

[Date]

[Landlord Name or Management Company]

[Property Address]

[City, State, Zip Code]

RE: Request for Reasonable Accommodation - Live-In Caregiver

To Whom It May Concern,

I am writing this letter in support of [Tenant Name]'s request for a reasonable housing accommodation. I am [Tenant Name]'s [Professional Title, e.g., Physician, Case Manager, Therapist].

[Tenant Name] has a disability as defined under the Fair Housing Act and the Americans with Disabilities Act. Due to the limitations resulting from this disability, it is medically necessary for [Tenant Name] to have a live-in caregiver to provide essential support and assistance.

The presence of a live-in caregiver is necessary for [Tenant Name] to have an equal opportunity to use and enjoy their dwelling. This caregiver will provide assistance with daily living activities, safety monitoring, and [mention any other general category of support].

Please note that the caregiver is not a tenant, but is present solely to provide necessary medical and personal support services. We request that you waive any "no guest" policies or additional occupant fees that would otherwise prevent this accommodation.

If you require any further information regarding this medical necessity, please feel free to contact my office.

Sincerely,

[Signature]

[Printed Name]

[Professional Title]

[Organization/Clinic Name]

[Phone Number]

[Email Address]