



UPPER DUBLIN T O W N S H I P

370 Commerce Drive
Fort Washington, PA 19034-2619
Phone: (215) 643-1600
Fax: (215) 542-0797
www.upperdublin.net

UPPER DUBLIN TOWNSHIP HUMAN RELATIONS COMMISSION

COMPLAINT

Under Chapter 128 of the Township Code

UDHRC No. _____

1. Complainant Information (individual filing the complaint)

Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Best time to call: _____
Email: _____ It is okay to email? ___ YES ___ NO

2. Respondent Information (person/entity complaint is filed against)

Name: _____ Business Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____

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

3. The complaint is related to (check all that apply):

___ Employment Does the employer have four (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



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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.

Signature

Date

Printed Name

MAIL OR HAND-DELIVER IN SEALED ENVELOPE TO:

Upper Dublin Township Human Relations Commission
Attention: Township Manager
370 Commerce Drive
Fort Washington, PA 19034

OR SUBMIT BY EMAIL:

kferguson@upperdublin.net

If you have difficulty completing or submitting this form, contact the Township Manager's office by phone at 215-643-1600 x3220

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