

KHRA Reasonable Accommodation Request Form- Assistance Animal

Residents Name: _____

Address: _____

Date of Request: _____

The Fair Housing Act defines disability as a physical or mental impairment that substantially limits one of more major life activities

Yes	No	Assistance Animal Request
		Do you consider yourself or someone in your household to be disabled?
		If yes, because of this person's disability is it necessary for this person to have the animal requested to be able to live and enjoy this apartment or residence?
<p>If yes, please describe how this animal will enable this person to use or enjoy this apartment or residence and how the need for the animal is connected to this person's disability.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>		
<p>Please explain how this animal differs from a pet.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>		

Yes	No	
		Does this animal provide a disability related service or benefit that will make it necessary for the resident to take the animal outside the apartment or residence, other than to take the animal outside to relieve it?
If yes, please explain why it may be necessary for the animal to accompany the resident outside the resident's apartment or residence and into the common areas. <hr/> <hr/> <hr/> <hr/>		

Please return this request to the office. After review, management may request you to fill in the information below and sign a Verification Form that will be sent to a professional third party. Pursuant to T.C.A. § 66-28-406, the professional providing this documentation shall have knowledge of your disability, and cannot be documentation provided through a website, which provides this documentation for a service or support animal for a fee.

Third Party Professional
Name: _____
Title/Position: _____
Address: _____

Telephone: _____

