

TIMBERVIEW PROPERTIES ASSISTANCE ANIMAL POLICY

Timberview Properties makes reasonable accommodations for applicants and residents with disabilities as required by the federal Fair Housing Act and the Texas Fair Housing Act. This policy applies to all Timberview Properties rentals. An **assistance animal** is (a) a **service animal**, meaning an animal individually trained to do work or perform tasks for a person with a disability, or (b) another animal that a person with a disability needs because of that disability, supported as described in Section 3. Emotional support animals are considered under Section 3.

1. How to Ask

You may ask at any time, before or after move-in, in writing or by speaking with us. Asking does not affect your rental application, and there is no charge to ask. Please complete one Assistance Animal Request Form **for each animal**. If you are unable to use the form, tell us and we will help.

2. Service Animals (Trained to Do Work or Perform Tasks)

If the disability and the work or task the animal performs are obvious, we will not ask questions. If they are not obvious, we will ask only two questions: (1) Is the animal required because of a disability? (2) What work or task has the animal been trained to perform? We do not require documentation, certification, or a demonstration of the task.

3. Other Assistance Animals, Including Emotional Support Animals

If the disability or the disability-related need for the animal is not obvious or already known to us, we may ask for **reliable documentation**: a letter or form, signed and dated within the last 12 months, from a health care professional who:

- holds a current license in good standing, and is authorized to provide care to you in the state where the care was provided (license type, number, and issuing state must be listed); and
- has personal knowledge of your disability-related need, gained through a professional relationship in which the professional actually evaluated or treated you (in person or through legitimate telehealth).

The documentation must state, **without a diagnosis**, that you have a physical or mental impairment that substantially limits one or more major life activities; identify the type of animal; and explain how the animal helps with your disability-related need. If you request more than one animal, the need for each animal must be supported.

Not reliable on their own: certificates, registrations, ID cards, vests, tags, or registry listings; letters sold online based only on a questionnaire or a one-time purchase, without a genuine professional evaluation; letters from a professional who is not licensed to provide care to you; and form letters that do not identify you and the animal.

4. Verification and Privacy

We may verify the professional's license with the state licensing board, contact the professional to confirm that he or she wrote the documentation and that it is accurate, and ask for clarification if the documentation is incomplete. **We will not ask for a diagnosis, medical records, or details about the nature or severity of your disability.** Information you give us is kept confidential and shared only with those who need it to process your request or as required by law.

5. Decision

We will respond in writing promptly, generally within 10 business days after we receive the information we need. If we deny a request, we will explain why and discuss any alternative accommodation. A request may be denied if a disability-related need is not shown; if the documentation is not reliable; if the specific animal poses a direct threat to the health or safety of others, or would cause substantial physical damage to the property of others, that cannot be reduced

or eliminated by another reasonable accommodation (based on the animal's actual conduct, not its breed, size, or stereotypes); or if the request would impose an undue financial and administrative burden or fundamentally alter our operations. **Knowingly false information or documentation is grounds for denial and is a violation of the lease.** Falsely representing an animal as a specially trained service animal may also be a criminal offense under Texas law (Tex. Hum. Res. Code § 121.006).

6. Rules for Approved Assistance Animals

Approved assistance animals are **exempt from animal fees, animal deposits, animal rent, and size, weight, breed, and species limits.** The resident must ensure the animal:

- is housebroken and is kept under control at all times (leash, harness, or carrier in common areas, unless the disability prevents their use);
- does not pose a direct threat to the health or safety of others or cause substantial damage;
- complies with state and local vaccination and registration laws; and
- has its waste promptly cleaned up and does not create a nuisance.

The resident remains responsible for any damage caused by the animal beyond normal wear and tear, under the lease and the general security deposit that applies to all residents. Approval covers only the specific animal approved; a new or replacement animal requires a new request. Approval may be withdrawn if the animal later poses a direct threat, causes substantial damage, or is not kept under control and the problem is not corrected.

Timberview Properties

Equal Housing Opportunity

**TIMBERVIEW PROPERTIES
ASSISTANCE ANIMAL REQUEST FORM**

(One form per animal. Do not include a diagnosis or medical records.)

Resident/applicant name: _____

Property address / unit or lot: _____

Phone: _____ Email: _____

Animal name: _____ Species: _____ Color/description: _____

Type of request (check one):

☐ Service animal trained to do work or perform tasks. Is the animal required because of a disability? ☐ Yes ☐ No. What work or task has the animal been trained to perform?

☐ Other assistance animal (including an emotional support animal). If the disability or disability-related need is not obvious, attach documentation meeting Section 3 of the Assistance Animal Policy.

Health care professional (if documentation is attached):

Name: _____ Phone: _____

License type: _____ License number: _____ Issuing state: _____

Authorization to verify: I authorize Timberview Properties to contact the professional named above only to confirm that he or she wrote the attached documentation, holds the stated license, and stands by its contents. This authorization does not permit release of my diagnosis or medical records.

I certify that the information on this form and any attached documentation is true and complete. I understand that knowingly false information is grounds for denial and is a violation of the lease.

Signature: _____ Date: _____

Office use: Received _____ Decision: ☐ Approved ☐ Denied ☐ More information requested Date _____ By _____