



### 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.

©Texas Association of REALTORS®, Inc. 2018

To: \_\_\_\_\_ (Applicant/Tenant)  
From: **William Wolfe, Candance Wolf** \_\_\_\_\_ (Landlord)  
Concerning the Property at **3729 Whisper Walk, Montgomery, TX 77356**

- 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: **no aggressive breeds.**
  - Landlord charges a pet deposit or fee.
  - Other: **case by case basis**
- 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.

 \_\_\_\_\_ July 28, 2023  
Landlord **William Wolfe, Candance Wolf** \_\_\_\_\_ Date

By: \_\_\_\_\_ Date

 \_\_\_\_\_ July 28, 2023  
Landlord **Candace Wolfe** \_\_\_\_\_ Date

Description of assistance animal					
<i>Applicant/Tenant: Please complete the following information, then sign and return to Landlord.</i>					
Name: _____					
Type: _____		Breed: _____			
Color: _____		Weight: _____		Age (in years): _____	
Neutered/Spayed: <input type="checkbox"/> Yes <input type="checkbox"/> No		Declawed: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Rabies Shot Current: <input type="checkbox"/> Yes <input type="checkbox"/> No		Bite History: <input type="checkbox"/> Yes <input type="checkbox"/> No			

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

\_\_\_\_\_  
Applicant/Tenant Date