

Century Property Management
Professional Property Management, Residential Leasing

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Reasonable Accommodations
Verification Form: Animal

(No Pets Allowed)

Century Property Management provides reasonable accommodations to our residents with disabilities who have a verifiable need for the reasonable accommodation. A reasonable accommodation is an exception made to the usual rules or policies made necessary because of a disability for the resident to use and enjoy the home. By filling out the top section, the resident has authorized you to provide the information requested on this form. Please answer the questions on the following page.

Name of Resident (Print): _____

Request for Reasonable Accommodation: _____

Signature of Resident: _____

This signature authorizes the verifier to provide answers to the following questions to the best of his/her knowledge.

This Section To Be Filled Out By The Verifier

The Fair Housing Act Defines disabilities as a physical or mental impairment that substantially limits one or more major life activities. The Supreme Court has determined that to meet this definition, a person must have an impairment that prevents or severely restricts the person from doing activities that are of central importance in most people's daily lives. The disability must be permanent (of continual or long duration) to be protected by the Fair Housing Act. The legal definition of a reasonable accommodation is an exception to the normal rules of an apartment or house that is necessary for the resident to have an equal opportunity to use and enjoy his/her apartment or house. Please note that applying this definition to a request for an animal requires a higher standard that merely stating that a resident would "benefit" from the presence of an animal in his/her home, as it is presumable that most pet owners benefit from their pet.

- 1. Is this resident disabled? YES NO I DON'T KNOW
- 2. Date of Diagnosis: _____
- 3. Date of last visit for this condition: _____
- 4. What is the nature of the resident's disability?

- 5. Please describe in what manner this disability restricts the resident in activities that are of central importance to his or her daily life.
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- 6. Is it in your opinion that the presence of an animal in this resident's apartment or house necessary because of his/her disability for this resident to use and enjoy the home?
YES NO I DON'T KNOW

7. Please describe how this animal accommodation will enable the resident to use or enjoy this apartment or house.

8. If the answer to question 4 is "yes," is there a specific animal or type of animal that is necessary? Please explain.

9. If necessary, will you be willing to testify in a court of law concerning the information provided in this form?

YES

NO

I DCN'T KNOW

Thank you for taking the time to fill out this form. If we need additional information, we may contact you at a later date.

Name and Position of Verifier: _____

Signature of Verifier: _____ Date: _____

Address: _____

Telephone: _____