Re:	
Dear housing provider,	
I am writing this letter to confirm thatcare and treatment fortheir major life activities.	
As part of their treatment plan, I have prescribed an emmanaging their symptoms. Based on my professional evathave determined that the presence of an ESA is necessibeing.	luation and experience treating this patient, I
The specific type of animal I have prescribed is named housed with the patient in their dwelling unit. I am a licens, and my license number is	sed mental health professional in the state of
on	
I am authorized to provide this letter as a professional egranted to my patient under the Fair Housing Act and the F	· · · · · · · · · · · · · · · · · · ·
If you have any questions or concerns, please	
Sincerely,	