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**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).

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

		Phone: Phone:	
Animal's Name:	Es	Estimated Flight Length:	
Flight Date:	Departure Airport:	Arrival Airport:	
Check one or both bo	xes:		
[Insert Animal's N	will not need to relieve itse	elf while on the aircraft.	
[Insert Animal's ]	can relieve itself on the a	ircraft without creating a health/sanitation issue.	
	will refrain from [Insert Animal's Name] will refrain from issue (e.g., the use of a dog diaper)	relieving itself, or relieve itself without posing a	
	[Insert Animal's Name]	age, then the airline may charge me for the cost to ssengers without disabilities to repair the same kind of	
best of my kn	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 hand	ler:	Date:	