

GLENWOOD REASONABLE ACCOMMODATION POLICY

Glenwood Management (“Glenwood”) is committed to granting reasonable accommodations to its rules, policies, practices, or services when such accommodations may be necessary to afford people with disabilities the equal opportunity to use and enjoy their dwellings, as required by federal, state and local law. A reasonable accommodation may include a change or exception to a rule or policy that is needed because of a person’s disability, or it may be a physical change to a unit or common area. It is Glenwood’s general policy to provide reasonable accommodations to individuals with disabilities whenever an individual has a disability and there is a disability-related need for the requested accommodation. A disability-related need for a requested accommodation exists when there is an identifiable relationship, or nexus, between the requested accommodation and the individual’s disability. Please note, that verification of a disability is not required where the disability is obvious or otherwise known. A disability will be evaluated using the New York State Human Rights law definition.

Glenwood accepts reasonable accommodation requests from persons with disabilities and those acting on their behalf. Reasonable Accommodation Request forms are available in the management and renting offices, and may be returned to those locations when complete. They will then be forwarded to Polina Iline, Assistant Vice President – Leasing. If you require assistance in completing the form, or wish to make the request orally, please contact Ms. Iline at 718-343-6400. Glenwood will keep a record of all requests.

We will make a decision on your request within 10 days following the receipt of all required documentation. If the request is of a time-sensitive nature, please let us know and we will make best efforts to expedite the decision-making process. In the event we need additional information to make a determination, we will promptly advise you of the information needed. It is Glenwood’s policy to seek only the information needed to determine if a reasonable accommodation should be granted under federal, state or local law. We will not ask about the nature or extent of your disabilities. Please note that verification of a disability may be provided by any qualified third party. If we grant the request, you will receive a letter so indicating.

If we deny the request, we will provide you with a letter stating all of the reasons for our denial. If an individual with a disability believes that the request has been denied unlawfully or a response has been unreasonably delayed, then he or she may file a complaint by writing or calling any of the following:

U.S. Department of Housing and Urban Development Office of Fair Housing and Equal Opportunity 26 Federal Plaza, Room 3532 New York, NY 10278-0068 1-800-496-4294 http://hud.gov/complaints	New York State Division of Human Rights One Fordham Plaza, 4th Floor Bronx, NY 10458 Tel No. (718) 741-8400 TDD: 1-718-741-8300 http://www.dhr.state.ny.us/	New York City Commission on Human Rights 100 Gold Street, Suite 4600 New York, NY 10038 (718) 722-3131 http://www.nyc.gov/cchr
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ASSISTANCE ANIMALS

One type of reasonable accommodation is allowing a person with a disability to keep an assistance animal. An assistance animal is any animal that works, provides assistance, or performs tasks for the benefit of a person with a disability, or provides emotional support that alleviates one or more identified symptoms or effects of a person's disability. Glenwood is committed to ensuring that individuals with disabilities may keep such animals to the extent required by federal, state and local law.

An animal that is trained to do work or perform tasks for an individual with a disability is known as a service animal. If a person's disability is obvious, or otherwise known to Glenwood, and if the need for the requested animal is obvious or otherwise known, such as a dog that guides an individual with a visual impairment, Glenwood will not inquire about the individual's disability or the animal's training. Otherwise, Glenwood may require that the resident provide:

- i. A statement from any qualified third party¹ indicating that the person has a disability, and/or
- ii. Information that the animal has been individually trained to do work or perform tasks that would ameliorate one or more symptoms or effects of the disability, or information that the animal, despite lack of individual training, is able to do work or perform tasks that would ameliorate one or more symptoms or effects of the disability.

In the case of a resident who requests a reasonable accommodation for an assistance animal that provides emotional support or other assistance that ameliorates one or more symptoms or effects of the resident's disability, Glenwood may require a statement from any qualified third party indicating:

- i. That the applicant has a disability, and
- ii. That the animal would provide emotional support or other assistance that would ameliorate one or more of the identified symptoms or effects of the disability.

If an assistance animal both provides emotional support or other assistance that ameliorates one or more effects of a disability and does work or performs tasks for the benefit of a person with a disability, Glenwood may require compliance with either of the two preceding paragraphs, but not both.

¹ "Qualified third party" means a person who provides medical care, therapy or counseling to persons with disabilities, including, but not limited to, doctors, physician assistants, psychiatrists, psychologists, or social workers.

Glenwood may deny a request or require the removal of a particular assistance or service animal from the premises if the animal poses a direct threat (i.e., a significant risk of substantial harm) to the health or safety of other individuals that cannot be eliminated or reduced to an acceptable level by another reasonable accommodation, considering the health and safety of the other individual(s) and the need for an accommodation, or if the animal would cause substantial physical damage to the property of others that cannot be reduced or eliminated by another reasonable accommodation. Glenwood will base such determinations upon consideration of the behavior of the particular animal at issue, and not on speculation or fear about the types of harm or damage an animal may cause.

FORM A: APPLICATION FOR REASONABLE ACCOMMODATION
(OTHER THAN FOR AN ASSISTANCE ANIMAL)

**To request permission to have an assistance animal as a reasonable accommodation,
use Form B: Application for Reasonable Accommodation – Assistance Animal**

PLEASE COMPLETE THIS FORM IF YOU HAVE A DISABILITY AND WOULD LIKE TO REQUEST AN ACCOMMODATION. IF YOU REQUIRE ASSISTANCE COMPLETING THIS FORM, OR WISH TO MAKE THE REQUEST ORALLY, PLEASE CONTACT POLINA ILINE AT 718-343-6400.

TENANT NAME: _____

ADDRESS: _____ **TELEPHONE#:** _____

PERSON REQUESTING ACCOMMODATION: _____
(IF DIFFERENT FROM TENANT)

RELATIONSHIP TO TENANT: _____

1. Please describe the reasonable accommodation you are requesting:

2. Please explain why this reasonable accommodation is needed. You need not provide detailed information about the nature or severity of the disability.

Signature: _____ **Date:** _____

**FORM B: APPLICATION FOR REASONABLE ACCOMMODATION –
ASSISTANCE ANIMAL**

PLEASE COMPLETE THIS FORM IF YOU HAVE A DISABILITY-RELATED NEED FOR AN ASSISTANCE ANIMAL AND WOULD LIKE TO REQUEST AN ACCOMMODATION. IF YOU REQUIRE ASSISTANCE COMPLETING THIS FORM, OR WISH TO MAKE THE REQUEST ORALLY, PLEASE CONTACT POLINA ILINE AT 718-343-6400.

TENANT NAME: _____

ADDRESS: _____ **TELEPHONE#:** _____

PERSON REQUESTING ACCOMMODATION: _____
(IF DIFFERENT FROM TENANT)

RELATIONSHIP TO TENANT: _____

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- 1. Please explain why you are requesting permission to have an assistance animal. You need not provide detailed information about the nature or severity of the disability.**

- 2. Please complete the following:**

- a. Does the animal for which you are making a reasonable accommodation request perform work or do tasks for you because of your disability?**

Yes No (If “No,” continue to item b)

If the answer is yes:

- i. If your disability is obvious and the work or task the animal does is obvious, such as a dog guiding an individual who is blind or has low vision, or a dog pulling a wheelchair of an individual with a mobility impairment, then no further inquiry will be made.**
- ii. If your disability is not obvious, provide a statement from a qualified third party indicating that you have a disability (i.e. you have a physical or mental impairment that substantially limits one or more major life activities); and**

- iii. **If the work or task the animal performs is not obvious, explain below how the animal has been trained to do work or perform tasks that alleviate one or more symptoms or effects of your disability or, if the animal lacks individual training, how the animal is able to do work or perform tasks that would alleviate one or more symptoms or effects of your disability:**

You may provide any additional information or documentation of the training or work you describe above and attach it to this application.

- b. **If the animal for which you are making a reasonable accommodation request does not perform work or do tasks for you because of your disability, but provides emotional support or alleviates one or more symptoms or effects of your disability, please submit a statement from a qualified third party stating that (a) you have a disability (i.e. you have a physical or mental impairment that substantially limits one or more major life activities); and (b) the animal would provide emotional support or other assistance that would alleviate one or more identified symptoms or effects of your disability and how the animal alleviates the symptoms or effects. Please attach such a statement to this application.**
- c. **If the assistance animal is a dog or a cat, please provide copies of the rabies tag or certificate that is required by New York law. If you have not selected an animal at the time you complete this application, Glenwood may approve the application with the condition that, if you select a dog or a cat, you must submit copies of the rabies tag or certificate that is required by New York law, before the selected animal moves in.**

- 3. **If you are requesting a different modification or accommodation, please describe it here:**

Signature: _____

Date: _____

GLENWOOD GUIDELINES REGARDING ASSISTANCE ANIMALS

- A. Glenwood Management (“Glenwood”) will consider reasonable accommodation requests consistent with the enclosed policy regarding disabilities that meet the definition set forth in any one of the following relevant statutes:
- a. Federal: The Fair Housing Act defines a person with a “handicap” as one who: (a) has a physical or mental impairment which substantially limits one or more of such person’s major life activities; or (b) has a record of having such an impairment; or (c) is regarded as having such an impairment, but such term does not include current, illegal use of or addiction to a controlled substance (as defined in Section 102 of the Controlled Substances Act (21 U.S.C. § 802)).
 - b. State: The New York State Executive Law defines a disability as: (a) a physical, mental or medical impairment resulting from anatomical, physiological, genetic or neurological conditions which prevents the exercise of a normal bodily function or is demonstrable by medically accepted clinical or laboratory diagnostic techniques or (b) a record of such an impairment or (c) a condition regarded by others as such an impairment.
 - c. NYC: The New York City Administrative Code defines a disability as: (a) any physical, medical, mental or psychological impairment, or a history or record of such impairment. (b) The term “physical, medical, mental, or psychological impairment” means: (1) an impairment of any system of the body; including, but not limited to: the neurological system; the musculoskeletal system; the special sense organs and respiratory organs, including, but not limited to, speech organs; the cardiovascular system; the reproductive system; the digestive and genito-urinary systems; the hemic and lymphatic systems; the immunological systems; the skin; and the endocrine system; or (2) a mental or psychological impairment.
- B. Glenwood will review and respond within 10 days of receipt of all required documentation to all reasonable accommodation requests.
- C. All information received by Glenwood regarding an individual’s disability, including physical, mental, psychological, and/or psychiatric conditions, shall be kept confidential unless the individual authorizes the release of the information or Glenwood is required to produce the information in response to a Court order, on notice to the affected individual(s).
- D. If the resident has a disability and a disability-related need for a reasonable accommodation under federal, state or local law, Glenwood will grant such

accommodation, including a request to keep a service or assistance animal, as required by law and the Glenwood Reasonable Accommodation Policy. Glenwood will not retaliate against any person because that individual has requested or received a reasonable accommodation. Glenwood will not discourage any individual from making a reasonable accommodation request, including a request to keep a service or assistance animal. While some Glenwood buildings have a no-pets policy, and other Glenwood buildings allow a dog as a pet if the dog is below a specified weight limit, service and assistance animals are not pets. However, a resident must request an exception to Glenwood's policy in order to keep an assistance animal.

- E. Glenwood may deny a request or require the removal of a particular assistance or service animal from the premises if the animal poses a direct threat (i.e., a significant risk of substantial harm) to the health or safety of other individuals that cannot be eliminated or reduced to an acceptable level by another reasonable accommodation, considering the health and safety of the other individual(s) and the need for an accommodation, or if the animal would cause substantial physical damage to the property of others that cannot be reduced or eliminated by another reasonable accommodation. Glenwood will base such determinations upon consideration of the behavior of the particular animal at issue, and not on speculation or fear about the types of harm or damage an animal may cause.
- F. Like any other tenant, owners of service or assistance animals remain subject to the provisions of their leases, with the exception that they are allowed to occupy the premises with their service or assistance animals. Similarly, owners of service or assistance animals shall comply with all state and local animal laws, except when such laws are preempted by the Fair Housing Act, Section 504 of the Rehabilitation Act, or the Americans with Disabilities Act or the owner is entitled to a reasonable accommodation.

FORM C – Assistance Animal Requests: Qualified Third Party Form

**TENANT
NAME:** _____

ADDRESS: _____

TELEPHONE #: _____

I, _____ (applicant name) intend to request that Glenwood permit me to keep an assistance animal as a reasonable accommodation for my disability. In connection with that application, I am requesting that you complete this form regarding my disability.

Applicant Signature **Date**

NAME OF APPLICANT: _____

RELATIONSHIP TO TENANT: _____

TO BE COMPLETED BY ANY QUALIFIED THIRD PARTY²

NAME: _____

ADDRESS: _____

TELEPHONE #: _____

1. **Does the individual identified above have a disability?**

2. **Does or would an assistance animal provide disability-related assistance to the individual? One example of assistance is alleviating one or more of the symptoms or effects of the disability.**

² “Qualified Third Party” means a person who provides medical care, therapy or counseling to persons with disabilities, including, but not limited to, doctors, physician assistants, psychiatrists, psychologists, or social workers.

3. **For animals that do not perform work or do tasks for the individual, how would the animal ameliorate one or more of the symptoms or effects of the disability?**

4. **If you would like to submit additional supporting materials, please provide them with this form.**

NAME: _____

SIGNATURE: _____

TITLE: _____

DATE: _____