

**THE FOLLOWING DOCUMENTS ARE REQUIRED TO BE SUBMITTED  
WITH APPLICATION:**

\_\_\_\_\_ **Picture of Animal**

\_\_\_\_\_ **Veterinarian's Certificate, verifying current vaccinations, and  
spaying/neutering proof**

\_\_\_\_\_ **Proof of Rabies License Tag**

\_\_\_\_\_ **Proof of any training/certificate provided to a "Service Animal"**

\_\_\_\_\_ **Your medical/mental health provider's sworn and notarized affidavit specifically attesting, under penalty of perjury, (a) the nature of your illness, (b) which major life functions are affected by your illness, (c) if you are deemed disabled as defined under the ADA/Fair Housing laws, (d) that an emotional or serve/support animal is being prescribed, € how said animal will, from a medical/mental health standpoint allow you to enjoy your condominium, (f) if there is any other corrective measure (e.g. medication) that could be prescribed that would or could substitute for the need to have an emotional support or service animal (g) how long the affiant has been treating you.**

**Approved by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_**

**EMOTIONAL SUPPORT ANIMAL REQUEST**

DATE: \_\_\_\_\_

NAME OF PERSON REQUESTING REASONABLE ACCOMMODATION:

\_\_\_\_\_

PROPERTY/ UNIT ADDRESS: \_\_\_\_\_

TYPE OF ANIMAL (CAT/DOG, ETC.): \_\_\_\_\_

BREED: \_\_\_\_\_ AGE OF ANIMAL: \_\_\_\_\_

COLOR(S) OF ANIMAL / DISTINCT MARKINGS: \_\_\_\_\_

LAST DATE OF VACCINATIONS, PROOF ATTACHED: \_\_\_\_\_

DATE OF EXPIRATION OF TAG REGISTRATION, PROOF ATTACHED:

\_\_\_\_\_

NAME OF TREATING PHYSICIAN: \_\_\_\_\_

CONTACT PHONE NUMBER OF TREATING PHYSICIAN: \_\_\_\_\_

LETTER FROM TREATING PHYSICIAN ATTACHED [ ☐ ] YES [ ☐ ] NO

IF NO, FOR THE SUPPORT OF THE REASONABLE ACCOMODATION, I HAVE  
ATTACHED \_\_\_\_\_

**FLORIDA STATUTES SECTION 760.27 SUPPORTS THE REQUESESTING  
INFORMATION.**

Unless otherwise prohibited by federal law, rule, or regulation, a housing provider may:

(a) Deny a reasonable accommodation request for an emotional support animal if such animal poses a direct threat to the safety or health of others or poses a direct threat of physical damage to the property of others, which threat cannot be reduced or eliminated by another reasonable accommodation.

(b) If a person's disability is not readily apparent, request reliable information that reasonably supports that the person has a disability. Supporting information may include:

1. A determination of disability from any federal, state, or local government agency.
2. Receipt of disability benefits or services from any federal, state, or local government agency.
3. Proof of eligibility for housing assistance or a housing voucher received because of a disability.
4. Information from a health care practitioner, as defined in s. [456.001](#); a telehealth provider, as defined in s. [456.47](#); or any other similarly licensed or certified practitioner or provider in good standing with his or her profession's regulatory body in another state but only if such out-of-state practitioner has provided in-person care or services to the tenant on at least one occasion. Such information is reliable if the practitioner or provider has personal knowledge of the person's disability and is acting within the scope of his or her practice to provide the supporting information.
5. Information from any other source that the housing provider reasonably determines to be reliable in accordance with the federal Fair Housing Act and s. 504 of the Rehabilitation Act of 1973.

(c) If a person's disability-related need for an emotional support animal is not readily apparent, request reliable information that reasonably supports the person's need for the particular emotional support animal being requested. Supporting information may include:

1. Information identifying the particular assistance or therapeutic emotional support provided by the specific animal from a health care practitioner, as defined in s. [456.001](#); a telehealth provider, as defined in s. [456.47](#); or any other similarly licensed or certified practitioner or provider in good standing with his or her profession's regulatory body in another state. Such information is reliable if the practitioner or provider has personal knowledge of the person's disability and is acting within the scope of his or her practice to provide the supporting information.
2. Information from any other source that the housing provider reasonably determines to be reliable in accordance with the federal Fair Housing Act and s. 504 of the Rehabilitation Act of 1973.

(d) If a person requests to keep more than one emotional support animal, request information regarding the specific need for each animal.

(e) Require proof of compliance with state and local requirements for licensing and vaccinating each emotional support animal.