[Licensed Mental Health Professional Letterhead]

Date: [MM/DD/YYYY]

[Recipient's Name/Address]

[City, State ZIP]

RE: URGENT - Emotional Support Animal Accommodation Request for [Patient's Full Name]

To Whom It May Concern,

I am writing as a licensed mental health professional [License Type and Number] regarding my patient, [Patient's Full Name], who requires URGENT accommodation for an emotional support animal due to an immediate housing crisis.

I hereby confirm that:

- 1. Patient Information:
- Name: [Patient's Full Name]
- Current Patient Status: Active
- Diagnosis: [Patient] has been diagnosed with a condition listed in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). The specific diagnosis is [ICD-10 Code: FXX.X Brief Description]
- 2. Treatment Relationship:
- [Patient] has been under my professional care since [MM/YYYY]
- Our most recent consultation occurred on [MM/DD/YYYY]
- Our treatment plan is ongoing and includes regular sessions

3. URGENCY OF SITUATION:

- [Patient] is currently facing [describe urgent situation: eviction threat, lease renewal deadline, housing loss, etc.]
- This housing crisis is severely exacerbating [Patient]'s mental health symptoms
- Immediate accommodation for an emotional support animal is medically necessary to prevent:
- Further deterioration of [Patient]'s mental health condition
- Potential homelessness or housing instability
- Increased risk of [specific risks: self-harm, hospitalization, etc.]
- Without immediate accommodation, [Patient]'s condition will likely worsen significantly
- 4. Emotional Support Animal Necessity:
- I have determined that an emotional support animal is immediately necessary for [Patient]'s mental health and housing stability

- The presence of the emotional support animal provides critical therapeutic benefits including:
- Immediate emotional support during this crisis
- Stability and routine during housing transition
- Reduction in crisis-related anxiety and stress
- Prevention of symptom escalation
- The animal's presence provides essential crisis support that cannot be achieved through other treatment methods alone
- 5. Animal Information:
- Type/Breed: [Animal Type/Breed]
- Name: [Animal Name]
- Age: [Animal Age]
- Weight: [Animal Weight]
- Temperament: [e.g., "Well-behaved, quiet, provides immediate emotional support"]

This letter is written in accordance with the Fair Housing Act (42 U.S.C. § 3601 et seq.), which requires housing providers to make reasonable accommodations for persons with disabilities, including those requiring emotional support animals.

I am requesting EXPEDITED PROCESSING of this accommodation request due to the urgent nature of [Patient]'s housing situation and the immediate medical necessity of this accommodation.

The emotional support animal's presence is critical for [Patient]'s mental health and housing stability during this crisis. Without immediate accommodation, [Patient]'s condition is likely to deteriorate significantly, potentially resulting in severe consequences.

If you require verification of my credentials or additional information regarding this URGENT accommodation request, please contact me immediately at the information provided below. I am available for urgent consultation regarding this recommendation within the bounds of patient confidentiality.

Sincerely,

[Signature]

[Full Name of Licensed Professional], [Credentials]

[License Type and Number]

[Practice Name]

[Practice Address]

[Phone Number]

[Email Address]

P.S. This is an URGENT request requiring immediate attention. Please process this accommodation request as soon as possible to prevent further harm to my patient's mental health and housing stability.