



Family Owned and Operated

REQUEST TO HEALTHCARE PROFESSIONAL

Your patient has requested reasonable accommodation for an assistance animal at their residence, which is currently being leased to them through our company. It is our policy to require documentation from our tenant's medical provider to confirm this accommodation request. We ask that you provide us with information on official letterhead which defines the following:

- Confirmation that your patient is currently under your care and that there is an ongoing therapeutic relationship.
- Confirmation that your patient has a disability* as defined by the Federal Fair Housing Act.
- Specific information about the type of assistance animal that is recommended.
- If the designated animal works, performs tasks, provides assistance, provides therapeutic emotional support with respect to the individual's disability, and or otherwise alleviates one or more identified symptoms or effects of the person's disability.

It is considered a Class A infraction of Indiana Law (IC 22-9-7) to provide inaccurate or false information concerning the disability status of an individual. Infractions are punishable up to \$10,000, for any person who misrepresents their need or makes materially false statements to a health service provider to obtain documentation. We will not accept documentation from an online service provider that charges a fee for providing written documents, yet provides no other services; or documentation from an out-of-state health services provider that does not have ongoing therapeutic relationship with the individual.

Your letter may be sent electronically to office@burnhamrentals.com or mailed to the address on this letterhead. Should you have any questions, please do not hesitate to contact us at 812.339.8300. Thank you for your assistance and prompt attention to this request.

Burnham Rentals Management

*For this purpose, a person with a disability is defined as a person with a physical or mental impairment that substantially limits one or more major life activities, a person who is regarded as having such an impairment, or a person with a record of such an impairment. Physical or mental impairments include, but are not limited to, such diseases or conditions as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, HIV, mental retardation, emotional illness, drug addiction (other than addiction caused by current, illegal use of a controlled substance) and alcoholism. The term "substantially limits" suggests that the limitation is significant or to a large degree. The term "major life activity" means those activities that are of central importance to daily life, including but not limited to seeing, hearing, walking, breathing, performing manual tasks, caring for one's self, learning, and speaking.

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