

**Hawai'i Civil Rights Commission**  
**Komokina Pono Kīwila O Hawai'i**  
**Real Property Transactions**  
**Pre-Complaint Questionnaire Information**

The submission of a Pre-Complaint Questionnaire is the first step in filing a discrimination complaint with the Hawai'i Civil Rights Commission (HCRC). Upon review of your Pre-Complaint Questionnaire an investigator from the HCRC will contact you for an intake interview and, where appropriate, provide assistance in filing a formal complaint.

The information you provide in the Pre-Complaint Questionnaire will be used to investigate and process your real property discrimination complaint. All information provided to the HCRC in the course of an investigation is confidential and will not be disclosed EXCEPT:

- 1) where a court orders the disclosure of the records;
- 2) where federal fair housing law requires disclosure of the records;
- 3) where a notice of right to sue is issued and the parties to the charge request review of the files; or
- 4) where there is an express statement or implied threat to commit a crime of violence.

All complaints must be filed with the HCRC within 180 days of:

- 1) the alleged discriminatory practice; or
- 2) the date of the most recent occurrence in a pattern of ongoing discrimination.

The HCRC does not have jurisdiction over complaints filed after the expiration of 180 days.

Under Hawai'i law, you may not file an action in state court alleging discrimination in a real property transaction unless a complaint is first filed with the HCRC and the HCRC issues a notice of right to sue. You may request a right to sue letter after filing the complaint. A right to sue letter allows you to file a discrimination complaint in state court without further HCRC involvement.

You must contact the HCRC if you move, or change your address or telephone number. If we are unable to contact you, your case may be closed.

Please contact the HCRC if you would like help with the Pre-Complaint Questionnaire  
or if you require an accommodation. If English is not your first language,  
the HCRC will provide an interpreter at no cost to you.

Please contact the HCRC by:  
Telephone: (808) 586-8636  
TDD: (808) 586-8692  
Email: [DLIR.HCRC.INFOR@hawaii.gov](mailto:DLIR.HCRC.INFOR@hawaii.gov)

Website: <http://labor.hawaii.gov/hcrc>

## *Grounds of Discrimination in Housing*

Race	HIV Status
Ancestry/National Origin	Age
Religion	Marital Status
Color	Familial Status
Sex	Sexual Orientation
Gender Identity & Expression	Disability
Retaliation	

### *The Hawai‘i Civil Rights Commission Is Here to Help...*

If you believe you have been a victim of discrimination, you have the right to file a complaint with the Hawai‘i Civil Rights Commission (HCRC). We are here to help.

- **FILING A COMPLAINT** - You must file your complaint no later than 180 days from the last act of discrimination.
- **INTAKE INTERVIEW** – After you file a complaint, you will be interviewed by HCRC staff before 180-day timeline ends.
- **COMPLAINT SERVED** – After the intake interview, we will serve a written complaint on the respondent(s), together with a request for a written reply to the complaint. You will also receive a copy of the complaint.
- **MEDIATION** – Mediation is an informal and voluntary process in which a trained mediator(s) assists the parties to reach a negotiated resolution of a complaint. Mediation is offered prior to the investigation, though it is available at any time in the process.
- **INVESTIGATION** – Following the intake interview, the case will be assigned to an investigator. The investigation is neutral and objective fact-finding process.
- **DECISION** – After the investigation, we will decide if there is sufficient evidence of discrimination.
- **NOTIFICATION** – You will receive our decision and information about your options under the law.
- **PRE-DETERMINATION SETTLEMENT** – You can ask for pre-determination settlement at any time. In pre-determination settlement, we can transmit settlement offers between the parties or the parties may resolve the differences between themselves.
- **RIGHT TO SUE** – You may ask for a right to sue letter, at any time. A right to sue letter allows you to file a discrimination complaint in state court without further HCRC involvement.

**HAWAII CIVIL RIGHTS COMMISSION  
KOMIKINA PONI KIWILA O HAWAII  
PRE-COMPLAINT QUESTIONNAIRE - REAL PROPERTY TRANSACTIONS**

**830 Punchbowl Street, Room 411, Honolulu, HI 96813**

**Email: DLIR.HCRC.INFOR@Hawaii.gov**

**Instructions:** Please type or print. Read this form carefully. If you do not know the answer or a question does not apply to you, please leave the space blank. You will be contacted for an interview after we receive this form. You must sign and date the form.

Date: \_\_\_\_\_

**1. Personal Information:**

Name: \_\_\_\_\_  
(Last) (First) (Middle / Initial)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_  
Daytime Phone Number Cell Phone Number Evening Phone Number

Email Address \_\_\_\_\_

**Names of Other Aggrieved parties**

\*If the child is under the age of 18 please provide their date of birth

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

**Who Else Can We Call If We Cannot Reach You?**

Contact Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

\_\_\_\_\_  
Daytime Phone Number Cell Phone Number Evening Phone Number

**2. Who Do You Believe Discriminated Against You?**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_  
Daytime Phone Number Cell Phone Number Evening Phone Number

Email Address \_\_\_\_\_

**3. Mark the box that describes the person above:** ☐ Landlord ☐ Owner

☐ Financial institution ☐ Realtor/Broker ☐ Property Management Company

☐ Resident Manager ☐ Association or Apartment Owner ☐ Developer/ Architect

☐ Shelter ☐ Transitional Housing ☐ State, County or Government

☐ Other: \_\_\_\_\_

**4. When Was the Last Act of Alleged Discrimination? Date:** \_\_\_\_\_

Is the violation continuing? ☐ Yes ☐ No

Comments: \_\_\_\_\_

**5. What Kind of House, Rental Unit or Property Was Involved?** ☐ Single Family Home

☐ Apartment Building (4+ units) ☐ Owner Lives on Property ☐ Public or Assisted Housing

☐ Other: \_\_\_\_\_

**6. What Is The Address Of The House, Rental Unit or Property?**

Address: \_\_\_\_\_

City

State

Zip Code

**7. I Believe I Was Discriminated Against Because Of My:**

☐ Race ☐ Color ☐ National Origin/Ancstry ☐ Age ☐ Marital Status ☐ Sex

☐ Gender Identity or Expression ☐ Sexual Orientation ☐ Familial Status

☐ Disability ☐ HIV Status ☐ Religion ☐ Retaliation

**8. What Happened To You? Check All That Apply.**

☐ Refused an opportunity to rent/buy housing or told housing was not available when it was.

☐ Refused a request to accommodate policies or practices, or to modify housing because of a disability.

☐ Treated differently from other tenants or persons seeking housing.

☐ Treated differently in terms of conditions of housing.

☐ Refused housing because of occupancy limits.

☐ Discriminated against in financing a home or property.

☐ Retaliated, threatened, intimidated, or interfered with in the exercise of a fair housing right.

☐ Other \_\_\_\_\_

**9. If English is not your best language, we will provide a free interpreter.**

Would you like a free interpreter? ☐ No ☐ Yes, what language: \_\_\_\_\_

**10. Please indicate if you have any special needs and are requesting assistance.**

Describe: \_\_\_\_\_

**11. Have you contacted or filed a complaint with the U.S. Department of Housing & Urban Development (“HUD”)?** ☐ No ☐ Yes, when & to whom? \_\_\_\_\_

**12. How did you learn about fair housing rights?**

- ☐ Fair Housing Brochure ☐ Legal Aid Society (HI) ☐ Fair Housing Brochure  
☐ Other State Agency ☐ Personal Contact ☐ Private Attorney  
☐ Public Service Announcement ☐ Radio ☐ Housing Provider  
☐ HUD Office ☐ Internet ☐ Newspaper ☐ Realtor  
☐ Federal Government ☐ Tenant ☐ TV ☐ Another Investigation

**13. U.S. Veteran?** ☐ Yes ☐ No ☐ Not Applicable/do not wish to disclose

**14. Briefly explain what happened.**

Please provide a summary of the discriminatory adverse actions with the names of those who discriminated against you. Start with the earliest date and end with the last date. Use separate sheets of paper as necessary. On the next page, include the name/telephone/address of witnesses who have evidence of the discrimination.

<b>Dates of Discrimination</b>	<b>Describe the Discriminatory Adverse Actions</b> <i>(Explain why the actions were because of your protected basis)</i>



