

## Cape Cod Village Club, Inc.

### Form to Request a Reasonable Accommodation

#### Background

The Federal Fair Housing Act (the “FHA”) and New York State and local fair housing laws require that Reasonable Accommodations be made for Members who are affected by disabilities. Cape Cod Village Club, Inc. (the “Association”) is committed to granting Reasonable Accommodations when necessary to afford Members the equal opportunity to use and enjoy their dwelling at the Association. Additional details related to CCVC’s Reasonable Accommodation Policy can be found [here](#) on the Cape Cod Village Club website.

A Member who is affected by a disability and believes that there is a need for a Reasonable Accommodation (RA) to use and enjoy their dwelling at the Association completes the attached form and returns it to the Association’s Reasonable Accommodation Coordinator. Please check all items and answer all questions. The Association will acknowledge this request within 10 days and once the form is considered complete will respond within 14 days of the acknowledgement. All information provided to the Association in connection with this request will be kept secure and confidential, except as otherwise required by law.

Requests for RA require the following documentation:

- Completed CCVC Form to Request a Reasonable Accommodation
- Written statement from a health care professional indicating that the person has a disability (*i.e.*, a physical or mental impairment that substantially limits one or more major life activities) **and** that the Reasonable Accommodation is necessary to use and enjoy the dwelling. The statement must include professional credentials such as License Number, Professional Specialty and Health Professional’s Contact Information.
- Picture and description of animal.
- Proof of Insurance verifying coverage for property damages and medical expenses related to a harbored support animal. The Member must secure and maintain such insurance as will provide adequate coverage related to claims for bodily injury, death or property damage that may arise from the animal. Required documentation includes the Declaration Page for the policy as well as correspondence from the insurance agency or agent indicating that they have been informed a support animal resides on the property and that the associated policy (citing Policy Number) includes coverage for damages to person or property associated with the animal.
- Dog License from Town of Hauge (if animal resides more than 30 days within the Town); if less than 30 days, License from the Requestor’s non-seasonal home is acceptable.
- Proof of current Rabies Vaccine.

The January 28, 2021 U.S. Department of Housing and Urban Development publication [\*FHEO-2020-01\*](#) entitled [\*Assessing a Person's Request to Have an Animal as a Reasonable Accommodation Under the Fair Housing Act\*](#) is a very useful reference. It is highly recommended the Member review this document prior to completing the CCVC Form. In particular, the publication includes the following guidance related to the written health statement:

- “Some websites sell certificates, registrations, and licensing documents for assistance animals to anyone who answers certain questions or participates in a short interview and pays a fee. Under the Fair Housing Act, a housing provider may request reliable documentation when an individual requesting a Reasonable Accommodation has a disability and disability-related need for an accommodation that are not obvious or otherwise known. In HUD’s experience, such documentation from the internet is not, by itself, sufficient to reliably establish that an individual has a non-observable disability or disability-related need for an assistance animal. By contrast, many legitimate, licensed health care professionals deliver services remotely, including over the internet. One reliable form of documentation is a note from a person’s health care professional that confirms a person’s disability and/or need for an animal when the provider has personal knowledge of the individual.”

The section entitled “Information Confirming Disability-Related Need for an Assistance Animal” includes the following:

- “Reasonably supporting information often consists of information from a licensed health care professional – e.g., physician, optometrist, psychiatrist, psychologist, physician’s assistant, nurse practitioner, or nurse – general to the condition but specific as to the individual with a disability and the assistance or therapeutic emotional support provided by the animal.”
- “A relationship or connection between the disability and the need for the assistance animal must be provided. This is particularly the case where the disability is non-observable, and/or the animal provides therapeutic emotional support.”
- “For non-observable disabilities and animals that provide therapeutic emotional support, a housing provider may ask for information that is consistent with that identified in the *Guidance on Documenting an Individual’s Need for Assistance Animals in Housing*<sup>1</sup> in order to conduct an individualized assessment of whether it must provide the accommodation under the Fair Housing Act. The lack of such documentation in many cases may be reasonable grounds for denying a requested accommodation.”

The [\*Fact Sheet\*](#)<sup>2</sup> which accompanied FHEO-2020-01 indicates “One reliable form of documentation is a note from a person’s health care professional that confirms a person’s disability affecting a major life activity and related need for an assistance animal for therapeutic purposes when the health care professional has personal knowledge of the individual. HUD has heard from housing providers, persons with disabilities, and other groups and individuals who are concerned about commercially available documentation from the internet. The guidance explains that, in HUD’s experience, documentation from websites that sell certificates, registrations, and licensing documents and animal gear for animals to anyone who answers certain questions or participates in a short interview and pays a fee **is not sufficient** to reliably establish that an individual has a non-observable disability or disability-related need for an assistance animal.”

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<sup>1</sup> Guidance on Documenting an Individual’s Need for Assistance Animals in Housing can be found starting at page 16 of the [\*FHEO 2020-01 Notice\*](#).

<sup>2</sup> [FACT SHEET ON HUD’S ASSISTANCE ANIMALS NOTICE](#)

## Form

If you require assistance in completing this form, please contact the Association's Reasonable Accommodation Coordinator to request help.

1. Do you require assistance in filling out this form?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If your answer is "Yes," and you do not have someone who can assist you, please contact the Association's Reasonable Accommodation Coordinator for assistance in filling out this form.

If your answer is "No," continue on to #2.

2. Today's Date: \_\_\_\_\_

3. Requesting Member info:

Name \_\_\_\_\_.

Home Address: \_\_\_\_\_.

CCVC Street Address: \_\_\_\_\_.

Telephone Number: \_\_\_\_\_.

4. Name of person with a disability for whom a Reasonable Accommodation is being requested. (If same as Member in #3, proceed to #5.)

Name \_\_\_\_\_.

Home Address: \_\_\_\_\_.

CCVC Street Address: \_\_\_\_\_.

Telephone Number: \_\_\_\_\_.

Relationship to Member: \_\_\_\_\_.

5. Indicate the Reasonable Accommodation(s) you are requesting (e.g. Would like a dog to accompany me in my residence at Cape Cod Village):

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6. Provide the details of the Reasonable Accommodation(s) you are requesting: (e.g. The dog will be confined to xx property and home per the restrictions defined by the Association.)

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7. Is the Reasonable Accommodation request necessary for an individual with a disability to use and enjoy a dwelling at the Association?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If the answer is “Yes”, respond to **both (a) and (b) below.**

(a) Provide a written statement from a health care professional who has personal knowledge of the situation indicating that the Member or person with a disability is under their care. The statement must indicate that there is a physical or mental impairment that substantially limits one or more major life activities **and** that a Reasonable Accommodation is necessary to use and enjoy the CCVC dwelling. The statement must include professional credentials such as License Number, Professional Specialty and Contact Information. <sup>3</sup>

(b) Explain below how the Reasonable Accommodation(s) would help reduce or alleviate the limitations of the disability:

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<sup>3</sup> Please carefully review the prior pages of this document in the “Background Section” for details about the professional statement requirements. Additional information or documentation relating to the Reasonable Accommodation request(s) may be attached. However, to make sure privacy is respected, please do not provide details such as diagnosis or other HIPAA protected data.

If the Reasonable Accommodation involves an animal, by signing below, you agree to the following conditions regarding the animal:

- It will be confined to the Member's property (i.e. within the property lines of the residence). It is not allowed on CCVC property including Common Areas such as the Green, Shed, Beach, Docks or Association Roads.
- To ensure the rights of other Members to enjoy peaceful possession of their dwelling:
  - When outside the requesting Member's dwelling, the animal will be leashed/controlled/restrained at all times and accompanied by an adult.
  - Aggressive behavior is not acceptable. CCVC Members, visitors, guests and employees/contractors should at no time feel threatened.
  - Noise such as barking must be kept to a minimum. To maintain the harmony of the Association, loud or repetitive noise will not be tolerated.
  - Waste must be confined to the Member's property, promptly removed and properly disposed. Disposing of animal waste in Association sewers, streams or the lake is prohibited.
- The Member is liable for damage to persons or property within Cape Cod Village associated with the animal.
- During the one year term of an approved RA request, as accompanying documentation expires, the Member is responsible to provide the RA Coordinator with up to date documentation such as:
  - Written Health Statement (see 7 above). The original supporting letter is valid for one year from the date written.
  - Homeowners Policy Declaration Page and Agent letter confirming resident animal
  - Dog License
  - Rabies Vaccination
- In the event any current documentation is not provided to the RA Coordinator prior to respective expiration date, RA approval is immediately rescinded for the duration of the one year term. Approval can be re-instated upon confirmed receipt of said documentation. For example, if an RA approval term is valid through Dec 31, but the Member's Homeowners Policy term expires a few months earlier in July 10, the Member must provide the current insurance documentation (both Declaration Page and confirmation of Dog Coverage) on or before July 10.
- Violation of any of the above conditions may result in immediate revocation of the Reasonable Accommodation and/or withdrawal of the Member's "good standing" status.

Although paper documentation can be provided, electronic submission to [ccvcacoordinator@gmail.com](mailto:ccvcacoordinator@gmail.com) is preferred.

I, \_\_\_\_\_, hereby agree to the conditions described in CCVC's  
CCVC Member Name  
Reasonable Accommodation Policy and Form.

\_\_\_\_\_  
CCVC Member Signature

\_\_\_\_\_  
Date

If a Member is making the request for a person with a disability, please also complete the following:  
I, \_\_\_\_\_, hereby agree to the conditions described in CCVC's  
Person with disability  
Reasonable Accommodation Policy and Form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

