

**REASONABLE ACCOMMODATION ASSISTIVE ANIMAL REQUEST (Subject to Red Flags Rule)**

*If a tenant requests permission to have an assistive animal (i.e., one that assists a handicapped resident in living independently) or claims that an animal in the home is an assistive animal, you should approve it if the need is clear and the animal's necessity is apparent. But if there are legitimate doubts, you can request medical verification. Give this form to the tenant to have completed by a qualified medical provider. Tell him the request will not be approved until the completed form is returned. In rare cases where approval is a dangerous breed, check the "Dangerous Breeds" box.*

To: \_\_\_\_\_ Mobile Home Park

Re: Request for Approval of Assistive Animal

\_\_\_\_\_ is my client/patient, and has been under my care since \_\_\_\_\_. I am familiar with his/her history and disability-related functional limitations. She/He meets that definition of disability under fair housing laws. (42 U.S.C. 3601 *et. seq*).

To enhance his/her ability to live independently and to use and enjoy his/her dwelling, I am prescribing an assistive animal that will assist with the functional limitations relating to his/her disability.

The assistive animal that I am prescribing is (one) Type: \_\_\_\_\_.  
Breed: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Color: \_\_\_\_\_ Age: \_\_\_\_\_ for the purpose of assisting with the limitations relating to his/her disability. (This information is needed to determine which specific assistive animal is being requested for a reasonable accommodation). This specific animal directly serves a function related to the applicant's qualified disability.

Printed Name of Professional Healthcare Provider \_\_\_\_\_

Name of Office of Healthcare Provider \_\_\_\_\_

Phone Number: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ 20\_\_