorities.

Date: _____

Signature of Complainant

MAIL OR HAND DELIVER IN SEALED ENVELOPE TO:

UPPER DUBLIN TOWNSHIP HUMAN RELATIONS COMMISSION

Attention: Assistant Township Manager

370 Commerce Drive

Fort Washington, PA 19034

Contact by phone if difficulty filling out or submitting form: 215-643-1600 x3220

OR SUBMIT BY EMAIL: jbleemer@upperdublin.net

All complainants will be mailed a date stamped copy of their complaint within 5 business days.