

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The estimated burden to complete this form is 15 minutes. The OMB control number for this information collection is 2105-0576. The authority for the collection expires on December 31, 2023.

**Warning:** It is a Federal crime to make materially false, fictitious, or fraudulent statements, entries, or representations knowingly and willfully on this form to secure disability accommodations provided under regulations of the United States Department of Transportation (18 U.S.C. § 1001).



## United States Department of Transportation Service Animal Relief Attestation Form

Service Animal Handler's Name \_\_\_\_\_ Phone: \_\_\_\_\_

Service Animal User's Name (if different Handler): \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Animal's Name: \_\_\_\_\_ Estimated Flight Length: \_\_\_\_\_

Flight Date: \_\_\_\_\_ Departure Airport: \_\_\_\_\_ Arrival Airport: \_\_\_\_\_

Check one or both boxes:

\_\_\_\_\_ will not need to relieve itself while on the aircraft.  
[Insert Animal's Name]

\_\_\_\_\_ can relieve itself on the aircraft without creating a health/sanitation issue.  
[Insert Animal's Name]

Describe how \_\_\_\_\_ will refrain from relieving itself, or relieve itself without posing a health/sanitation issue (e.g., the use of a dog diaper):  
[Insert Animal's Name]

I understand that if \_\_\_\_\_ causes damage, then the airline may charge me for the cost to repair it, as long as the airline would also charge passengers without disabilities to repair the same kind of damage.  
[Insert Animal's Name]

I am signing an official document of the U.S. Department of Transportation. My answers are true to the best of my knowledge. I understand that if I knowingly make false statements on this document, I can be subject to fines and other penalties.

Signature of the handler: \_\_\_\_\_ Date: \_\_\_\_\_