



RESPONSE TO REQUEST FOR ASSISTANCE ANIMAL

USE OF THIS FORM BY PERSONS WHO ARE NOT MEMBERS OF THE TEXAS ASSOCIATION OF REALTORS®, INC. IS NOT AUTHORIZED.

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To: _____ (Applicant/Tenant)

From: _____ (Landlord)

Concerning the Property at _____

A. Landlord imposes the following conditions or restrictions on pets in the Property: *(Check all that apply.)*

☐ Landlord prohibits all pets in the Property.

☐ Landlord allows only the following pets in the Property: _____

☐ Landlord restricts the breed, size, and/or weight of pets in the Property. Describe the restriction: _____

☐ Landlord charges a pet deposit or fee.

☐ Other: _____

B. You have requested Landlord modify or provide an exception to the above restriction(s) for the assistance animal described below.

C. If either your disability or the disability-related need for the assistance animal is not readily apparent or known to Landlord, Landlord may request you submit reliable documentation of your disability or disability-related need for the assistance animal.

D. Landlord will evaluate your request in accordance with fair housing laws and will respond promptly.

This form was provided by:

Or signed for Landlord under written property management agreement or power of attorney.

Landlord _____ Date _____

By: _____ Date _____

Landlord _____ Date _____

Description of assistance animal

Applicant/Tenant: Please complete the following information, then sign and return to Landlord.

Name: _____

Type: _____ Breed: _____

Color: _____ Weight: _____ Age (in years): _____ Gender: _____

Neutered/Spayed: ☐ Yes ☐ No Declawed: ☐ Yes ☐ No

Rabies Shot Current: ☐ Yes ☐ No Bite History: ☐ Yes ☐ No

By signing below I acknowledge that I received, read, and understand this information.

Applicant/Tenant _____ Date _____