**Sample Physician Letter**

**Information for Your Physician to Include**

**to Support Your Request for Reasonable Accommodation**

Ask your physician for a letter to support medical claims you may have as a result from secondhand smoke exposure in your rental.

Make sure to ask for and keep a copy of any correspondence that is sent to your landlord on your behalf.

**1. Qualifications of the professional who is verifying the need for a reasonable accommodation.**

Sample: I, [professional person’s name] am a [doctor, health care professional, other professional] and have the following certification from a licensing institution.

**2. Nature of the contact the professional has had with the individual making the request.**

Sample: I have treated [tenant’s name] since [date] for a [mental, physical] condition.

**3. Statement that the tenant has a disabling [physical and/or mental] condition and that the [description of symptoms] substantially limits him or her in one or more major life activities.**

**4. Description of tenant’s limitations. Describe how the condition for which professional treating the tenant limits one or more of the tenant’s major life activities.**

Examples of “major life activities” include sleeping, eating, working and breathing.

**5. Describe how the accommodation that the tenant is requesting is necessary to afford the tenant the opportunity for full use and enjoyment of the unit. Relate the requested accommodation**