

Ambassador South Inc.
Application for a Service Animal

Date: _____

Unit: _____ Shareholders' name: _____

Name and description of animal: _____

Rules and Procedures	Owner Acknowledgement (initials)
1. A letter from a licensed mental health professional or medical doctor (on their letterhead) confirming a disability and the need to have a service animal.	
2. Proof of the animal's medical records and registration, including shots etc.	
3. HIPAA privacy authorization form attached.	
4. Proof of animal's training for service related to disability.	
5. It is highly recommended that shareholders have liability insurance included in their HO6 policy (as recommended by the state of Florida). I have liability insurance:	Yes / No
6. All authorized animals must be in the company and control (on a leash) of their owners while in the common area.	
7. A service animal is not allowed in the pool.	
8. The individual owner is responsible for removing the animal's excrement.	
9. Application for a service animal must be provided at least one month before the arrival of the animal. Any animal that arrives prior to Board approval must leave the Ambassador South premises immediately.	
10. All animals are subject to the associations noise and other nuisance restrictions.	
11. A shareholder is responsible for all damage his/her animal causes to the common area or the property of others.	
12. Failure to observe the rules and procedures as summarized here and stated in the House Rules and Regulations will result in service fees and/or fines and/or revocation of authorization.	
13. Authorization for a service animal can be withdrawn if the animal poses a health or safety threat.	

Please sign below that you agree to the above requirements of Ambassador South Inc. to allow the service animal on Ambassador South property and have met the legal requirements to qualify your animal as a service animal.

Shareholder Signature

Date

Approved or Denied

Board Member

Date