

# Greater Gadsden Housing Authority

## Assistance Animal Policy

Adopted May 30, 2017; Effective July 1, 2017

Assistance animals that are needed as a reasonable accommodation for persons with disabilities are not considered pets, and thus, are not subject to HA pet policies. The resident must register the animal with the HA. Registration includes the certification from a licensed veterinarian of required pet inoculations, information to identify the pet, and the name and address of the pet owner and the name and address of a responsible party to care for the pet if the owner is unable to. The resident shall furnish the HA information at each reexamination as to the status of the animal, the continued need for the animal, and the information contained hereinabove.

Assistance animals are animals that work, provide assistance, or perform tasks for the benefit of a person with a disability, or animals that provides emotional support that alleviates one or more identified symptoms or effects of a person's disability. Assistance animals - often referred to as "service animals," "assistive animals," "support animals," or "therapy animals" perform many disability-related functions, including but not limited to the following:

- Guiding individuals who are blind or have low vision;
- Alerting individuals who are deaf or hearing impaired;
- Providing minimal protection or rescue assistance;
- Pulling a wheelchair;
- Fetching items;
- Alerting persons to impending seizures; or
- Providing emotional support to persons with disabilities who have a disability-related need for such support.

The HA may not refuse to allow a person with a disability to have an assistance animal merely because the animal does not have formal training. Some, but not all, animals that assist persons with disabilities are professionally trained. Other assistance animals are trained by the owners themselves and, in some cases, no special training is required. **The question is whether or not the animal performs the assistance or provides the benefit needed by the person with the disability.**

The HA's refusal to modify or provide an exception to a "no pets" rule or policy to permit a person with a disability to use and live with an assistance animal would violate Section 504 of the Rehabilitation Act and the Fair Housing Act unless:

- There is reliable objective evidence that the animal poses a direct threat to the health or safety of others that cannot be reduced or eliminated by a reasonable accommodation;
- There is reliable objective evidence that the animal would cause substantial physical damage to the property of others;
- The presence of the assistance animal would pose an undue financial and administrative burden to the provider; or
- The presence of the assistance animal would fundamentally alter the nature of the provider's services.

Assistance animals are a means to provide a reasonable accommodation for an individual with a disability, but a person with a disability is not automatically entitled to have an assistance animal. Reasonable accommodation requires that there is a relationship between the person's disability and his or her need for the animal. The HA should verify that the individual requesting the assistance animal is a person with a disability and that the animal is needed to assist with the disability. The HA must also verify that the person is capable of taking care of the animal, or has made suitable arrangements for care of the animal in a sanitary manner which is consistent with the Pet Policy of the HA. As with all other disability-related inquiries, the HA may not ask about the nature or severity of the resident's disability. The HA may ask for third party verification.

See attached third party verification form that must be completed by a medical professional and Assistance Animal Data Verification Form that must be completed by a Veterinarian.



422 Chestnut Street  
Post Office Box 1219  
Gadsden, AL 35902-1219



(256) 547-2501  
FAX (256) 549-1626  
TDD Line for Deaf 800-548-2546

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## Confidential

### Verification of Need

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

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Re: Patient Making Request: \_\_\_\_\_ D.O.B \_\_\_\_\_

The individual named above has applied for or is receiving federal rental assistance from the Greater Gadsden Housing Authority (GGHA) and has identified that he/she has a disability and needs an assistance animal. Housing Authorities are required to verify reasonable accommodation requests for an assistance animal. As the medical provider named by the person requesting the assistance animal, you are asked to verify that the individual meets the requirements on the reverse side of this document:

Please return the completed document in the enclosed self-addressed envelope or fax it to (256) 547-\_\_\_\_\_

Sincerely,

Housing Manager



422 Chestnut Street  
 Post Office Box 1219  
 Gadsden, AL 35902-1219



PHONE (256) 547-2501  
 FAX (256) 549-1626  
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**ASSISTANCE ANIMAL VERIFICATION FORM**

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

Provider Name:		Telephone:	
Address:		Fax:	
City/State/Zip Code:		Email:	

Name of Household Member Who Needs the Accommodation: \_\_\_\_\_

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

SSN (last four digits):     \*\*\*\_\*\*\_     D.O.B: \_\_\_\_\_

**APPLICANT/RESIDENT RELEASE:** I hereby authorize release of the requested information.

\_\_\_\_\_  
**Applicant/Resident Signature**

\_\_\_\_\_  
**Date**

The individual named above has requested a reasonable accommodation for an assistance animal. In accordance with the Fair Housing Act and Section 504 of the Rehabilitation Act, the Greater Gadsden Housing Authority (GGHA) must verify that the individual is a person with a disability and has a disability-related need for an assistance animal. **Please note that all GGHA households are allowed to have pets. An assistance animal is not a pet and is not governed by the GGHA pet policy.**

We ask your cooperation in providing the following information and returning it to the GGHA office listed at the top of the page via fax or in a self-addressed envelope within 10 calendar days.

**PLEASE CONTINUE TO THE NEXT PAGE**

**INFORMATION BEING REQUESTED FOR:** \_\_\_\_\_

1. In your opinion, is this applicant/resident disabled?

Under federal law, an individual with disabilities means any person who has: (a) A physical, mental or emotional impairment that: Substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such impairment. (b) For the purposes of housing programs, the term does not include current users of illegal controlled substances.

- Yes       No       I do not know

**Note: If you answered “No” or “I do not know”, please sign the form and return ALL pages to the GGHA office listed at the top of the form.**

2. What does the applicant/resident require?

**No Assistance Animal** (Service or Companion Animal). No assistance animal is required to alleviate one or more symptoms of this person’s disability even though there are documented benefits to owning a pet. The person indicated is able to live in the unit without the need of an assistance animal.

**A Single Assistance Animal** (Service or Companion Animal). The applicant/resident requires a single assistance animal to alleviate one or more symptoms of this person’s disability. The person indicated is unable to live in the unit without an assistance animal (ex. dog, cat, small bird, rabbit, hamster, gerbil, other rodent, fish, turtle, or other specified domesticated animal).

3. Please describe how the animal will be used to address the symptoms of the disability (ex. alert resident to medical conditions such as seizures, reduce stress of isolation caused by the disability, etc.)

Animal Type: \_\_\_\_\_

Task Performed:  
\_\_\_\_\_

4. The applicant/resident has requested a \_\_\_\_\_ as the assistance animal. According to HUD’s guidance, if the assistance animal is not a dog, cat, small bird, rabbit, hamster, gerbil, other rodent, fish, turtle, or other small, domesticated animal that is traditionally kept in the home, the Greater Gadsden Housing Authority may request additional information.

\*Can this task be performed by the type of animal noted above in #3?  Yes  No

If you answered “No”, please provide us with information about the necessity for this particular animal and why a dog, cat, small bird, rabbit, hamster, gerbil, other rodent, fish, turtle, or other small, domesticated animal could not alleviate the symptom or side effect of the disability or perform the service.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE CONTINUE TO THE NEXT PAGE**

**INFORMATION BEING REQUESTED FOR:** \_\_\_\_\_

I certify that I am authorized to provide verification of disability, and the statements and opinions I have given are true and accurate.

\_\_\_\_\_  
**Contact Name/Title of Authorized Party**

\_\_\_\_\_  
**Company/Organization Name**

\_\_\_\_\_  
**Contact Phone**

\_\_\_\_\_  
**Contact Fax**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**PENALTIES FOR MISUSING THIS VERIFICATION FORM**

Title 18, Section 1001 of the U.S. Code states that a person whom knowingly and willingly makes false and fraudulent statements to any department of the United States Government, HUD, a public housing authority (PHA), and any owner (or employee of HUD, the PHA, or the owner) may be subject to penalties that include fines and/or imprisonment.

**Greater Gadsden Housing Authority (GGHA)  
Assistance Animal Responsibility Form**

<b>Applicant/Resident Name:</b>	
<b>Address:</b>	

The above-named individual has been approved for an Assistance Animal as verified by a qualified third-party source. The resident understands and agrees to abide by all provisions as outlined below:

Requirements in the dwelling lease under Section IV (E), (F), (G) & (H); Obligation of Tenant; Tenant Agrees: (E) To abide by necessary and reasonable regulations promulgated by Landlord for the benefit and wellbeing of all Tenants; (F) To comply with all obligations imposed upon Tenants by applicable provisions of building and housing codes that materially affect health and safety; (G) To keep the premises, and such other areas as may be assigned to the Tenant for the Tenant's exclusive use, in a clean and safe condition; and, (H) To dispose of all ashes, garbage, rubbish, and other waste from the premises in a safe and sanitary manner.

All information concerning the approved assistance animal must be updated annually and provided at the annual recertification (See attached Assistance Animal Data Verification Form). The Assistance Animal Data Verification Form must also be completed by a veterinarian when the assistance animal is initially approved and at annual reexamination.

Prior approval from the GGHA must be received before making a change of the assistance animal for which this policy was approved. Also, a picture may be taken by the GGHA staff of the Assistance Animal for documentation.

The assistance animal must be kept under control and must be housebroken. The resident further agrees to comply with the City of Gadsden Animal code (hereafter referred to as code). Attached are copies of the codes dealing with 1) Removal of animal waste, Sec. 10-103; 2) Restraint required; running at large, Sec. 10- 105; and, Vaccination required, Sec. 10-191. A copy of the complete code is available for your review at your Rental Office.

Any damage or injury whatsoever caused by the assistance animal is the liability of the resident. The resident shall pay the landlord or applicable party for any damages or injury caused by the assistance animal. The resident accepts full responsibility and will indemnify and hold harmless the landlord for any claims by or injuries to third parties or their property caused by assistance animal. The resident also realizes that liability insurance should be obtained for animal ownership and that paying for the insurance is the resident's responsibility.

The assistance animal must be immediately and permanently removed from the premises if the assistance animal: (1) cannot be controlled per the City of Gadsden Animal code, (2) demonstrates aggressive behavior, (3) causes bodily harm to any resident, guest, staff member, or other authorized person on the premises, (4) becomes a direct threat to the health or safety of others that cannot be eliminated or reduced to an acceptable level by a reasonable modification to other policies, practices and procedures. If the assistance animal is removed, the resident may replace the assistance animal by requesting a change of the assistance animal which must also be approved by the GGHA.

No deposit or annual fee is charged for an assistance animal. The assistance animal is not considered a pet.

<b>Service or Companion Animal Description</b>			
<b>Type of Animal:</b>		<b>Color:</b>	
<b>Name:</b>		<b>Age:</b>	
<b>Breed:</b>		<b>Height/Weight:</b>	

I have read the Assistance Animal Responsibility form and agree to abide by all requirements.

\_\_\_\_\_  
**Resident Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**GGHA Representative Signature**

\_\_\_\_\_  
**Date**



