

## ASSISTANCE ANIMAL POLICY

\_\_\_\_\_  
Property Name

Owner/Agent Name: \_\_\_\_\_

Resident Name(s): \_\_\_\_\_

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

Property Name: \_\_\_\_\_

This policy is part of the Lease Agreement between above listed Owner/Agent and Resident dated \_\_\_\_\_.

☐ Resident recognizes that Owner does not normally allow animals of any kind in the above-referenced premises due to the potential for damage and other possible adverse effects on the building and community.

☐ The Owner's Pet Policy and any associated fees or deposits will not be applied to the assistance animal described below.

The above notwithstanding, Owner and Resident agree as follows:

1. Resident has stated a need for an assistance animal (as below described). Resident has represented to Landlord that any medical verification provided is a true and correct statement by Resident's medical care provider. Resident further agrees to promptly notify Owner should the medical/mental need for the assistance animal terminate.
2. In consideration of the Resident's representations as set forth above, Resident shall be permitted to keep the following described animal(s) on the premises. No other or additional animal(s) shall be kept on the premises without prior written approval of Owner.

Name \_\_\_\_\_

Name \_\_\_\_\_

Breed \_\_\_\_\_

Breed \_\_\_\_\_

Age \_\_\_\_\_

Age \_\_\_\_\_

Sprayed/Neutered: ☐ Yes ☐ No

Sprayed/Neutered: ☐ Yes ☐ No

Photo Attached: ☐ Yes ☐ No

Photo Attached: ☐ Yes ☐ No

License Attached: ☐ Yes ☐ No

License Attached: ☐ Yes ☐ No

3. Upon vacating the premises, if there is any impact of the animal (odor, pests, etc.) the resident may be required to have the following procedures professionally performed at Resident's expense and shall provide Owner with proof of compliance in the form of receipts.


A. The rugs shall be professionally shampooed with a deodorizing treatment included in the procedure.

B. The premises shall be professionally treated for parasites common to household animals, including, but not limited to, fleas and ticks.

Notwithstanding the above, Owner may deduct such sums from the total amount on deposit as are necessary to restore the premises to their condition prior to commencement of the tenancy.

4. It is understood and agreed that all animal-soiled carpet and carpet that has the nap scratched off must be replaced. The management may not have spare pieces to replace patches of carpet and must rely on carpet supplier/installers. All apartment carpet must be restored to its original color and condition.
5. Resident acknowledges and agrees that all other terms of tenancy, including but not limited to noise rules, quiet hours, restrictions on public nuisances, etc. remain in full force and effect notwithstanding Owner's consent set forth herein.
6. Resident has represented to Owner as an inducement to entering into this Agreement that the aforementioned animal(s) have never been the subject of a complaint by any person alleging it/them to be dangerous or hazardous. Resident further understands that harboring a dangerous or hazardous animal is a violation of the terms of the Rental Agreement. Notwithstanding the terms of this Agreement, Owner may withdraw consent for the animal(s) residing on the Premises should Owner receive reasonably reliable information that the animal(s) are dangerous, hazardous, or unreasonably interfering with other residents' quiet enjoyment. Resident further agrees and acknowledges that failure to remove from the Premises a hazardous, dangerous, or animal which constitutes a violation of the rental agreement and can result in eviction for failure to comply.

### PAGE 2 OF THIS DOCUMENT IS THE SIGNATURE PAGE

Property Name: _____  504 Coordinator Name: Jessica Robertson Compliance Director	does not discriminate on the basis of disability status in the admission or access to, or treatment or employment in, its federally assisted programs and activities. The person named below has been designated to coordinate compliance with the nondiscrimination requirements contained in the Department of Housing and Urban Development's regulations implementing Section 504 (24 CFR, part 8 dated June 2, 1988). We do business in accordance with the Federal Fair Housing Act and provide persons with disabilities reasonable accommodation upon request. TTY# (for hearing impaired) 711. Persons with language barriers may request or arrange interpretation alternatives or services based on the property's LEP Policy.	
Address: P.O. Box 2253, Spokane, WA 99210-2253		Telephone #: (509) 358-4250

I have read, have had explained and understand, and furthermore received a copy of the ASSISTANT ANIMAL POLICY and agree to abide by these policies and guidelines. I understand management reserves the right to revise this policy.

Owner/Agent: _____	Signature: _____	Date: _____
Resident: _____	Signature: _____	Date: _____
Resident: _____	Signature: _____	Date: _____
Resident: _____	Signature: _____	Date: _____
Resident: _____	Signature: _____	Date: _____