

Procedure for Requesting an Accommodation Animal as an Exception to the Residential Pet Policy

Residential and Student Service Programs, University of California, Berkeley

For the purpose of this policy, the term “accommodation animal” refers to “service animals,” “emotional support animal”, “assistive animals” and “necessary assistance animals” as defined by the Americans with Disabilities Act, Fair Housing Act, and other applicable laws.

In reviewing requests for accommodation animals, Residential and Student Service Programs (RSSP) consults as necessary with a wide variety of appropriate experts.

Any resident wanting an accommodation animal to live in the residence must prepare a written Request for Exception, which typically includes:

- 1) A Typed Cover Letter with an explanation of the disability-related need for the animal, the types of tasks, if any; the animal is trained to perform, as well as a description of the animal, including type and the animal’s name.
- 2) The Accommodation Request Form (attached to this document)
- 3) A Letter from a Treating Medical Professional
- 4) A Signed Copy of the “Guidelines for Maintaining an Animal” (attached to this document)

A Request for an Exception to the Pet Policy (Request for Disability-Related Accommodation Animal) should be submitted along with the application for residential living (Residence Halls, Single Student Apartments, Family, Faculty and Staff Housing). With the exception of a trained service dog, the animal should not be in residence unless/until the Request is approved. The approval of a Request is animal-specific and is not transferable to another or different animal.

If the animal is a **trained service dog** trained to perform service tasks, then the resident’s Request for Exception must answer two questions:

1. Is this a service animal that is required because of a disability? and
2. What work or tasks has the animal been trained to perform? If the resident’s disability is not readily apparent, RSSP requires appropriate medical documentation verifying the resident’s disability.

If the animal is not a dog, or the animal (even if a dog) is not trained to perform service tasks but is an emotional support animal, then the resident may request a reasonable accommodation in the form of an **assistive animal**. In this case, the resident’s Request for Exception must answer these two questions:

1. Does the resident (asking to use and live with the animal) have a disability — *i.e.*, a physical or mental impairment that substantially limits one or more major life activities?
2. Does the resident making the request have a disability-related need for an assistance animal?

When the disability and/or disability-related need for the animal are **not readily apparent**, the

resident's Request for Exception must include a letter from a treating physician, or licensed mental health professional (specialist), documenting the disability and/or disability-related need for the animal. In other words, when the disability and/or disability-related need for the assistive animal are not readily apparent, RSSP requires a letter from the treating physician or licensed mental health professional (specialist), outlining:

1. Verification of the disability the animal is supporting
2. How the animal serves as an accommodation for the verified disability
3. How the need for the animal relates to the ability of the resident or live-in family member to use and enjoy the living arrangements provided by the University.

Requests for an assistive animal as a disability-related accommodation may be denied if granting the request would constitute an undue financial or administrative burden, or would fundamentally alter the nature of RSSP. In addition, animal accommodation requests may be denied if:

1. the specific assistance animal in question poses a **direct threat** to the health or safety of others that cannot be reduced or eliminated by another reasonable accommodation, or
2. the specific assistance animal in question would cause **substantial physical damage** to the property of others that cannot be reduced or eliminated by another reasonable accommodation. Breed, size, and weight limitations are not applicable to an assistance animal.

All documentation must be submitted to:

Katelyn Sadler
Accommodations Housing Coordinator (AHC)
2610 Channing Way, 2nd Floor
Berkeley, CA 94720
Fax: 510-643-7126
Email: katelynsadler@berkeley.edu.

1. The AHC will review the Request for completeness and work with the resident to obtain any necessary additional materials.
2. The AHC will notify resident by email of RSSP's decision to accept or decline the request for an exception to the Residential Pet Policy in the form of permission to have an Accommodation Animal in the residence.
3. If the request is accepted, the AHC will work with the appropriate staff to:
 - a. Coordinate with the resident and RSSP staff, to determine a suitable location for the resident and animal to reside
 - b. Request that the resident review the Guidelines for Maintaining the community standards while the animal is in residence (included in this packet)
 - c. Request supplemental documentation, including veterinary records and the animal registration form (included in this packet)
4. If the request is declined, if requested the AHC will work with the resident to set appropriate timelines for the resident to find alternative housing arrangements where

an Accommodation Animal is permitted.

5. The decision of the AHC may be appealed, in writing, within five business days of the date on the decision email. Written appeals must be submitted to:

The Director of Residential Education
Residential and Housing Services
2610 Channing Way, 4th Floor
Berkeley, CA 94720

Appeals must state a specific reason for reconsideration. Appeals may only be based on:

- a) New information, that was not available at the time of the initial review, to support the animal as an accommodation, or
- b) A procedural error that occurred which unfairly affected the decision in the request.

If the Request for an Exception to the Pet Policy is granted, the resident must enter into the following agreements (to be maintained with the housing contract) and complete the following additional information regarding the animal:

1. Accommodation Animal Registration Form with a Photo of the Animal
2. Roommate/ Suitemate Agreement (if applicable)
3. Up-to-date veterinary record certifying that the animal has all recommended vaccinations to maintain the animal's health and prevent contagious diseases.

Guidelines for Maintaining an Accommodation Animal within the Residential Community

Introduction

The following guidelines apply to all approved disability-related accommodation animals and their residents who live in the residential community, unless the nature of the disability of the resident precludes adherence to these guidelines, and permission for a variance from the guidelines has been granted.

Animal Behavior

1. An Exception to the Residential Pet Policy is granted for accommodation animals provided that their behavior, noise, odor and waste do not exceed reasonable standards and that these factors do not create unreasonable disruptions for residents (registered students and resident family members) and RSSP staff.
2. Dangerous, poisonous, and/or illegal animals are not permitted.
3. The approved accommodation animal must be contained within the private residential area (room, suite, apartment, enclosed balcony or yard spaces) at all times, except when transported outside the private residential area in an animal carrier or controlled by leash or harness (if a leash interferes with a service dog's ability to perform essential tasks, a request for an exception to the leash requirement should be requested in advance).

Animal Health and Well-Being

1. Accommodation animals must have all veterinarian-recommended vaccinations to maintain the animal's health and prevent contagious diseases. Documentation of vaccinations is due at time Request for Exception is granted. The University reserves the right to make reasonable requests for updated vaccination verification during the animal's residency.
2. All accommodation animals, if taken outside the home, must wear identification tags with home address and, if applicable, vaccination information.

Animal Cleanliness

Residents are responsible for properly containing and disposing of all animal waste, including but not limited to:

1. Indoor animal waste, such as cat litter, must be placed in a sturdy plastic bag and tied securely before being disposed of in outside trash dumpsters. Litter boxes should be placed on mats so that feces and urine are not tracked onto carpeted surfaces.

2. Outdoor service animal waste, such as dog feces, must be immediately retrieved by resident, placed in a plastic bag and securely tied before being disposed of in outside trash dumpsters.
3. With respect to common areas, RSSP reserves the right to designate specific sites indoors/outdoors for animal elimination of waste and to prohibit (even if there is immediate clean up afterwards) animal waste in any other common area.

Resident Responsibilities

1. The resident must register their accommodation animal with Cal Housing through completing and signing the Animal Registration Form, providing all necessary documentation and meeting with Residential Living staff.
2. The resident is responsible for assuring that the accommodation animal does not interfere with the routine activities of the residents or cause unreasonable difficulties for students and/or other residents who reside there. Residential community living requires respect for the needs of residents with allergies and those who may fear animals.
3. The resident is financially responsible for all consequences caused by the actions of the accommodation animal, including bodily injury or property damage which may necessitate replacement or repair of damaged furniture, carpet, drapes, or wall covering, etc. If an accommodation animal causes substantial physical damage to the property of others that cannot be reduced or eliminated by reasonable accommodation, the animal may be excluded from living in the residence.
4. The University shall have the right to bill the Campus Accounts Receivable System (CARS) account of the resident for unmet obligations arising for damage caused by an accommodation animal. In the event that the resident is a non-student (Post-Doc, Visiting Scholar, etc), the resident will be charged through Berkeley Financial Systems (BFS).
5. The resident's place of residence may be inspected for fleas, ticks or other pests once per semester or as needed. The Housing Operations Maintenance and Environment (HOME) department will schedule the inspection. If fleas, ticks or other pests are detected through inspection, the residence will be treated using approved fumigation methods by a university-approved pest control service.
6. The resident must notify Cal Housing in writing if the accommodation animal is no longer needed as an accommodation or is no longer in residence.
7. Even if the resident previously obtained permission for an accommodation animal, the resident must file a new Request for Exception if s/he wishes to bring in a new/different accommodation animal in substitution of the previous accommodation animal.
8. Cal Housing has the ability to relocate resident and accommodation animal as necessary provided the new site is consistent with the terms of the current contractual agreement.
9. (For students in the Residence Halls and/or Single Student Apartments) All roommates or suitemates of the resident must sign an agreement allowing the accommodation animal to be in residence with them. In the event that one or more roommates or suitemates do not approve, either the resident and pet or the non-approving

roommates or suitemates, as determined by the Resident Director and/or Resident Assistant, may be moved to a more suitable location.

10. Resident agrees to continue to abide by all other residential policies. An exception to a policy that otherwise prohibits having an animal does not constitute an exception to any other policy.
11. Any violation of the above rules will be reviewed through the Residential Judicial Process and the resident will be afforded all rights of due process and appeal as outlined in that process.

By my signature below, I verify that I have read, understand and will abide by the Guidelines outlined here and I agree to provide the additional information required to complete my Request for an Exception to the Pet Policy.

Resident Signature

Date

Housing Coordinator

Date

Accommodation Animal Registration Form

Resident's Name(s): _____

Resident's Address: _____

Student ID #: _____ Phone: _____

Animal's Name: _____

Physical Description of Animal:

Alternate Caregiver for Animal If Resident is Unavailable

Name: _____

Address: _____

Phone Number: _____

Please attach:

- 1) An up-to-date photo of your animal, for staff to use in the case the animal gets loose on the premises
- 2) The Veterinarian's Verification that the animal has all Veterinary-recommended vaccinations to maintain the animal's health and prevent contagious disease.

Roommate/Suitemate Agreement

(Only Applicable to Residences in Residence Halls and/or Single Student Apartments)

By my signature below, I agree to share the common areas of my assigned residential space with the accommodation animal approved by this agreement. Should I have any concerns regarding the care and control of the approved accommodation animal, I will discuss my concerns with the accommodation animal's owner and then with my Resident Assistant (or Apartment Assistant) and/or Resident Director if the accommodation animal owner and I cannot come to an agreement.

Resident's Name

Date

housing accommodations request form

Students with disabilities and other identity related requests must fill out this form to receive reasonable accommodations and/or customized housing environments while living in a UC Berkeley residence.

Instructions: Complete and sign Section One. If you are requesting accommodations due to a disability or medical condition, please give Section Two to your medical or mental health professional. They must provide a letter stating their recommendations for housing accommodations.

Materials provided will be reviewed by the Accommodations Coordinator to determine a reasonable accommodation.

Submit form and supporting documents to:
Katelyn Sadler, Housing Coordinator, Cal Housing, UCB
2610 Channing Way #2272
Berkeley, CA 94720-2272
katelynsadler@berkeley.edu

Incomplete requests will be returned, which will delay processing. Facilities staff need to be notified of any accommodation requests that require modifications to the student's bedroom at least eight weeks prior to move in.

Please note: Filling out this form does not register you for the Disabled Students' Program (DSP), which provides academic accommodations. Once admitted to the University, students seeking academic accommodations are strongly encouraged to register as early as possible with the DSP office. Visit DSP online at dsp.berkeley.edu for more information.

Section One — Student Housing Accommodations Request

(To be completed by the Student. You may attach additional sheets, if necessary)

Student Name: _____ SID: _____

Email : _____ Cell Phone: _____

Please indicate the accommodations you are requesting: _____

Please explain the reason(s) for your request: _____

For Students Requesting an Accommodation for a Disability or Medical Condition Only:

I am registered or intend to register with the Disabled Student's Program (DSP): YES NO

Optional: If you are requesting a single room as an accommodation for your disability or medically related condition, please describe the specific ways that sharing a room with another person does not address the functional limitations of your disability.

Optional (to support the University in maintaining the safety of residents): Is there any aspect of your disability/medical condition that may, under certain conditions, pose a threat to the safety or health of yourself or other residents? If so, please describe.

Optional: If additional medical information is needed from your physician or specialist, do we have permission to contact them directly? YES NO

Student Signature: _____ Date: _____

Physician Name: _____ Physician Phone: _____

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**Section 2:
Medical Professional Instructions**

Dear Medical or Mental Health Professional:

This student is asking the University of California, Berkeley for accommodations while living in university housing. By providing a full and complete response, you will help to expedite the processing of this student's accommodation request, and reduce the need to return to you for additional information.

Please submit this completed form accompanied by a letter on official letterhead from your office.

Handwritten notes and/or notes written on prescription pads will not be reviewed and labeled incomplete. Incomplete requests will be returned and processing will be delayed.

Please include the following in your letter:

- 1) Describe your specialty, and how long the student has been in your care
- 2) Verify that the student has a qualifying disability that impacts a major life activity, and share how the disability may impact the student while in university housing
- 3) Fill out the accommodation checklist on this form, selecting the accommodations you believe the student needs. In the letter explain in detail how each accommodation you have recommended will address the functional limitations of the student's disability
- 4) Your signature and licensure information

Submit the letter and this form via fax, email, or postage to:

Cal Housing
Attention: Katelyn Sadler
University of California, Berkeley
2610 Channing Way #2272
Berkeley, CA 94720-2272
Fax: (510) 642-4026
Email: katelynsadler@berkeley.edu

This information will be kept private and will be used only for providing ADA accommodations

Accommodation Checklist:
(to be completed by medical or mental health professional)

Below are some of the accommodations offered. Please select those you believe this student needs. Please explain how each accommodation addresses the functional limitations of the student's disability in your letter.

Student Name: _____

Licensed Professional Name: _____

Licensed Professional Signature: _____

Select	Recommended Accommodation(s)
	Automatic Door Opener, Needed for:
<input type="checkbox"/>	____ Personal Room Door ____ Suite Door ____ Bathroom Door
<input type="checkbox"/>	ADA Compliant Bathroom- Roll in Shower
<input type="checkbox"/>	ADA Compliant Bathroom- Shower Bench
<input type="checkbox"/>	Semi-private bathroom
<input type="checkbox"/>	Modified window openers
<input type="checkbox"/>	Lower closet shelves & peephole
<input type="checkbox"/>	Height Adjustable Desk
<input type="checkbox"/>	Strobe light smoke detector or fire alarm
<input type="checkbox"/>	Visual Doorbell
<input type="checkbox"/>	Ability to rent more than 1 MicroChill refrigerator
<input type="checkbox"/>	Access to a kitchen
<input type="checkbox"/>	Room with additional space for medical equipment
<input type="checkbox"/>	Private Room
<input type="checkbox"/>	Room with fewer roommates
<input type="checkbox"/>	Placement with a requested roommate
<input type="checkbox"/>	Ground floor room or room on a lower floor
<input type="checkbox"/>	Location close to Tang Medical Center
<input type="checkbox"/>	Location close to campus
<input type="checkbox"/>	Room removed from traffic noise & other exterior distractions
<input type="checkbox"/>	Room with less allergens
<input type="checkbox"/>	Room without carpet (limited- only for severe respiratory concerns)
<input type="checkbox"/>	Bring their own mattress (remove uni mattress/ other furniture)
<input type="checkbox"/>	Replace XL Twin Mattress (80") with XXL Twin Mattress (84")
<input type="checkbox"/>	Service or Emotional Support Animal
<input type="checkbox"/>	Substance Free Environment
<input type="checkbox"/>	Other