

**ASSISTANCE ANIMAL VERIFICATION FORM**

Name of Medical Professional: \_\_\_\_\_

PLEASE RETURN FORM TO:

Address: \_\_\_\_\_

SUBJECT: Verification of Information Supplied by an Applicant/Tenant for Housing Assistance

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

This person has applied for housing assistance under a program of the U.S. Department of Housing and Urban Development (HUD). HUD requires the housing owner to verify all information that is used in determining this person's eligibility or level of benefits.

We ask your cooperation in providing the following information and returning it to the person listed at the top of the page. Your prompt return of this information will help to ensure timely processing of the application for assistance. The applicant/tenant has consented to this release of information as shown below.

**Area to be completed by a Medical Professional**

The tenant/applicant listed above has requested the use of an assistance animal as a reasonable accommodation for a disability. In order to grant this accommodation the owner of the property will need to verify that there is a disability-related need for the requested accommodation. The following is a definition of an assistance animal as defined by the HUD 4350.3 Occupancy Manual that describes the occupancy requirements and procedures governing the HUD-subsidized multifamily housing programs. This definition should give you further guidance in verifying the need for an assistance animal.

As defined in the HUD 4350.3 Occupancy Manual, assistance animals are animals that work, provide assistance, or perform tasks for the benefit of a person with a disability, or animals that provide 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 guiding individuals who are blind or have low vision, alerting individuals who are deaf or hard of hearing to sounds, 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. 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.

Does the tenant/applicant require an assistance animal to work, provide assistance, or perform tasks for the benefit of a person with a disability, or an animal that provides emotional support that alleviates one or more identified symptoms or effects of a person's disability?  
\_\_\_\_\_ YES \_\_\_\_\_ NO

\_\_\_\_\_  
Name and Title of Person Supplying the Information Firm/Organization Name

\_\_\_\_\_  
Signature Date

RELEASE: I hereby authorize the release of the requested information. Information obtained under this consent is limited to information that is no older than 12 months. There are circumstances that would required the owner to verify information that is up to 5 years old, which would be authorized by me on a separate consent attached to a copy of this consent.

\_\_\_\_\_  
Signature Date

**NOTE TO APPLICANT/TENANT: You do not have to sign this form if either the requesting organization or the organization supplying the information is left blank.**

**PENALTIES FOR MISUSING THIS CONSENT:** Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains, or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208(a) (6), (7) and (8). Violations of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).

Please return the form to the address listed above. Thank You.

