



## Assistance Animal Request Form

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

Name of Person Requesting Assistance Animal: \_\_\_\_\_

\*\*If requesting the assistance animal for person/persons living with you, please indicate you are the person requesting the assistance animal [above] and indicate on the following line the name of the person you are making the request for: \_\_\_\_\_

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

Telephone: (\_\_\_\_) \_\_\_\_\_

**I request the following reasonable accommodation be made in regards to the use of an assistance animal [examples below] so that I or the person/persons living with me can equally use and enjoy the dwelling:**

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**Examples of reasonable accommodations include, but are not limited to:**

- Waiver of a no-pets policy to allow for the assistance animal.
- Waiver of a deposit generally required on other tenants who obtain pets in their dwelling.
- Waiver of a size limit generally imposed on pets otherwise allowed in the dwelling.

**I am requesting the above reasonable accommodation be made for an assistance animal because:**

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Applicant, please check the following that apply:

- I have provided written documentation by a health care provider that verifies my disability
- I have provided written documentation by a health care provider which verifies or explains the assistance animal I am requesting is required to assist my disability
- I have provided proof of current vaccination and/or license for the assistance animal requested

Please note, your request will be reviewed and a response issued to you within two weeks. Additional information may be requested before an approval can be issued.

**Applicant/Tenant Signature:** \_\_\_\_\_