

Easton Housing Authority

REASONABLE ACCOMMODATION & MODIFICATION IN HOUSING POLICY AND PROCEDURES

March 2023



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INTRODUCTION

This Reasonable Accommodation/Modification in Housing Policy and Procedures, comprised of Part A and Part B, sets forth the policy and procedures of the Easton Housing Authority (“the Authority”) regarding making reasonable accommodations and reasonable modifications for qualified applicants or residents with disabilities for participation in the Authority’s state assisted public housing program. The Housing Choice Voucher Program Administrative Plan addresses Reasonable Accommodation policy and procedures associated with the Housing Choice Voucher Program. A copy of this Reasonable Accommodation/Modification in Housing Policy and Procedures is posted in the Authority’s common areas and on the Authority’s website, located at www.eastonhousingauthority.net. Additionally, a copy of this Reasonable Accommodation/Modification in Housing Policy and Procedures may be obtained upon request by contacting the Easton Housing Authority Reasonable Accommodation Coordinator who is the Authority’s Assistant Director, by email at dawn@eastonhousing.com, in writing to Parker Terrace, North Easton, MA 02356, in person by appointment, or by phone at (508) 238-4747, Fax (508) 230-9694 MassRelay TTY, 711 or English at (800) 720-3480 Spanish at (866) 930-9252.

PART A: POLICY

SECTION 1. DEFINITIONS

The term “ADA” shall mean the Americans with Disabilities Act, as amended.

The term “FHA” shall mean the Fair Housing Act of 1968, as amended.

The term “*individual with a disability*” shall mean:

- (a) A physical or mental impairment that substantially limits one or more of the major life activities of such individual;
- (b) A record of such an impairment; or
- (c) Being regarded as having such an impairment.

This definition shall be interpreted as further detailed in 28 CFR § 35.108 (Title II ADA regulations).

The term “Policy” shall mean Part A of this Reasonable Accommodation/Modification Policy and Procedures, as adopted by the Authority’s Board, and as may be amended from time to time.

The term “Procedures” shall mean Part B of this Reasonable Accommodation/Modification Policy and Procedures, and as may be amended from time to time, in a manner consistent with the Policy, by the Authority’s Board.



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The term “reasonable accommodation” as used herein means a change in the Authority’s rules, policies, practices, or services, which may be necessary to provide persons with disabilities an equal opportunity to participate in the Authority’s programs, activities, and services, and/or to enjoy the Authority’s dwellings or facilities.

The term “reasonable modification” as used herein means a physical change, such as to a dwelling unit, building, common or public area, etc., necessary to afford persons with disabilities an equal opportunity to use and enjoy the premises and/or to access programs, activities, and services.

The term “Assistance Animal” as used herein are animals that work, provide assistance, or perform tasks for the benefit of a person with a disability or provide emotional support that alleviates one or more identified symptoms or effects of a person’s disability. This definition is inclusive of, but is not limited to, Service Animals. Assistance Animals are often dogs but may be other animals as well. An animal does not need to be trained to be an assistance animal, though some may receive training. An Assistance Animal is not a pet and is permitted as a reasonable accommodation in order for a person with a disability to have an equal opportunity to participate in and enjoy the Authority’s housing and programs.

The term “Service Animal” as used herein is a dog that is individually trained to do work or perform tasks, including a physical, sensory, psychiatric, intellectual, or other mental disability, for persons with a disability. Service Animal is a type of Assistance Animal, but has a narrower meaning defined by the Department of Justice under the ADA. Guidance in this policy referring to Assistance Animals is applicable to Service Animals unless otherwise specified.

The term “Pet” as used herein is a domesticated animal of a species that is commonly kept as a household pet in the community. A cat, dog, gerbil, or hamster is an example of a domesticated animal which is commonly kept as a household pet. A monkey or snake is an example of an animal which is not commonly kept as a household pet in the community. If the animal does not meet the criteria for a Service Animal or other type of Assistance Animal, the animal is considered a pet for public housing purposes and the Authority’s Pet Policy applies¹.

SECTION 2. POLICY STATEMENT

The Authority is committed to ensuring that its policies and practices do not deny individuals with disabilities the equal opportunity to access, participate in, or benefit from, the Authority’s housing services, programs, and facilities, nor otherwise discriminate against individuals with disabilities in connection with the operation of the Authority’s housing

¹ Including any permissible “No Pet” policies.



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services or programs. Therefore, if an individual with a disability requires a reasonable accommodation, (i.e., a change to its rules, policies, practices, or services), or a reasonable modification, (i.e., a physical alteration to a housing unit or public or common use area), the Authority will provide such a reasonable accommodation/modification, unless doing so would result in a fundamental alteration to the nature of the program, an undue financial and administrative burden, or is otherwise not required such as in the case of a direct threat exception. Where applicable and appropriate, the Authority will engage in an interactive process with the individual or person acting on the individual's behalf to make another accommodation/modification that would not result in a fundamental alteration or financial and administrative burden.

The Reasonable Accommodation/Modification in Housing Policy and Procedures outlined here applies to the Authority's applicants and residents who are qualified "individuals with a disability" under applicable law. As described herein, the Authority may require reliable documentation or verification of the disability (this will not require a description of the cause of the disability, diagnosis, or medical records), that the individual needs the accommodation, and that the accommodation is likely to be effective. As described herein, the Authority will thoroughly and promptly consider any request for a reasonable accommodation and will explain the basis for any denial to the requester.

SECTION 3. PURPOSE

This Policy is intended to:

- (a) Communicate the Authority's position regarding reasonable accommodations/modifications for persons with disabilities in connection with the Authority's housing programs, services, and policies;
- (b) Establish a procedural guide for implementing such Policy; and
- (c) Comply with applicable federal, state, and local laws to ensure accessibility for persons with disabilities to housing programs, benefits and services administered by the Authority.

SECTION 4. AUTHORITY

The requirements of this Policy are based upon the following statutes and regulations:

Section 504 of the Rehabilitation Act of 1973, as amended ("Section 504"), and implementing regulations at 24 CFR part 8, which prohibit discrimination on the basis of disability status by recipients of federal financial assistance;

The Fair Housing Act ("FHA"), as amended, which prohibits discrimination in the sale, rental, and financing of dwellings on the basis of disability and other protected classes.



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Reasonable accommodation requirements are further clarified under The Joint Statement of the Department of Housing and Urban Development and the Department of Justice on Reasonable Accommodations under the Fair Housing Act²;

Title II of the Americans with Disabilities Act (“ADA”), as amended, and implementing regulations at 28 CFR part 35, prohibit discrimination on the basis of disability status by public entities. Except as provided in §35.102(b) of 28 CFR Part 35, the ADA applies to all services, programs, and activities provided or made available by public entities (State and local governments and agencies and instrumentalities thereof);

Massachusetts General Laws chapter 151B, which prohibits discrimination against persons with disabilities and other protected classes in the renting, leasing, or sale of housing accommodations.

SECTION 5. MONITORING AND ENFORCEMENT

The Authority’s Reasonable Accommodation Coordinator, is responsible for monitoring the Authority’s compliance with this Policy and enforcing the requirements under this Policy. Questions regarding this Policy, its interpretation or implementation should be made by contacting the Easton Housing Authority Reasonable Accommodation Coordinator, who is the Authority’s Assistant Director, by email at dawn@eastonhousing.com, in writing to Parker Terrace, North Easton, MA 02356, in person by appointment, or by phone at (508) 238-4747, Fax (508) 230-9694 MassRelay TTY, 711 or English at (800) 720-3480 Spanish at (866) 930-9252.

SECTION 6. GENERAL PRINCIPLES FOR PROVIDING REASONABLE ACCOMMODATIONS/MODIFICATIONS

Listed below are the general principles which provide a foundation for the Policy and which the Authority’s staff should apply when responding to requests for reasonable accommodations/modifications within all the Authority’s housing programs:

- (a) It is presumed that the individual with a disability is usually knowledgeable of the appropriate types of, and methods for providing, reasonable accommodations/modifications needed when making a request. However, the Authority may offer equally effective alternatives to the requested accommodation, and/or alternative methods for providing the requested accommodation/modification.
- (b) The procedure for evaluating and responding to requests for a reasonable accommodation/modification relies on a cooperative relationship between the Authority and the applicant, resident, or person acting on their behalf. The process is not adversarial.

² https://www.justice.gov/sites/default/files/crt/legacy/2010/12/14/joint_statement_ra.pdf .



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Instead, it is an interactive process, including addressing clarifications as to what is being requested or information that was submitted, any further information that may be needed, and/or to discuss alternative accommodations/modifications that may meet the individual's needs.

- (c) The Authority shall inform all applicants and residents that alternative forms of communication may be utilized. The Request for Reasonable Accommodations/Modifications form ("Request Form," a copy of which is attached to this Policy and Procedures as Attachment 2) is designed to assist the Authority and our applicants, and residents. If an applicant or resident does not or cannot use the Request Form, the Authority will still respond to the request for an accommodation/ modification. The applicant or resident may also request assistance with the Request Form or may request that the Request Form be provided in an equally effective format or means of communication through auxiliary aids and services.

Some examples of auxiliary aids and services include the following: qualified interpreters, printed material, telecommunications products and systems including text telephones (TTYs), assistive listening devices, or other effective methods of making aurally delivered materials available to persons who are deaf or hard of hearing; qualified readers, taped texts, audio recordings, materials written in Braille, large print materials, or other effective methods of making visually delivered materials available to individuals who are blind or have low vision.

- (d) If the accommodation/modification is reasonable (see Procedure 3 below), subject to any applicable limitations, the Authority will grant it. In accordance with Procedure 3, the Authority will grant the request for a reasonable accommodation/modification only to the extent that an undue financial and administrative burden or fundamental alteration to the nature of the program is not created thereby. A "fundamental alteration" is a modification that alters the essential nature of a provider's operations (e.g., a request for a service such as a transportation service that the Authority does not provide under its program).
- (e) The Authority will make a determination of undue financial and administrative burden on a case-by-case basis, involving various factors, such as the cost of the reasonable accommodation/modification, the financial resources of the Authority, the benefits the accommodation/modification would provide to the requester, and the availability of alternative accommodations/modifications that would adequately meet the requester's disability-related needs.
- (f) The Authority will also grant reasonable modifications in accordance applicable laws, including G.L. c. 151B § 4(7A) with respect to reasonable modifications that are at the expense of owners in publicly assisted housing. The Authority will also consult resources as applicable for its state-aided public housing in accordance with PHN 2011-13 and as described in PIH 2010-26.



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- (g) Where applicable, all written documents required by this Policy should contain plain language and be in the appropriate alternative formats in order to communicate information and decisions to the person requesting the accommodation/modification.
- (h) Any in-person meetings with a person with mobility impairments will be held in an accessible location. Reasonable accommodations will also be made to meet the person's disability-related needs, including through telephonic or remote meetings, as well as through requested auxiliary aids or services, to ensure the person has an equally effective opportunity to attend and participate.

SECTION 7. AMENDMENTS

The Policy and Procedures may be amended only by a vote of the Board of the Authority. Any amendment to the Policy or Procedures shall be consistent with all applicable laws and regulations. The attached forms and notices may be modified from time to time if others are deemed more appropriate for use by the Authority and they are consistent with the policies and procedures set forth herein. The forms and notices attached are illustrative and may be substituted without board approval. They may also be amended to tailor to individual programs where terminology differs. However, they shall remain consistent with the scope of the policy and applicable procedures.

SECTION 8. STAFF TRAINING

The Reasonable Accommodation Coordinator will ensure that the Authority's staff are familiar with this Policy and Procedures and all applicable federal, state, and local requirements regarding reasonable accommodations/modifications. The Reasonable Accommodation Coordinator will avail himself/herself of training opportunities related to anti-discrimination efforts and reasonable accommodations/modifications.

SECTION 9. OTHER APPLICABLE POLICIES AND LAW

The information in this policy supersedes that set forth in other procedures in other governing documents. However, to the extent that these policies contain supplemental specific information relevant to those programs that is not contained herein, said policy may serve to supplement this reasonable accommodation/modification in housing policy.

Due to the nature of this area of the law, this policy and procedures document cannot be an exhaustive compilation of rules or policies governing assessment by the Authority of requests for reasonable accommodation/modification. If any conflicts exist or arise between these policies and procedures and guidance issued by the U.S. Department of Housing and Urban Development, the Department of Housing and Community Development, or existing or future statutes, regulations, or other legal requirements, the Authority shall not be estopped from following that guidance.



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PART B: PROCEDURES

PROCEDURE 1 - COMMUNICATION WITH APPLICANTS, RESIDENTS AND

At the time of application, all applicants will be provided with the opportunity to request a reasonable accommodation/modification. This may be done on the Common Housing Application for Massachusetts Public-Housing (CHAMP), or other public housing program application as applicable, or by electronic or paper application for any of these programs, or, upon the applicant's request, in another equally effective format. The Notice to All Applicants and Residents: Reasonable Accommodations and Modifications are available for Applicants and Residents with Mental and/or Physical Disabilities ("Notice") is attached to this Policy and Procedures as Attachment 1.

The Authority's applicants and residents, seeking accommodations/modifications may contact the Easton Housing Authority Reasonable Accommodation Coordinator, who is the Authority's Assistant Director, by email at dawn@eastonhousing.com, in writing to Parker Terrace, North Easton, MA 02356, in person by appointment, or by phone at (508) 238-4747, Fax (508) 230-9694 MassRelay TTY, 711 or English at (800) 720-3480 Spanish at (866) 930-9252.

The Request Form is not required. A resident may otherwise submit the request in writing, orally, and at any time. Upon receiving the request, housing management and/or the Reasonable Accommodation Coordinator will respond to the request within ten (10) business days. The response may indicate that the request is under review and the applicant or resident will be contacted if further information is required. It is not the decision on the request.

If additional information or documentation is required, a written request should be issued to the resident by using the Request for Information or Verification Form ("Request for Information" a copy of which is attached to this Policy and Procedures as Attachment 3). The Verification of Disability by a Physician or Other Professional for Reasonable Accommodation/Modification Request form ("Verification for Reasonable Accommodation/Modification Request Form" is attached to this Policies and Procedures as Attachment 4).

In certain circumstances, the Authority may elect not to require documentation. Examples may include simple routine requests (i.e., grab bars). If the Authority makes that determination, a written request for verification will not be made by the Authority. When the disability and need is obvious or known to the housing provider, the Authority will not require verification of the disability.

If the Authority requests that an applicant or resident supply additional information that is reasonably necessary for the Authority to make a decision on the individual's request for an accommodation, the applicant or resident should provide the requested information, or otherwise respond to the Authority's request, within a reasonable time period as provided for



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by the Authority. The time period during which any interactive dialogue on the reasonable accommodation is occurring, or items relevant to the request are awaiting verification, will extend the required timeframe for the decision.

The Authority may request a meeting with the applicant or resident to assist with the decision. If the Authority requests a meeting to discuss the request for reasonable accommodation, it will use the form entitled “Request for Meeting” (a copy of which is attached to this Policy and Procedures as Attachment 5).

The Authority will approve or deny the request as soon as possible, but not later than thirty (30) days after receiving all needed information and documentation from the resident (including obtaining verifications and documentation from other parties, where applicable). When the letter for a meeting is sent to an applicant or resident, it will stop the tolling of the 30 days to make the decision from the date of the letter until the date of the meeting or the provision of additional information as requested in the meeting, whichever is later.

All decisions to grant or deny reasonable accommodations/modifications will be communicated in writing or, if required, in an alternative format to communicate the decision to the applicant or resident. Exceptions to the thirty (30) day period for notification of the Authority’s decision on the request should be provided to the resident in writing, setting forth the reasons for the delay. However, this notification as to the exceptions to the 30 day time period is not required when the Authority is awaiting verification/documentation and in cases of tolling as set forth above.

A copy of both the Letter Denying Request for Reasonable Accommodation/ Modification and the Letter Approving Request for Reasonable Accommodation/ Modification is attached to this Policy and Procedure as Attachment 6 and Attachment 7, respectively.

In cases of denial, the applicant or resident shall also be informed of his or her right to request, in writing, a Grievance Hearing as applicable on the decision.

The Authority will maintain at its offices written materials which summarize this Policy and highlights the Procedures for making a request for reasonable accommodation/modification.

On occasion, it may be necessary for the Authority to respond to the individual in the form of written correspondence, which differs from the standard forms set forth within these Policies and Procedures. This is acceptable, provided that said correspondence meets the basic requirements of the forms.

PROCEDURE 2 - SEQUENCE FOR MAKING DECISIONS

STEP 1. Is the applicant/resident a qualified “individual with a disability”?

- (a) If NO, the Authority is not obligated to make a reasonable accommodation/modification; therefore, the Authority may deny the request.



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- (b) IF YES, proceed to Step 2.
- (c) If more information is needed, the Authority will seek additional information as appropriate through the standard Request for Information letter, the standard Request for Meeting letter, and/or other equally effective method of communication (a copy of the Request for Meeting letter is attached to this Policy and Procedures as Attachment 5).

STEP 2. Is the requested accommodation/modification related to the disability?

- (a) If NO, the Authority is not obligated to make the accommodation/modification; therefore, the Authority may deny the request.
- (b) If YES, proceed to Step 3.
- (c) If more information is needed, the Authority will seek additional information as appropriate through the standard Request for Information letter, the standard Request for Meeting letter, and/or other equally effective method of communication.

STEP 3. Is the requested accommodation reasonable? This determination will be made by following PROCEDURE 3 - GUIDELINES FOR DETERMINING REASONABLENESS, below.

- (a) If YES, the Authority will approve the request for reasonable accommodation/modification. A written description of the accommodation/modification will be prepared and included in the Letter Approving Request for Reasonable Accommodation/Modification.
- (b) If NO, the Authority may deny the request. Submit the denial using the Letter Denying Request for Reasonable Accommodation/Modification.
- (c) If more information is needed, the Authority will seek additional information as appropriate through the standard Request for Information letter, the standard Request for Meeting letter, and/or other equally effective method of communication.

PROCEDURE 3 - GUIDELINES FOR DETERMINING REASONABLENESS

Requests for reasonable accommodation/modification will be considered on a case-by-case basis. Decisions regarding reasonable accommodations/modifications will be made in compliance with all applicable laws, regulations, and requirements.

The Authority will consider the requested method for providing reasonable accommodations/modifications for an individual with a disability. However, unless the disability-related need for an accommodation/modification is obvious or otherwise known to the Authority, the Authority may require the individual with a disability to provide further information to demonstrate the need for the requested accommodation to enable an equal opportunity to access, use, or enjoy the housing program or Authority services and activities. Additionally, the Authority may offer equally effective alternatives to the requested accommodation/modification, and/or alternative methods for providing the requested accommodation through the interactive process.



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If a requested accommodation is unlikely to provide the disabled individual with an equal opportunity to use and enjoy the housing, the Authority need not grant that accommodation.

3.1 UNDUE FINANCIAL OR ADMINISTRATIVE BURDEN

The factors which shall be considered in determining whether a requested accommodation would create an undue financial or administrative burden on the Authority are:

- a) the nature of the accommodation;
- b) the cost of the accommodation;
- c) the Authority's financial and administrative resources;
- d) the size of the housing program;
- e) the type of unit or facilities involved; and
- f) the possibility of recouping costs from another source.

The determination of whether an accommodation/modification constitutes an undue financial or administrative burden shall be made on a case-by-case basis, considering the circumstances and resources available at the time of the decision.

If granting the requested accommodation/modification would create an undue financial or administrative burden, the Authority shall comply with the request to the extent it can do so without undergoing undue burden(s) if it is determined that this modified accommodation/modification would still make the program usable and accessible by the individual requesting the accommodation.

If there are numerous accommodations that would satisfy the needs of the person with the disability, the Authority may select the option which is most convenient and cost effective.

3.2 FUNDAMENTAL ALTERATION

In determining whether a requested accommodation would cause a fundamental alteration in the nature of the housing program, the Authority shall consider whether the accommodation sought would require it to conduct activities which extend beyond the scope of its primary purpose, (i.e., to operate low-income public housing, to assure that residents comply with their lease and program obligations, and the practical components necessary to achieve those purposes). For example, a request for the Authority to provide childcare, nursing services, or other services not directly related to housing would constitute a fundamental change in the nature of the program the Authority provides.

3.3 INTERACTIVE PROCESS

The responsibility for the decision that a proposed reasonable accommodation/modification would result in such undue burdens or would fundamentally alter the nature of the program shall rest with the Executive Director or his/her designee. If, after



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consideration of resources available for use in the funding and operation of the service, program, or activity, the Executive Director or his/her designee determines there would be an undue burden, that decision must be accompanied by a written statement of the reasons for reaching that conclusion

If the Executive Director or his/her designee decide an action would result in such an alteration or such burdens, if applicable, the Authority shall propose any other action that will not result in or require a fundamental alteration or financial and administrative burden as part of the interactive process.

3.4 DIRECT THREAT

Generally, an accommodation is not required if it would pose a “direct threat” to the health and safety of other individuals or would result in substantial physical damage to the property of others. The Authority’s assessment of “direct threat” will be individualized and based on reliable objective evidence (*e.g.*, current conduct, or a recent history of overt acts).

The Authority’s assessment will consider:

- a) the nature, duration, and severity of the risk of injury;
- b) the probability that injury will actually occur; and
- c) whether there are any reasonable accommodations that will eliminate the direct threat.

In making this determination, the Authority will make an individualized assessment based upon reasonable judgment that relies on current medical knowledge, where applicable, or on the best available objective evidence.

In evaluating a recent history of overt acts, the Authority will consider circumstances, such as intervening treatment or medication, which have eliminated the direct threat (*i.e.*, a significant risk of substantial harm).

3.5 VERIFICATION OF DISABILITY

The Authority may generally verify a person has a disability only to the extent necessary to determine that the person:

- a) is qualified for the housing for which they are applying;
- b) is entitled to any disability-related preference or benefit they may claim; or
- c) has a disability-related need for a requested accommodation/modification in order to have an equal opportunity to enjoy the housing and/or participate in or benefit from the Authority’s activities, programs, or services.

In response to reasonable accommodation/modification requests, the Authority may not



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require verification of disability if the disability is obvious or otherwise known. The Authority also may not ask what the disability is or require specific details as to the disability. The Authority may require verification of disability and documentation of the disability-related need showing that there is a relationship or nexus between the requested accommodation/modification and the individual's disability or effects of the disability), unless such disability or need is obvious or otherwise known. The Authority may not otherwise inquire into the nature or severity of the disability, require access to confidential records, or require specific types of evidence of disability or disability-related need.

Verification must come from a reliable source with sufficient professional and personal knowledge of the applicant to verify the disability and need for the accommodation where applicable. Further, certain additional specific information may be required for approval of certain Assistance Animals as outlined in HUD FHEO Notice 2020-01 and DHCD PHN 2023-01.

3.6 LEASE VIOLATION

Where a resident with a disability engages in a lease violation, the Authority shall approach the situation as they would with any other resident except that if the resident requests reasonable accommodation in order to comply with the lease, the request shall be considered. At any private conference with a resident on a lease violation, the Authority management shall inform of the right to request reasonable accommodation and have the form readily available.

Although the Authority must make reasonable accommodations to enable a person with a disability to comply with the requirements of his/her lease, an accommodation is not reasonable if it would require a fundamental alteration in the nature of the program or would impose undue financial and administrative burdens on the Authority. Further, if the Authority determines that there is still a high likelihood of the individual being a threat to the health or safety of others, which cannot be eliminated by a modification of policies, practices, or procedures, or the provision of auxiliary aids and services in accordance with the plan and applicable law, the Authority need not grant the accommodation.

See previous discussion within this policy/procedure for considerations on whether a requested accommodation would fundamentally alter the nature of the housing program and the considerations of likelihood of threat. In addition, the provision of reasonable accommodations shall not require the lowering or waiving of essential eligibility requirements for the housing program.

A resident with a disability has the right to refuse reasonable accommodations. However, if a resident who has refused a reasonable accommodation engages in lease violating behavior, the Authority may enforce the lease or program requirements and seek appropriate remedies including eviction or termination, as with any other resident.



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If a disabled resident, who has committed a lease violation, requests a reasonable accommodation in order to comply with his/her lease, the Authority must determine whether it is reasonable to believe that the problem is not likely to recur with the accommodation sought. For this purpose, the Authority may request the resident provide appropriate information, documentation, or verification within a reasonable time. If management believes that, based on objective information, the accommodation is not likely to solve the lease problem, the accommodation may be denied.

If a resident with a disability engages in persistent lease or program violating behavior and refuses requests to discuss the problem or possible reasonable accommodations, the Authority shall proceed as it would with any other resident under similar circumstances.

a. State Assisted Housing

For programs subject to 760 CMR 5.08(2) and/or 760 CMR 6.03 & 6.08, when the Authority determines that an applicant may be disqualified for housing because of a lease violation at a prior tenancy or other disqualifying conduct, if the applicant shows that the lease violation or disqualifying conduct was due to a disability, then these facts shall be considered by the Authority as mitigating circumstances pursuant to 760 CMR 5.08(2).

Disability-related circumstances relating to a lease violation may also be presented by or on behalf of a resident with a disability as part of the grievance process pursuant to 760 CMR 6.03 & 6.08. For example, a resident may demonstrate that a lease violation arose from a disability and that some circumstance has changed, and/or some reasonable accommodation could be provided, making the conduct unlikely to recur. Such circumstances may also be presented separately through a reasonable accommodation request (e.g., a request to forego eviction) independent of the grievance process. Residents may also grieve the Authority's responses or inaction with respect to a reasonable accommodation/modification request through the grievance process pursuant to 760 CMR 6.03 & 6.08.

b. Other Housing Programs

To the extent that the Authority administers other programs, and they are not subject to the regulations in the preceding paragraph lease or program violations which are the cause for denial, termination or eviction³ may be raised as mitigating circumstances. This may take place at or before a grievance hearing, informal review or informal hearing as applicable to the underlying action. Such circumstances may also be presented separately through a reasonable

³ In cases where the EHA is the landlord this applies to eviction in cases where the EHA is the subsidy Administrator (i.e. the Massachusetts Rental Voucher Program) this applies to termination.



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accommodation request (e.g., a request to forego eviction or termination) independent of any applicable grievance, review or hearing process.

3.7. CONFIDENTIALITY

Information provided to the Authority in relation to a reasonable accommodation/modification request will be kept confidential and will not be shared with other persons unless they need the information to make or assess a decision to grant or deny a reasonable accommodation/modification request or unless disclosure is required by law. Information as to approved accommodations will be released to the extent necessary to provide said accommodation.

PROCEDURE 4 - REASONABLE ACCOMMODATION REQUESTS MADE AT A GRIEVANCE HEARING

Where an applicant or resident requests a reasonable accommodation at the time of a grievance hearing, the decision may be made by the Hearing Officer utilizing the principles set forth within this policy/procedure document. At the discretion of the Hearing Officer, the Hearing Officer may elect to require the Authority to make the decision on the reasonable accommodation and provide a new date for the grievance hearing. If the Authority denies the request for a reasonable accommodation, this denial will also be considered by the hearing officer at the rescheduled grievance hearing.

PROCEDURE 5 –ASSISTANCE ANIMALS

In tenant-based programs with private landlords, it is up to the landlord rather than the Authority to decide whether an assistance animal will be approved as a reasonable accommodation. To the extent that the family disagrees with the landlord’s determination, they may be provided with information regarding fair housing laws by the Authority and, where appropriate, may be issued a voucher for relocation.

When an individual requests an assistance animal in any program, they will be provided with a copy of the Request for Reasonable Accommodation Form and the “FHEO Guidance on Documenting an Individual’s Need for Assistance Animals in Housing” document (See Attachment 8 to this Policy).

If the individual is a public housing applicant or resident and informs the EHA that they intend to keep an animal in the unit they will also be provided with the EHA’s Pet Policy accompanied by the Authority’s Reasonable Accommodation Policy.



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Requests for assistance animals⁴ are reviewed under this Reasonable Accommodation/Modification in Housing Policy and Procedures document as requests for a Reasonable Accommodation. Additional information relative to Assistance Animal requests is set forth within HUD’s FHEO Notice 2020-01 and DHCD’s Notice 2023-01. These include a discussion of unique animals and additional information related thereto. The Authority will require additional verification where needed in support of a Reasonable Accommodation for a unique animal.

5.1 Online Documentation

Generally, certificates, registrations, and licensing documents for assistance animals that are generated through websites will not be deemed acceptable verification. The Authority requires reliable documentation as to the fact that a disability exists and the disability-related need for the accommodation if it is not obvious or otherwise known. A letter from a legitimate healthcare professional, appropriately licensed, that provides services over the internet is acceptable when the provider has personal knowledge of the individual’s disability and need for the accommodation.

5.2 Denial of an Assistance Animal

Denials of approval for an Assistance Animal are governed by the Reasonable Accommodation policy and Procedures. Pursuant to the Authority’s policy, requests will be approved if:

- (a) The subject of the request is a qualified “individual with a disability” as defined therein; and
- (b) The requested accommodation is related to the disability and is necessary to provide an equal opportunity to use and enjoy the housing; and
- (c) The requested accommodation is reasonable. A request shall be considered “reasonable” if it does not create an undue financial or administrative burden or constitute a fundamental alteration in the nature of the housing program.

The additional information requested under HUD FHEO 2020-01, DHCD 2023-01 and this Procedure 5 Assistance Animals will also be taken into consideration as part of this analysis.

The Authority will prohibit the keeping of animals if:

- (a) The animal is out of control and its handler does not take effective action to control it; or

⁴ To the extent that the Assistance Animal is also a Service Animal as defined by the ADA, the ADA test will be used first as a best practice as described in HUD’s FHEO Notice 2020-01 and DHCD’s PHN 2023-03.



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- (b) The animal is not housebroken; or
- (c) The individual animal (as opposed to a general animal of its breed or size) poses a direct threat to the health or safety of others, or would cause substantial physical damage to the property of others, which cannot be eliminated or reduced to an acceptable level by a reasonable modification to other policies, practices, and procedures; or
- (d) Allowing the resident to keep the animal would impose an undue financial or administrative burden on the Authority or fundamentally alter the nature of the housing program.

5.3 Care and Handling of Assistance Animals

Assistance animals are not considered “pets.” The Authority’s Resident pet policies do not apply. Housing Authorities have the authority to regulate Assistance Animals under applicable federal, state, and local law (Federal Register Vol 73, No. 208). There are legal limitations related to the care and keeping of Assistance Animals, which will be addressed herein.

Residents must care for Assistance Animals in a manner that complies with state and local laws, where applicable and legally enforceable. If a state or local law limits and ability to grant a request for reasonable accommodation or is an issue relative to the continuance of a reasonable accommodation approval the Authority will consult with legal counsel before taking action.

Assistance Animals cannot pose a direct threat to the health or safety of others, or cause substantial physical damage to the development, dwelling unit, or property of other residents which cannot be eliminated or reduced to an acceptable level by a reasonable modification to other policies, practices, and procedures. While the Authority’s Pet Policy does not apply, residents must still comply with other lease terms.

Where applicable and appropriate under the law, the Authority will attempt to determine if violations could be reduced through further reasonable accommodation.

5.7 Removal of a Previously Approved Assistance Animal

In the event of a violation of the above, or other applicable law, the issue will be discussed with the resident and the resident will be provided with the opportunity to address the matter, unless a reasonable direct threat exists. Upon request, the Authority will consider whether the violation could be reduced or eliminated by a reasonable accommodation.

Serious violations may ultimately result in a request by the Authority that the family replace the Assistance Animal that is causing the violation(s) with another Assistance



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Animal that will not pose a direct threat to the health or safety of others, or cause substantial physical damage to the development, dwelling unit, or property of other residents.

The Authority provides the family with an Assistance Animal Agreement to ensure that all parties are aware of the rights and responsibilities with regard to the care and handling of Assistance Animals under the law and that lease provisions apply.

If the Authority requests to remove an Assistance Animal from the unit due to applicable law and/or lease violating behavior, the family may request a grievance hearing. Terms of the lease still apply.



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ATTACHMENTS:

Attachment 1 - Notice of Availability of Reasonable Accommodations/Modifications

Attachment 2 - Request for Reasonable Accommodations/Modifications Form

Attachment 3 – Request for Information or Verification

Attachment 4 – Verification for Reasonable Accommodation/Modification Request Form

Attachment 5 – Letter Denying Request for Reasonable Accommodation/Modification

Attachment 6 – Letter Approving Request for Reasonable Accommodation/Modification

Attachment 7 – Request for Meeting

Attachment 8 – Assistance Animal Agreement

Attachment 10 - Summary of Reasonable Accommodation/Modification in Housing Policy and Highlights of the Procedures for Making a Request for Reasonable Accommodation/Modification



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Attachment 1: Notice of Availability of Reasonable Accommodations/Modifications

Notice to All Applicants and Residents and Participants: Reasonable Accommodations and Modifications are Available for Applicants, Residents and Participants with Mental and/or Physical Disabilities.

The Easton Housing Authority (“the Authority”) does not discriminate against applicants, residents, or participants on the basis of mental (including psychiatric) or physical disabilities. In addition, the Authority has an obligation to provide "reasonable accommodations" and "reasonable modifications" on account of a disability if an applicant, resident, participant, or a household member is limited by the disability and for this reason needs such an accommodation or modification. A reasonable accommodation is a change that the Authority can make to its rules, policies, practices, or services, and a reasonable modification is a change the Authority can make to its facilities (including physical alterations to the housing unit or public or common use areas) that will assist an otherwise eligible person with a disability to have equal opportunity to use and enjoy the housing or common or public use areas or to participate fully in the Authority’s programs, activities, or services. Such changes may not be reasonable if they are not financially and programmatically feasible for the housing authority.

An applicant resident or participant household which has a member with a mental and/or physical disability must still be able to meet essential obligations of tenancy (for example, the household must be able to pay rent, to care for the apartment, to report required information to the Authority, and to avoid disturbing neighbors). An accommodation or modification may be the basis by which the household is able to meet those obligations of tenancy.

The Authority has an Accommodation Coordinator. If you need an accommodation or modification because of a disability, please complete the attached form and return it to the Authority. Upon reasonable request by the Authority, you must also submit documentation verifying the existence of a disability and the disability-related need for the accommodation or modification. Within thirty (30) calendar days of receipt of your request and documentation, the Accommodation Coordinator will contact you to discuss what the Authority can reasonably do to provide you an accommodation or modification on account of your disability.

If you or a member of your household has a mental and/or physical disability, and as a result needs an accommodation or modification, you, the household member, or authorized representative, may request it at any time. However, you are not obliged to make such a request, and if you prefer not to do so that is your right.

Notice : The EHA does not discriminate on the basis of race, color, religion, sex, national origin, ancestry, sexual orientation, age, familial status, veteran status, public assistance, disability, genetic information, gender identity, or any other class protected by state or local law in the access to its programs for employment, or in its activities, functions or services.



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Attachment 2: Request for Reasonable Accommodations/Modifications Form

Request for Reasonable Accommodations/Modifications

To: Reasonable Accommodation Coordinator, Easton Housing Authority

From: _____
Applicant or Resident Name (please print)

Address

Town/City, State, Zip

Tel (____) _____

1. On account of my disability, I request the following be done in order to permit me to have equal opportunity to use and enjoy the housing or public or common use areas or to participate fully in the Housing Authority's programs, activities, or services: (Describe)

2. This request for a reasonable accommodation/modification is necessary so that I can:

3. Documentation needed to verify the existence of my disability and my disability-related need for the accommodation/modification is attached. (Attach appropriate documentation)

I attest that the foregoing information is true and correct.

Signature of Applicant or Resident (or authorized representative)

Date



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Attachment 3 – Request for Information or Verification

[Easton Housing Authority LETTERHEAD]

Date:

To:

Dear Applicant or Resident:

We have received your request for a reasonable accommodation/modification.

We need to know more about [the disability-related need for your request] [explain issue, simply and clearly stated] before we can decide whether to approve your request.

We need to know more because [provide reason, simple and clearly stated].

You can give us more information by [providing the attached Verification of Disability by Physician or Other Professional for Reasonable Accommodation/Modification Request form or by other information demonstrating the disability-related need for your request].

If this is a problem for you, please reach out to our office and so that alternative methods of providing the information may be made available to you.

We will not make a decision on your request for reasonable accommodation/modification until we have this new information.

If you think that you have given us this information, or if you think that we should not ask for this information, please call us at (508) 238-4747 or email us at _____.



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Attachment 4 – Verification for Reasonable Accommodation/Modification Request Form

Verification of Disability by Physician or Other Professional
for Reasonable Accommodation/Modification Request

Name of Physician or other professional: _____

Profession: _____

Address:

Date: _____

Applicant/Resident Name: _____

Applicant/Resident Address: _____

I hereby authorize release of the information requested in this verification form:

Applicant/Resident Signature _____

Date _____

A housing authority may request verification that an applicant/resident has a disability to determine whether the applicant/resident needs a reasonable accommodation in the Authority's rules, policies, practices or services, or needs a reasonable modification of the leased premises or public or common use areas, in order to have equal opportunity to use and enjoy the leased premises or the public or common use areas, or to participate fully in the Authority's programs, activities, or services. The above-named applicant/resident has authorized your release of the requested information. We would appreciate your prompt response to the questions on the reverse side of this letter. If you have questions, please contact our office. Thank you for your anticipated cooperation.

Sincerely,

Reasonable Accommodation Coordinator



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The following proposed reasonable accommodation(s)/reasonable modification(s) to provide the applicant/resident equal opportunity to use and enjoy the Authority’s housing, programs, etc. is (are) under consideration by the Authority:

THE FOLLOWING TO BE COMPLETED BY PHYSICIAN (OR OTHER PROFESSIONAL):

1. Based upon your knowledge, does the above-named applicant/resident have a physical or mental impairment which substantially limits one or more major life activities, or do you have a record(s) of such an impairment for the above-named applicant/resident? Circle the appropriate answer:

Yes / No

Note: Determination of whether a physical or mental impairment substantially limits a major life activity is to be made without regard to the ameliorative effects of mitigating measures (e.g., assess substantial limitation of a major life activity, including the operation of a major bodily function, without considering the benefit of medication, assistive devices, etc., to the individual). Furthermore, an impairment that is episodic or in remission is a disability if it would substantially limit a major life activity when active.

2. Does the applicant/resident have a disability-related need for the abovementioned reasonable accommodation(s)/reasonable modification(s) based on the physical or mental impairment? Please explain your response.

Note: please only provide information that demonstrates there is a relationship between a disability verified by a “yes” response to the question above and the need for the proposed reasonable accommodation /modification. Please do not otherwise provide information as to the nature or severity of the disability.

3. Other comments (please do not provide information that is not directly relevant to the reasonable accommodation(s)/reasonable modification(s)):

CERTIFICATION: I certify that the information provided above represents my professional judgment and is true and correct to the best of my knowledge and belief.

Signature of Physician or Professional

Date:



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Name: _____

Address: _____

Telephone #: _____

Attachment 5 – Request for Meeting

[Easton Housing Authority LETTERHEAD]

Date:

To:

Dear Applicant or Resident:

We have received your request for a reasonable accommodation dated [xx/xx/xxxx]. It would help us make our decision if we could meet with you. You are entitled to bring someone to assist you at the meeting.

We would like to meet on [date, time, place] [include remote meeting and telephonic meeting options as an alternative to an in-person meeting]. If you cannot come at that time, please call us at _____ and we can find a mutually agreeable date and time.

We will talk about the accommodation you have requested [describe issue, simply and clearly including any specific questions] at this meeting.

Please come ready to talk to us about the changes you want. Please bring copies of any information that you would like to provide us. We look forward to meeting with you.

If you have questions, or if you need any accommodations for this meeting, please contact _____.

[Signature and closing]

Notice: The Easton Housing Authority does not discriminate on the basis of race, color, religion, sex, national origin, ancestry, sexual orientation, age, familial status, veteran status, public assistance, disability, genetic information, gender identity, or any other class protected by state or local law in the access to its programs for employment, or in its activities, functions or services.



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Attachment 6 – Letter Denying Request for Reasonable Accommodation/Modification

[Easton Housing Authority LETTERHEAD]

Date:

To:

Dear Applicant or Resident:

We have denied your request for a reasonable accommodation[modification] for the following reasons: [list legal reason (e.g., undue administrative and financial burden to the Authority) simply and clearly stated].

If you have any questions or disagree with this decision and believe you can provide the Authority with additional information as to why the requested accommodation should be approved, please contact us at _____].

You may also request a Grievance Hearing by making this request in writing to _____ within _____ days of receipt of this letter.

If you disagree with this decision, you may request a grievance by writing to the Executive Director at the following address:

within 20 days from the date of this letter.

(Incorporate Easton Housing Authority grievance policy letter language for applicable program)

[Signature and closing]

Notice: The Easton Housing Authority does not discriminate on the basis of race, color, religion, sex, national origin, ancestry, sexual orientation, age, familial status, veteran status, public assistance, disability, genetic information, gender identity, or any other class protected by state or local law in the access to its programs for employment, or in its activities, functions or services.



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Attachment 7 – Letter Approving Request for Reasonable Accommodation/Modification

[Easton Housing Authority LETTERHEAD]

Date:

To:

Dear Applicant or Resident:

We have approved your request for the following change or reasonable accommodation/modification [description, where applicable including any terms, conditions and performance expectations and reason for such conditions]

We can provide you with this accommodation [modification] by [date].

[If there is a delay in providing the accommodation, explain the reason for delay simply and clearly].

If you think this change or reasonable accommodation [modification] is not what you requested, if it is not acceptable, if you object to the amount of time it will take to provide it, or otherwise have questions, please contact the Reasonable Accommodation Coordinator at

_____.

[Signature and closing]



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Attachment 8 – FHEO Handout re: Assistance Animals

Guidance on Documenting an Individual’s Need for Assistance Animals in Housing

This section provides best practices for documenting an individual’s need for assistance animals in housing. It offers a summary of information that a housing provider may need to know from a healthcare professional about an individual’s need for an assistance animal in housing. It is intended to help individuals with disabilities explain to their healthcare professionals the type of information that housing providers may need to help them make sometimes difficult legal decisions under fair housing laws. It also will help an individual with a disability and their healthcare provider understand what information may be needed to support an accommodation request when the disability or disability-related need for an accommodation is not readily observable or known by the housing provider. Housing providers may not require a healthcare professional to use a specific form (including this document), to provide notarized statements, to make statements under penalty of perjury, or to provide an individual’s diagnosis or other detailed information about a person’s physical or mental impairments.⁴⁹ Housing providers and the U.S. Department of Housing and Urban Development rely on professionals to provide accurate information to the best of their personal knowledge, consistent with their professional obligations. This document only provides assistance on the type of information that may be needed under the Fair Housing Act (FHA). The contents of this document do not have the force and effect of law and are not meant to bind the public in any way. This document is intended only to provide clarity to the public regarding existing requirements under the law or agency policies. Further, this document does not create any obligation to provide healthcare information and does not authorize or solicit the collection of any information not otherwise permitted by the FHA.⁵⁰

The Appendix to this Guide answers some commonly asked questions about terms and issues below. An understanding of the terms and issues is helpful to providing this information.

When providing this information, healthcare professionals should use personal knowledge of their patient/client – *i.e.*, the knowledge used to diagnose, advise, counsel, treat, or provide health care or other disability-related services to their patient/client. Information relating to an individual’s disability and health conditions must be kept confidential and cannot be shared with other

⁴⁹ See Joint Statement of the Department of Housing and Urban Development and the Department of Justice, Reasonable Accommodations Under the Fair Housing Act (“Joint Statement”), Q and A’s 13, 16-18 (May 17, 2004), at <https://www.hud.gov/sites/documents/huddojstatement.pdf>.

⁵⁰ This guidance does not expand on the obligations under the FHA or HUD’s regulations and should be construed consistently with Executive Order 13891 of October 9, 2019 entitled “Promoting the Rule of Law Through Improved Agency Guidance Documents,” Executive Order 13892 of October 9, 2019 entitled “Promoting the Rule of Law Through Transparency and Fairness in Civil Administrative Enforcement and Adjudication,” the Department of Justice Memorandum of January 25, 2018 entitled “Limiting Use of Agency Guidance Documents in Affirmative Civil Enforcement Cases,” and the Department of Justice Memorandum of November 16, 2017 entitled “Prohibition on Improper Guidance Documents.”



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persons unless the information is needed for evaluating whether to grant or deny a reasonable accommodation request or unless disclosure is required by law.⁵¹

As a best practice, documentation contemplated in certain circumstances by the Assistance Animals Guidance is recommended to include the following general information:

- The patient's name;
- Whether the healthcare professional has a professional relationship with that patient/client involving the provision of healthcare or disability-related services; and
- The type of animal(s) for which the reasonable accommodation is sought (i.e., dog, cat, bird, rabbit, hamster, gerbil, other rodent, fish, turtle, other specified type of domesticated animal, or another specified unique animal).⁵²

Disability-related information. A disability for purposes of fair housing laws exists when a person has a physical or mental impairment that substantially limits one or more major life activities.⁵³ Addiction caused by current, illegal use of a controlled substance does not qualify as a disability.⁵⁴ As a best practice, it is recommended that individuals seeking reasonable accommodations for support animals ask healthcare professionals to provide information related to the following:

- Whether the patient has a physical or mental impairment,
- Whether the patient's impairment(s) substantially limit at least one major life activity or major bodily function, and
- Whether the patient needs the animal(s) (because it does work, provides assistance, or performs at least one task that benefits the patient because of his or her disability, or because it provides therapeutic emotional support to alleviate a symptom or effect of the disability of the patient/client, and not merely as a pet).

Additionally, if the 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 for pleasure rather than for commercial purposes, it may be helpful for patients to ask healthcare professionals to provide the following additional information:

- The date of the last consultation with the patient;
- Any unique circumstances justifying the patient's need for the particular animal (if already owned or identified by the individual) or particular type of animal(s); and
- Whether the healthcare professional has reliable information about this specific animal or

⁵¹ See Joint Statement, Q and A 18 (May 17, 2004), at <https://www.hud.gov/sites/documents/huddojstatement.pdf>.

⁵² See, e.g., *Janush v. Charities Housing Development Corporation*, 169 F.Supp.2d 1133, 1136-37(N.D. Cal. 2000) (rejecting an argument that a definition of "service dog" should be read into the Fair Housing Act to create a rule that accommodation of animals other than service dogs is per se unreasonable, finding that "the law imposes on defendants the obligation to consider each request individually and to grant requests that are reasonable.").

⁵³ 24 C.F.R. § 100.201.

⁵⁴ 24 C.F.R. § 100.201.



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whether they specifically recommended this type of animal.

It is also recommended that the healthcare professional sign and date any documentation provided and provide contact information and any professional licensing information.



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Appendix to FHEO Handout on Assistance Animals

What are assistance animals?

Assistance animals do work, perform tasks, provide assistance, or provide emotional support for a person with a physical or mental impairment that substantially limits at least one major life activity or bodily function.⁵⁵

What are physical or mental impairments?

Physical or mental impairments include: any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive; digestive; genito-urinary; hemic and lymphatic; skin; and endocrine; or

Any mental or psychological disorder, such as intellectual disability, organic brain syndrome, emotional or mental illness, and specific learning disability; or

Diseases and conditions such as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, Human Immunodeficiency Virus infection, mental retardation, emotional illness, drug addiction (other than addiction caused by current, illegal use of a controlled substance), and alcoholism.⁵⁶

What are major life activities or major bodily functions?

They are: seeing, hearing, walking, breathing, performing manual tasks, caring for one's self, learning, speaking, and working.⁵⁷

Other impairments – based on specific facts in individual cases -- may also substantially limit at least one major life activity or bodily function.⁵⁸

⁵⁵ See 24 C.F.R. §§ 5.303; 960.705.

⁵⁶ See 24 C.F.R. § 100.201.

⁵⁷ See 24 C.F.R. § 100.201(b).

⁵⁸ See 24 C.F.R. § 100.201.



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What are Some Examples of Work, Tasks, Assistance, and Emotional Support?

Some examples of work and tasks that are commonly performed by service dogs include⁵⁹:

- Assisting individuals who are blind or have low vision with navigation and other tasks,
- Alerting individuals who are deaf or hard of hearing to the presence of people or sounds,
- Providing non-violent protection or rescue work,
- Pulling a wheelchair,
- Alerting a person with epilepsy to an upcoming seizure and assisting the individual during the seizure,
- Alerting individuals to the presence of allergens,
- Retrieving the telephone or summoning emergency assistance, or
- Providing physical support and assistance with balance and stability to individuals with mobility disabilities.

Some other examples of work, tasks, or other types of assistance provided by animals include:⁶⁰

- Helping persons with psychiatric and neurological disabilities by preventing or interrupting impulsive or destructive behaviors,
- Reminding a person with mental illness to take prescribed medication,
- Alerting a person with diabetes when blood sugar is high or low,
- Taking an action to calm a person with post-traumatic stress disorder (PTSD) during an anxiety attack,
- Assisting the person in dealing with disability-related stress or pain,
- Assisting a person with mental illness to leave the isolation of home or to interact with others,
- Enabling a person to deal with the symptoms or effects of major depression by providing a reason to live, or
- Providing emotional support that alleviates at least one identified symptom or effect of a physical or mental impairment.

What are examples of a patient's need for a unique animal or unique circumstances? ⁶¹

- The animal is individually trained to do work or perform tasks that cannot be performed by a dog.
- Information from a healthcare professional confirms that:
 - Allergies prevent the person from using a dog, or
 - Without the animal, the symptoms or effects of the person's disability will be significantly increased.
- The individual seeks a reasonable accommodation to a land use and zoning law, Homeowners Association (HOA) rule, or condominium or co-op rule.
- The individual seeks to keep the animal outdoors at a house with a fenced yard where the animal can be appropriately maintained.

⁵⁹ See 28 C.F.R. §§ 35.136(f); 36.302(c)(6).

⁶⁰ See, e.g., *Majors v. Housing Authority of the County of DeKalb Georgia*, 652 F.2d 454, 457 (5th Cir. 1981); *Janush*, 169 F.Supp.2d at 1136-37.⁶¹ See, e.g., *Anderson v. City of Blue Ash*, 798 F.3d 338, 360-63 (6th Cir. 2015) (seeking a reasonable accommodation to keep a miniature horse as an assistance animal)



This information is available in alternative format upon request



Attachment 9 – Assistance Animal Agreement

Address: _____

Resident Name: _____ Unit Number: _____

The Assistance Animal is excluded from the Pet Rules for this development. The Housing Authority’s Pet Policy does not apply. The following document relates to compliance with federal state or local law and/or safety concerns. It is not intended to modify your accommodation approval.

The following service/support animal has been approved in accordance with the Authority’s Reasonable Accommodation Policy:

<i>Name</i>	<i>Description (animal type breed color weight)</i>

This approval is for the above-named animal only and shall not automatically extend to another Assistance Animal until and unless prior written consent is obtained for such alternative Assistance Animal.

This section is voluntary and for your animal’s safety: Please provide the name, address, and telephone number, in the space provided below, of two animal caretakers who by signing this form you allow to assume responsibility for the animal should the resident become unable to care for the animal.

Animal Caretaker #1:

Name: _____

Address: _____

Telephone: _____

Signature: _____

Animal Caretaker #2:

Name: _____

Address: _____

Telephone: _____

Signature: _____

If you are unable to provide the name of an animal caretaker, you may also provide details of other arrangement which have been made for the proper care of the animal in your absence here:

_____.



Unless there is an exemption based upon other law or otherwise agreed upon the following conditions apply:

1. The animal must be in control and its handler must take effective action to control it. When in interior common areas, animals must be harnessed, leashed, or tethered, or placed in the appropriate transport container or cage for the animal unless these devices interfere with the service animal's work, purpose, or the individual's disability prevents using these devices. In that case, the individual must maintain control of the animal through voice, signal, or other effective controls.
2. The animal must be housebroken.
3. The animal must not pose a direct threat to the health or safety of others.
4. The animal must not cause substantial physical damage to the property of others.
5. The animal must not behave in such a manner so that a reasonable person would believe it poses an unjustified imminent threat of physical injury.
6. The animal must not excessively bark or make noise to such a level that a reasonable person would find such behavior disruptive to one's quiet and peaceful enjoyment and that it is breach of the lease.
7. The resident must ensure the clean up all pet waste and dispose of in a clean and sanitary manner.
8. The resident must abide by city, county, and state ordinances, laws, and/or regulations pertaining to licensing, vaccination, care and keeping and other requirements as applicable to assistance animals.
9. The resident may be required to pay for damages caused by the animal if they are a breach of the lease.
10. There may be other reasonable conditions or restrictions on an assistance animal depending on the nature and characteristics of the animal. Where applicable, other reasonable conditions are set forth in the reasonable accommodation approval notice attached hereto and incorporated herein by reference.

To the extent that any of the above conditions could be met with a reasonable accommodation, the resident may make such request to the Easton Housing Authority.

By signing below, the resident acknowledges receipt of this notice. In the event of a violation of the above the matter(s), the issue will be discussed with the resident and the resident will be provided with the opportunity to address the matter, unless a reasonable direct threat pursuant to the law exists.

Resident Signature

____/____/____
Date

EHA Signature

____/____/____
Date



This information is available in alternative format upon request



Attachment 10. Summary of Reasonable Accommodation/Modification in Housing Policy and Highlights of the Procedures for Making a Request for Reasonable Accommodation/Modification

The Easton Housing Authority does not discriminate on the basis of a disability and will provide a reasonable accommodation/modification where required under applicable law. A reasonable accommodation is a change that the Authority can make to its rules, policies, practices, or services, and a reasonable modification is a change the Authority can make to its facilities that will assist an otherwise eligible person with a disability to have equal opportunity to use and enjoy the housing or common or public use areas or to participate fully in the Authority's programs, activities, or services. Such changes may not be reasonable if they are not financially and administratively feasible for the housing authority or if they would pose a direct threat.

All applicants and residents will be provided notice of the right to request a reasonable accommodation and a request may be made at any time from application, residency, or participation to termination or eviction. Requests should be made to the reasonable accommodation coordinator. Specific forms may be used to assist but are not required to make a request for reasonable accommodation/modification. If the disability and /or reason for the accommodation/modification are not obvious or known, the Authority may request verification as to the disability and/or the need for the accommodation. The Authority will either request more information, request to meet with the individual, or approve or deny requests within 30 days of the provision of all required information. Individual's may request a Grievance Hearing for reasonable accommodation/modification denials.

The Authority has the following forms to assist with this process: Notice to All Applicants and Residents: Reasonable Accommodations and Modifications are Available for Applicants and Residents with Mental and/ or Physical Disabilities, Request for Reasonable Accommodations/ Reasonable Modifications, Request for Information or Verification, Verification of Disability by Physician or Other Professional for Reasonable Accommodation/Modification Request, Letter Denying Request for Reasonable Accommodation/Modification, Request for Meeting, and Letter Approving Request for Reasonable Accommodation/Modification. While forms may assist families, they are not mandated for use by the Housing Authority and the Authority will accept verification and requests in the format provided by the applicant or resident.

The Authority will utilize the information provided by the requestor to determine if he/she is a person with a disability under applicable law, if there is a nexus between the disability and the request for accommodation or modification, and if the request would result in an undue burden (in terms of costs or administration) on the part of the housing authority or if it fundamentally alters the role of the Authority, which is generally to provide low income housing. Last, where applicable, there will be a determination as to whether there is a direct threat in the provision of this accommodation/modification, or a legal exception applies.

The Easton Housing Authority Reasonable Accommodation Coordinator, may be reached by phone at (508) 238-4747 or by email at dawn@eastonhousing.com. All forms and notices are available upon request.



This information is available in alternative format upon request

