Three Rivers Regional Commission Americans with Disabilities Act of 1990

ADA Complaint Form

The Americans with Disability Act of 1990 (ADA) prohibits discrimination and ensures equal opportunity and access for persons with disabilities for a variety of activities of daily living. The Federal Transit Administration requires that "No qualified person with a disability shall, solely by reason of [their] disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives federal financial assistance administered by the U.S. Department of Transportation."

Note: The following information is necessary to assist us in processing your complaint. Should you require any assistance or reasonable modifications in completing this form, please call (678) 692-0510 ext. 402.

1.		Complaint Contact Information	
	Name		
		State Zip Code	
	Home Phone	Work Phone Cell Phone	
2.		Person Discriminated Against (Identify if self or another person)	
	Name		
		State Zip Code	
	Self	Other	
3.		Describe the reason(s) you believe the discrimination took place?	

4.	Description of the Alleged Discrimination		
	What date did the alleged discrimination take place?		
	Describe the alleged discrimination. Explain what happened and who you believe was responsible. If the space below is insufficient, please attach additional sheets		
5.	Other Complaint Filing(s)		
	Have you filed this complaint with any other federal, state, or local agency; OR with any federal or state court? Yes No		
	If yes, continue with the remainder of the questions in this section; if not, sign and date in section 6		
	If Yes, Check all that apply:		
	Federal Agency State Agency Local Agency		
	Federal Court		
6.	Complainant's Signature		
	All information included in this form has been provided in all honesty and to the best of my ability.		
	Signature		
	Printed Name		
	Date		

All complaints must be on the ADA Complaint Form. You may attach additional information that may be relevant to your complaint. An investigation will be conducted and completed within sixty (60) days of the receipt of the written complaint.

Please send all complaints to:

Local:

Jeannie R. Brantley Interim Transit Director Three Rivers Regional Commission 120 North Hill Street Griffin, Georgia 30224

State:

Georgia Department of Transportation Equal Employment Opportunity Office 600 West Peachtree Street, NW Atlanta, Georgia 30308

Federal:

ADA Program Coordinator FTA Office of Civil Rights East Building, 5th Floor TCR, 1200 New Jersey Avenue S Washington, D.C. 20509