

## WHO CAN FILE A COMPLAINT?

A complaint can be filed by any:

- Aggrieved individual;
- Organization which has one of its purposes the combating of discrimination in public accommodations;
- The Commission on Human Relations on its own motion.

### Where should complaints be filed?

Pittsburgh Commission on Human Relations  
908 City-County Building  
414 Grant Street  
Pittsburgh, PA 15219  
(412) 255-2600  
[www.pittsburghpa.gov/chr](http://www.pittsburghpa.gov/chr)

The Pittsburgh Commission on Human Relations is empowered by City Code 651-659 to receive and investigate complaints of discrimination in housing, employment and public accommodations.

The Commission was established in 1955 and is the official City agency that enforces laws prohibiting discrimination.

**The Commission offers its services to the public without cost.**



CITY OF  
**PITTSBURGH**  
"AMERICA'S MOST LIVABLE CITY"

We offer this pamphlet in the following languages:

Arabic  
Spanish  
Portuguese  
Simplified Chinese  
Traditional Chinese  
Korean  
Turkish  
Swahili  
Nepali  
Russian

Check us out on social media:  
**@PghCHR**

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## Discrimination is Against the Law

The law protects you from discrimination in **employment**, **housing**, and **public accommodations** based on age (over 40; employment), ancestry, color, disability/handicap, familial status (housing), gender identity/expression, national origin, place of birth, race, religion, sex (including pregnancy), sexual orientation, and status as a survivor of domestic violence (housing).



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# Know Your Rights: You May Have Faced Discrimination If...

## In Housing, you experienced:

- Denial of equal opportunity to purchase, sell, lease, sublease, rent, assign, or otherwise transfer housing, refusal to negotiate on any of these matters, or representation that such property is not available for inspection when it is so available;
- Difference in treatment in the terms, conditions or privileges in the use or occupancy of a housing unit;
- Difference of treatment in the furnishings of any facilities or services of a housing unit;
- Denial of financing, mortgage loan guarantee or other funds for the purchase, construction, rehabilitation, repair or maintenance of any housing unit or housing accommodation;
- Publication or circulation of any notice, statement or advertisement or announcement of a policy, or use of any form of application, or making of any record or inquiry which specifies any discriminatory limitation (ex. "no kids," "English-speaking only," etc.);
- Obstruction or prevention by a housing provider of enforcement or compliance with the Unfair Practices statute of the City Code;
- Misrepresentation of sale or rental of property by a housing provider representing that the racial composition of the area will change.

## In Employment, you experienced:

- Difference of treatment in recruitment, hiring, tenure, compensation, promotion, discharge, harassment or any other aspect of employment;

- Difference of treatment in admission to apprentice training, on-the-job training, or any other occupational training program;
- Failure by any employment agency to refer or otherwise discriminate against any person;
- Difference in treatment in admission to any labor organization;
- Obstruction or prevention of enforcement or compliance with the Unfair Practices statute of the City Code;
- Retaliation against anyone who has complied with the Unfair Practices statute of the City Code.

## In Places of Public Accommodations, you experienced:

- Refusal, withholding or denial of any person either directly or indirectly, any of the accommodation advantages, facility, service, privilege, goods or products in such places of public accommodation, resort or amusement;
- Publication, circulation, issue, display, post, or mail either directly or indirectly, any written or printed communication, notice or advertisement to the effect that any accommodation, advantage, facility, service, privilege, goods or products shall be refused, withheld or denied any person;
- Suggestions or otherwise imply that the patronage of any person is unwelcome, objectionable or not acceptable, desired or solicited;
- To aid, incite, compel, coerce or participate in the performance of any act declared to be an unlawful public accommodations practice under this article whether such person is included by reference or not.

# INQUIRY FORM

If you believe that you have been subjected to discriminatory treatment by an employer, housing provider, business or service, on any of the bases outlined below, please complete the following form and return to the Commission. A representative of the Commission will contact you for further information to determine if the alleged charge falls within the jurisdiction of the Commission and if so, to draft a formal complaint.

### This complaint is related to:

- |                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/> Housing    | <input type="checkbox"/> Public Accommodations/Services |
| <input type="checkbox"/> Employment | <input type="checkbox"/> Police/ Community Tension      |

### Basis for complaint:

- |   |  |
|---|--|
| <input type="checkbox"/> Age (over 40; employment)  | <input type="checkbox"/> Place of birth                                      |
| <input type="checkbox"/> Ancestry                   | <input type="checkbox"/> Race  |
| <input type="checkbox"/> Color                      | <input type="checkbox"/> Religion  |
| <input type="checkbox"/> Disability/Handicap        | <input type="checkbox"/> Retaliation   |
| <input type="checkbox"/> Familial status (housing)  | <input type="checkbox"/> Sex (including pregnancy)                           |
| <input type="checkbox"/> Gender Identity/Expression | <input type="checkbox"/> Sexual orientation                                  |
| <input type="checkbox"/> National origin            | <input type="checkbox"/> Status as a survivor of domestic violence (housing) |

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Name of person/company about whom you are complaining \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

**Briefly state the reason(s) for your complaint, including the date of the discriminatory or unlawful treatment and specific facts related to the incident(s):**

Completing this Inquiry Contact Form **DOES NOT** constitute the filing of a formal complaint. It is the first step in the process. Formal complaints must be filed with the Commission within **one (1) year** from the date of the alleged unlawful act.

Return to:  
 Commission on Human Relations  
 908 City-County Building  
 414 Grant Street  
 Pittsburgh, PA 15219  
 Phone: (412) 255-2600 Fax: (412) 255-2288  
[human.relations@pittsburghpa.gov](mailto:human.relations@pittsburghpa.gov)