

5 2 5 S O U T H L A W R E N C E S T R E E T M O N T G O M E R Y, A L A B A M A 3 6 1 0 4 – 4 6 1 1 PHONE: (334)-206-7220 – FAX: (334)-206-7222 – WEBSITE: M H A T O D A Y.O R G

ASSISTANCE ANIMAL POLICY

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 herein above.

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;



5 2 5 S O U T H L A W R E N C E S T R E E T M O N T G O M E R Y, A L A B A M A 3 6 1 0 4 – 4 6 1 1 PHONE: (334)-206-7200 – FAX: (334)-206-7222 – WEBSITE: M H A T O D A Y.O R G

* 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. The weight restrictions in the HA Pet Policy shall also be complied with unless waived by the Executive Director based upon each specific case. 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.

Resident Signature

Date

MHA Representative

Date