**Sample ESA Letter**

Name of Professional

License No.

[Date]

To [Landlord, Housing Authority, and Homeowners Association]:

I am the physician/psychiatrist/psychologist/therapist/social worker/occupational therapist for [patient’s name], and am familiar with his/her/their condition and can confirm that she/he/they indeed meet the definition of disability under the American with Disabilities Act, the Fair Housing Act, and the Rehabilitation Act of 1973.

Due to [his/her/their] disability, [first name] has certain limitations and is not able to enjoy certain major life activities. An assistance animal is necessary for [patient’s name] to live in the community and be able to enjoy one or more of these major life activities.

Thank you for providing this reasonable accommodation for [patient’s name]. If you have any further questions, please feel free to contact me at \_\_\_\_\_\_\_\_\_\_\_\_

Sincerely,

[Name and Title]