

MEDICAL PROFESSIONAL'S CERTIFICATION OF HANDICAP

ONLY Physician, Nurse Practitioner, Psychologist, or Physician's Assistant certification will be accepted.

The Aspen/Pitkin County Housing Authority occasionally has units that meet and/or exceed the Americans with Disability Act requirements. The Housing Authority's intent is to provide the unit to households that consist of a permanently disabled member who will benefit from the special accommodations of the unit. This form must be fully completed and submitted to the Housing Office to obtain this priority.

I have examined (person with the disability): _____

It is my opinion the he/she is a HANDICAPPED PERSON within the meaning of the Federal regulations as shown below.

"HANDICAPPED DEFINITION" *Handicapped persons* means those individuals who, by reason of illness, injury, age, congenital malfunction, or other permanent incapacity or disability, including those who are non-ambulatory wheelchair-bound and those with semi-ambulatory capabilities, are unable without special facilities or special planning or design to be effective as persons who are not so affected.

I believe that this disability is:

PERMANENT means any impairment that is expected to last a lifetime.

TEMPORARY means any impairment that is expected to last for a period not less than three months and not more than twelve months.

Explain:

Medical Professional's Name (please print): _____

Medical License Number: _____

Business Address: _____

City, State, Zip Code: _____

Phone Number: _____ Date: _____

Medical Professional's Signature: _____

(FACSIMILE NOT ACCEPTABLE)

Please return this completed professional's opinion to the Housing Office for review, a staff person may contact you for verification purposes. It is the applicant's responsibility to complete the application and have it signed by a duly licensed physician. APCA is not liable for any physician's or applicant's expense. APCA reserves the right to require proof of disability in addition to this professional opinion.