

Doctor Certification

Medical Hardship Temporary Use Permit



PATIENT'S NAME: _____

The above named person is applying to the Klamath County Planning Department for initial approval, or renewal, of a Medical Hardship Temporary Use Permit, which allows the placement of a Manufactured Home or RV on the property for the term of the medical hardship. A Medical Hardship TUP is permissible for patients who suffer from a physical or mental impairment.

The infirmity must be a physical or mental impairment which renders them incapable of maintaining a complete, separate and detached residence, and requires a caregiver to live close by to assist them in day to day activities.

In order to process this application, it is necessary that the patient's attending licensed physician certify that a physical or mental impairment exists.

It is my opinion that the above named patient has a physical or mental impairment that requires care and attention in the fashion described above, and that the named patient should be permitted to reside near a caretaker in order to facilitate proper care.

Print Doctor's Name: _____

Medical License No. _____ State: _____

Doctor's Signature: _____

Date: _____ *Place Medical Office Stamp Here*

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____