

## **REASONABLE ACCOMMODATIONS AND MODIFICATIONS POLICY**

Half Moon Bay Homeowners Association, Half Moon Bay Phase I, Half Moon Bay Phase II, Discovery Cove at Half Moon Bay, its respective Board of Managers and Board of Directors, and its managing Agent, (“The Association”) is committed to granting reasonable accommodations to its rules, policies, practices, or services when such accommodations may be necessary to afford people with disabilities an equal opportunity to use and enjoy their dwellings, as required by federal, state and local law.

**In keeping with that commitment, The Association shall distribute a copy of this policy to all residents of Half Moon Bay, and all new residents will be provided with a copy of this policy immediately when they join our community.**

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 common area.

A reasonable modification is a physical change to the structure of a resident’s unit.

It is the Association’s general policy to provide reasonable accommodations and/or modifications to individuals with disabilities whenever an individual has a disability and there is a disability-related need for the requested accommodation or modification. A disability-related need for a requested accommodation or modification exists when there is an identifiable relationship, or nexus, between the requested accommodation or modification and the individual’s disability.

**If there is any cost associated with providing an accommodation, the cost will be to the Association.**

The Association may deny the requested accommodation if providing it would impose an undue financial and administrative burden on the Association, or if the requested accommodation would fundamentally alter the nature of the Association’s operations. If granting a reasonable accommodation would impose an undue financial and administrative burden or would fundamentally alter the nature of the Association’s operations, the Association will consult with the requester and provide any accommodation that would not impose such a burden or result in a fundamental alteration.

If there is a request for a reasonable modification to a resident’s unit, any such cost for the modification is the responsibility of said resident.

The Association accepts reasonable accommodation and reasonable modification requests from persons with disabilities and those acting on their behalf. Reasonable Accommodation and/or Modification Request Forms are available from Heritage Management and may be returned to your property manager by either mailing to 346 Route 202 Somers, NY 10589 or by emailing to [Info@heritagemanage.com](mailto:Info@heritagemanage.com) . If assistance is required in completing the form, or if the request needs to be made verbally, please contact Heritage Management at 914-276-2509.

Heritage Management will keep a record of all requests for reasonable accommodations and reasonable modifications, whether made verbally or in writing, in a central file at 346 Route 202

Somers, NY 10589. Heritage Management will make the particular resident's record available to the resident upon request of the resident/their representative.

The Association will make a reasonably prompt decision regarding every request for reasonable accommodation or modification. If the request is of a time-sensitive nature, that should be noted at the same time the request is made, and the Association will expedite the decision-making process. In the event the Association needs additional information to make a determination, it will promptly advise the requester of the information needed. It is the Association's policy to seek only the information needed to determine if a reasonable accommodation or reasonable modification should be granted under federal, state, and/or local law. The information the Association may seek is set forth in the forms attached to this policy. **The Association or its agents may ask minimally invasive questions and/or for the minimally invasive supporting documentation as may be necessary in order to establish the existence of a disability and the need for the requested accommodation or modification.** If the Association grants the request, the requester will receive a letter so indicating.

If the Association denies the request, the Association or its designated agent will provide the requester with a letter stating the reasons for its denial. If the Association believes that the request poses an undue financial and administrative burden or a fundamental alteration to the nature of the Association's operations, the Association or its agent will schedule a meeting at a mutually convenient time to discuss possible alternatives. If agreement on an alternative is not reached, the Association or its agent will send the requester a letter providing the Association's decision on the requested accommodation or modification and a detailed explanation of the Association's reasons for a denial to grant an alternative.

If an individual with a disability believes that the request has been denied unlawfully or a response has been unreasonably delayed, then that person may file a complaint by writing or calling any of the following:

Westchester County Human Rights Commission  
112 East Post Road, 3<sup>rd</sup> Floor  
White Plains, New York 10601  
Tel No. 914-995-9500  
<https://humanrights.westchestergov.com>

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  
Tel No. (800) 496-4294  
<https://www.hud.gov/>

New York State Division of Human Rights  
One Fordham Plaza, 4<sup>th</sup> Floor  
Bronx, New York 10458  
Tel No. (888) 392-3644  
TDD: (718) 741-8300  
<https://dhr.ny.gov/>

## **DEFINITIONS AND PROCEDURES**

A. the Association will grant reasonable accommodation and reasonable modification requests consistent with the enclosed policy and the following relevant statutes:

1. The Fair Housing Act defines a person with a “disability”<sup>1</sup> 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.
2. 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, provided, however, that in all provisions of this article dealing with employment, the term shall be limited to disabilities which, upon the provision of reasonable accommodations, do not prevent the complainant from performing in a reasonable manner the activities involved in the job or occupation sought or held.
3. The Westchester County Fair Housing Law defines a disability as (a) a physical, mental, psychological, or medical impairment resulting from anatomical, physiological, genetic or neurological conditions which substantially limit one or more of a person’s major life activities or prevents the exercise of an unimpaired bodily function or is demonstrable by medically accepted clinical or laboratory diagnostic techniques; or (b) a record or history of a physical, mental, psychological, or medical impairment. The term “physical, mental, psychological, or medical 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 genitor-urinary systems; the hemic and lymphatic systems; the immunological systems; the skin; and the endocrine system; or (2) a mental or psychological disorder includes, but is not limited to, depression, bipolar disorder, anxiety disorders, and schizophrenia; or (3) a condition regarded or perceived by others as such an impairment.

The term “disability” does not include active alcoholism, active drug addiction, the current illegal use of controlled substances, or any other form of substance abuse, except, however, it may apply to a person who is recovering or has recovered, and is currently free from such substance abuse.

B. the Association or its designated agent will review and respond with reasonable promptness to all reasonable accommodation and reasonable modification requests, regardless of how the Association becomes aware of the request (i.e., written, verbal).

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<sup>1</sup> The Fair Housing Act uses the word “handicap,” which has been found to have the same legal meaning as “disability.”

- C. All information received by the Association regarding an individual's stated disability, including physical, mental, psychological, medical and/or psychiatric conditions, and disability-related need for a requested accommodation or modification shall be kept confidential and separate from the resident's file, unless the individual authorizes the release of the information or the Association is required to produce the information in response to a subpoena or court order.
- D. If the individual has a disability and a disability-related need for a reasonable accommodation or reasonable modification under federal, state or local law, the Association will grant such accommodation or modification as required under law.
- E. **Assistance animals** (including, but not limited to, emotional support animals and service animals) are any animal that works, provides assistance, 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. Assistance animals are an example of a reasonable accommodation required by law and this policy when the above criteria are met. Assistance animals are **not** pets. The resident with the disability, or its agent/aide, is responsible for maintaining control of the assistance animal.

Service animals, which are a type of assistance animal, are trained to do work or perform tasks for an individual with a disability.

- F. Neither the Association nor any of its agents, employees or contractors will retaliate against any person because of a request for a reasonable accommodation or reasonable modification, or their use thereof.
- G. Neither the Association, nor any of its agents, employees or contractors, will discourage any individual from making a reasonable accommodation or reasonable modification request, including a request to keep an assistance animal.

It is hereby acknowledged that **assistance animals are not pets**. However, an individual must request a reasonable accommodation to the Association's pet/animal policy in order to keep an assistance animal on premises.

the Association is dedicated to ensuring that individuals with disabilities may keep such animals as required by federal, state, and local law.

Rules applicable to pets do not apply to assistance animals, except as provided in this reasonable accommodations and modifications policy. However, when assistance animals are in building common or public areas, such animals must be tethered (e.g., kept on a leash, in a carrier or cage), unless those devices prevent such animals from performing a disability-related task. Additionally, like any other resident, owners of assistance animals remain subject to the provisions of their lease.

Similarly, owners of 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, the

Americans with Disabilities Act, the New York State Human Rights Law, or Westchester County Fair Housing Law, or the owner is entitled to a reasonable accommodation.

With respect to taking action against residents for damage they or their animals cause, the Association will treat damage caused by assistance animals the same as comparable damage caused by residents, their guests, or pets or other animals.

Generally, housing providers may not ask for the resident's specific diagnosis or medical history, nature or extent of the resident's disability, and/or require special certification or animal training, or proof thereof.

It is often readily apparent that an animal provides assistance for an individual with a disability, such as a dog that guides an individual with a visual impairment. Where it is readily apparent that an animal is an assistance animal, the Association **will not inquire about the person's disability or the animal's training or the assistance they provide to the person.**

In the case of a resident who requests a reasonable accommodation for an assistance animal, **ONLY** when their disability and/or need for the assistance animal are non-apparent, the Association may require, as necessary, that the individual provide:

For assistance animals other than service animals:

- (1) A statement indicating that the individual has a disability; and/or
- (2) Information that the animal provides assistance for the benefit of the individual with a disability, or provides emotional support that alleviates one or more identified symptoms or effects of the individual's disability.

For service animals:

Responses to these two questions:

- (1) Is the animal required because of a disability? and
- (2) What work or task has the animal been trained to perform?

Do **NOT** ask about the nature or extent of the individual's disability, and do **NOT** ask for documentation.

**REASONABLE ACCOMMODATIONS AND/OR  
REASONABLE MODIFICATIONS REQUEST FORM**

PLEASE COMPLETE THIS FORM TO REQUEST AN ACCOMMODATION. IF YOU REQUIRE ASSISTANCE COMPLETING THIS FORM, OR WISH TO MAKE THE REQUEST VERBALLY, PLEASE CONTACT OUR OFFICE AT (\_914\_) 276-2509. HERITAGE MANAGEMENT WILL KEEP A RECORD OF ALL REQUESTS, WHETHER WRITTEN OR VERBAL.

RESIDENT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_

PERSON REQUESTING ACCOMMODATION:  
(IF DIFFERENT FROM RESIDENT)  
RELATIONSHIP TO RESIDENT:

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.)
  
  
  
  
  
  
  
  
  
  
4. If you are requesting permission to have an animal in your apartment as a reasonable accommodation and it is not readily apparent to others that the animal is an assistance animal please answer the following:
  - (a) Type of animal (e.g., dog, cat):
  
  
  
  
  
  
  
  
  
  
  - (b) Is the animal required because of a disability?  

Yes \_\_\_\_\_ No \_\_\_\_\_
  
  
  - (c) Does the animal assist you with your disability?  

Yes \_\_\_\_\_ No \_\_\_\_\_

- (d) If the answer to 3(c) is YES:
  - a. provide a statement 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
  - b. explain below how the animal works, provides assistance, performs tasks to help you as a person with a disability, or provides emotional support that alleviates one or more identified symptoms or effects of your disability:

You may attach any additional supporting information or documentation to this application.

- (e) The Association may deny a request to keep an animal on 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, or if the animal would cause substantial physical damage to the property of others that cannot be reduced or eliminated by another reasonable accommodation. The Association will base such a determination only upon reliable, objective evidence of the specific animal's actual behavior or conduct, and not on speculation or fear about the types of harm or damage an animal may cause.
- (f) If the assistance animal is a dog or cat, please provide a copy of the animal's rabies certificate that is required by New York law. If you have not selected an animal at the time you complete this application, the Association may approve the application on condition that the applicant must submit a copy of the animal's rabies certificate before the selected animal moves in.

- 4. If you are requesting a physical change to the interior of your unit, please describe the modifications. Please also submit a written request and comply with any local, State, and/or Federal laws pertaining to same (e.g., securing the necessary Department of Building permits, maintaining necessary insurance).

5. If you are requesting a physical change to the exterior of your unit or to a public or common use area, please describe the modification.
  
6. Please provide any supporting documentation (e.g., medical proof of disability, government issued disability parking tag) that you would like the Association to consider towards your request, and indicate here the documents which you are submitting in support of the application.

Date:

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Signature

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Print name