

**INSTRUCTIONS FOR MANAGEMENT COMPANY'S USE AND
COMPLETION OF REASONABLE ACCOMMODATION/MODIFICATION
REQUEST VERIFICATION FORMS**

1. This form is used to VERIFY that a person requesting an accommodation/modification has a disability as that term is defined by law and to obtain information from a reliable third party (generally a health provider but it could be a therapist, social worker, etc. in some circumstances) that the requested accommodation is NECESSARY to provide applicant/resident with equal use and opportunity to enjoy housing or to overcome barriers associated with the person's disability.

We encourage the use of this form whenever it is not obvious that the person has a legal disability and that the requested accommodation is necessary. For example, we would not use the form for a blind applicant with a seeing eye dog. The existence of the disability and the necessity of the dog to help the person would be obvious. Likewise, we would not require a person in a wheelchair to fill out this form if the person was requesting a modification in our parking rules.

However, you must give consideration to a reasonable accommodation request EVEN IF the person making the request refuses to use the verification form, or makes the request orally. You may not refuse to consider the request for these reasons.

2. NEVER ask an applicant "What's wrong with you?" "What's your disability?" You MAY ask if a person is making a request for an accommodation in the property's rules, policies, services and procedures to provide accommodation for a disability or is asking to make a reasonable modification in the structure to provide accommodation for a disability.

Use of the Form

In most cases it is recommended that you fill-out all of the blanks of the form. The only portion of the form filled out by the applicant/resident is the Resident Release on the last page. MANAGEMENT HANDLES THE MAILING OF THE FORM TO THE HEALTH CARE PROVIDER ALONG WITH A SELF-ADDRESSED STAMPED ENVELOPE. The envelope has our return address so we can make sure that the form comes from a genuine third party, health care provider.

Complete the Form as Follows

1. Obtain the name and address of the health care provider and put this on the top lines of the form.
2. Ask the resident to sign the release on the last page. If the information is requested for a minor, complete that line of the form.
3. Fill out the name and address of the management company and the same address as on the self-addressed stamped envelope on the front page in the lines marked "From."

4. Print clearly the applicant or resident's name on the first page of the form. If the accommodation is requested for a minor, name of child.
5. Add the applicant/resident's current address.
6. Describe the accommodation/modification requested and any rules or changes in our policies that applicant/resident is requesting be modified. If there is anything unique about the request, or if additional information about the request is needed, explain it here.

Here are some sample descriptions of common requests:

The apartment community has a "no pets" rule. The applicant has requested that he/she be allowed to have a dog.

Our apartment lease requires that all persons who live or regularly stay at the unit be added to the lease. The resident has requested that we permit a personal care attendant to stay at the unit without being asked to sign the lease.

Our lease states that notices to residents can be given by delivery notice to the apartment. The resident has requested that any notice to be given to the resident be sent by an email.

Here are some examples of less common requests where management might want to add additional questions or requests for further elaboration from the health care provider in the blanks on the front of the form:

The lease and Minnesota law gives landlords a right to enter tenants' apartments. The tenant is insisting that she has a disability where management can only enter the unit with two weeks' advance notice and by an appointment for a specific time. Here is a way management might want to fill-out the form:

Our lease gives management a right to enter a resident's unit for emergencies, regular repairs, maintenance, inspection, cooperation with inspections required by the government, funding agencies and lenders. The resident is requesting that inspections only take place with two week advance notice and by appointment.

Please explain why advance notice beyond two business days advance notice might be required for a disability. Also, please address if shorter notice, with an appointment time within a 60 minute window, would provide a satisfactory reasonable accommodation.

The apartment community has pet policies that require any dog to be spayed or neutered and to be at least one year old so that the dog is fully housebroken and has all needed shots. The resident is insisting she wants to get a puppy for her disabled child. Here is how the question to the health care provider might be framed:

Our building will permit dogs but we have policies that require any dog to be spayed or neutered, be at least one year of age so that it is housebroken and has all needed shots. The resident is requesting that we approve a puppy. Please address whether or not there is a disability related need for a dog that is under one year of age and explain why a one year old dog cannot meet this need.

The apartment community has a no-pets rule. The applicant is requesting that he/she be allowed to have three animals as "companion" animals. Here is how the request might be written:

Our apartment community has a "no-pets" rule. The applicant has requested that she receive a reasonable accommodation to have three separate animals as "service" or "companion" animals. Please explain what disability related need will be served by each animal. What additional or separate disability, or disability related need, will be served by a second or third animal?

If you have doubts about how to complete the form before it is mailed to the health care provider, obtain input from a supervisor.

If this is a common accommodation request, where management has in place rules and policies that relate to the accommodation, such as any rules or policies relating to animal ownership, these rules and policies can be given to the applicant/resident. Keep in mind that charges for pet rent or security deposits may not be allowed for accommodation animals. But an applicant/resident that does not already own a service/companion animal should be reminded that the property may have limits or requirements for animals and that an animal shall not be obtained until the accommodation request is approved and that community rules or guidelines be consulted and followed (for example, it is common to require that all cats and dogs be at least one year of age and be spayed or neutered. Kittens and puppies are frequently not allowed).

Make a copy of the form when completed and mail it, along with a self-addressed stamped envelope to the health care provider. Note in the applicant/resident file the date of mailing.