

**Chatillon Hall Condominium, Inc.**  
**Assistance (Service/Support) Animal**  
**Request for Reasonable Accommodation**

**Resident requests a reasonable accommodation to have an assistance animal in the unit and the common areas. This request is for:** \_\_\_\_\_ [Name of Resident or other Household Member with a Disability].

**Unit**      **Address:** \_\_\_\_\_ **Unit**      **#:**  
\_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:**  
\_\_\_\_\_

**Phone number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

Federal and State laws require that individuals with a disability or a disability-related need should be permitted to have a service or support animal on residential property.

Resident will be asked to provide reasonably supporting information in the event that the disability and/or the disability-related need for a support animal are not obvious, apparent, or otherwise known to the Association.

Assistance animals are exempt from no pet policies and policies that place limitations on the type, size, breed, and number of pets that are allowed. No pet deposit/additional security deposit or pet rent will be charged.

Resident will be responsible for any damage to the common areas caused by an assistance animal<sup>1</sup>.

Resident will be responsible for cleaning up after the assistance animal and promptly and properly disposing of all animal waste.

Resident shall maintain control of the assistance animal at all times. Resident must keep the assistance animal leashed or harnessed (or in a carrier) and under complete control of a responsible person at all times when outside the unit.

**Verification of Disability and/or Disability-Related Need.** If the individual requesting a reasonable accommodation has a disability and disability-related need for an accommodation that is not obvious or otherwise known, you must submit to the Association reasonably supporting information verifying that the person has a disability and that a support animal is related to, and needed because of, the disability. If Resident is asking for more than one service/companion animal, the verification should also state the number of necessary animals due to the disability.

**Vaccinations and Inoculations:** Please attach a document from a qualified Veterinarian indicating the Animal has met all vaccination and inoculation requirements in your area. The document should indicate types of vaccinations and inoculations received and dates.

The Association will notify Resident in writing within ten days of receiving all necessary information.

Resident Signature: \_\_\_\_\_ Date \_\_\_\_\_

<sup>1</sup> The 2022 Florida Statutes. CIVIL RIGHTS, DISCRIMINATION IN THE TREATMENT OF PERSONS; MINORITY REPRESENTATION. 760.27 Prohibited discrimination in housing provided to persons with a disability or disability-related need for an emotional support animal. (4) LIABILITY. A person with a disability or a disability-related need is liable for any damage done to the premises or to another person on the premises by his or her emotional support animal.