**SECTION 504 REQUEST FOR REASONABLE ACCOMMODATION – EMOTIONAL SUPPORT ANIMAL OR SERVICE ANIMAL**

Date of Request:

Head of Household Name:

Name of Household member requesting the accommodation:

Full Address:

Please complete this form if you have a disability related need for an assistance animal and would like to request an accommodation. If you require assistance completing this form, or wish to make a request orally, please contact property management.

1. Please explain why you are requesting permission to have an assistance animal in your unit. You need not provide detailed information about the nature or severity of the disability.
2. Please complete the following:
   1. Does the animal for which you are making a reasonable accommodation request perform work or do tasks for you because of your disability?
      * Yes
      * No (If "No," continue to item b)

If the answer is yes:

If your disability is obvious and the work or task the animal does is obvious, such as a dog guiding an individual who is blind or has low vision, or a dog pulling a wheelchair of an individual with a mobility impairment, then no further inquiry will be made.

If your disability is not obvious, provide a statement from a health or social service professional indicating that you have a disability (i.e. you have a physical or mental impairment that substantially limits one or more major life activities); and

If the work or task the animal performs is not obvious, explain below how the animal has been trained to do work or perform tasks that alleviate one or more symptoms or effects of your disability or, if the animal lacks individual training, how the animal is able to do work or perform tasks that would alleviate one or more symptoms or effects of your disability:

You may provide any additional information or documentation of the training or work you describe above and attach it to this application.

* 1. If the animal for which you are making a reasonable accommodation request does not perform work or do tasks for you because of your disability, but provides emotional support or alleviates one or more symptoms or effects of your disability, please submit a statement from a health or social service professional stating that (a) you have a disability (i.e. you have a physical or mental impairment that substantially limits one or more major life activities); and (b) the animal would provide emotional support or other assistance that would alleviate one or more identified symptoms or effects of your disability and how the animal alleviates the symptoms or effects, Please attach such a statement to this application.
  2. If the assistance animal is a dog or a cat, please provide copies of the rabies tag or certificate that is required by law. If you have not selected an animal at the time you complete this application, [name of property management or owner] may approve the application with the condition that, if you select a dog or a cat, you must submit copies of the rabies tag or certificate that is required by New York law, before the selected animal moves in.

1. If you are requesting a different modification or accommodation, please describe it here:

If you need this document in a different language or LARGER FONT or if you need a reasonable accommodation, please call [enter property management phone number] or TTY #711.

Please list the contact information of the knowledgeable professional who can verify that you have a disability warranting the accommodation(s).

Name: Title:

Address:

Telephone Number: \_ Fax Number:

4. Release of Information: I certify that the information provided on this form is true and accurate. I give management permission to discuss the requested accommodation with my knowledgeable professional. The knowledgeable professional listed will receive a copy of this form.

Signature of Applicant/Resident Date

Fraud and False Statements: Title 18, Section 1001 of the U.S. Code states that a person who knowingly and willingly makes false and fraudulent statements to any department or employee of the United States Government, HUD, a Public Housing Authority or a Property Owner may be subject to penalties that include fines and/or imprisonment.

**Office Use Only: RA Log #:**