

ADA COMPLAINT FORM

The American with Disabilities Act (ADA) is civil rights legislation which requires that persons with disabilities receive transportation services equal to those available to people without disabilities, and not be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance. If you feel you have been discriminated against in transit services, please provide the following information in order to assist us in processing your complaint:

Please print clearly:

Name: _____

Address: _____

City, State, Zip Code: _____

Telephone Number: Home: _____ Cell: _____

Message: _____

Person discriminated against: _____

Address of person discriminated against: _____

City, State, Zip Code: _____

Please indicate why you believe the discrimination occurred:

Disability Service animal Personal care attendant

What was the date of the alleged discrimination? _____

Where did the alleged discrimination take place? _____

Please describe the circumstances as you saw it: _____

Please list any and all witnesses' names and phone numbers:

What type of corrective action would you like to see taken?

Please attach any documents you have which support the allegation. Then date and sign this form and send it to the Director of Public Transportation at:

Lisa Beith, Director of Public Transportation
Danville Mass Transit
101 N Jackson St
Danville, IL 61832

A written response should be expected within thirty (30) days.

Signature _____ Date _____

Print Name _____

Appeals:

A complainant can appeal the decision in instances where he or she is dissatisfied with the resolution. The request for appeal must be made within sixty-(60) business days of receipt of DMT's response. An appeal must be made in writing, by telephone, or in person. Appeals are to be submitted to:

Human Relations Administrator
17 W Main Street
Danville, IL 61832

The Director shall maintain the files and records relating to the complaints filed, for a period of five-(5) years. Copies of complaints may be requested in accordance with the Freedom of Information Act. Names and addresses of complainant will be redacted to protect the individuals privacy rights.

The right of a person to prompt and equitable resolution of the complaint filed hereunder shall not be impaired by the person's pursuit of other remedies, such as filing of an ADA complaint with the responsible state of federal department or agency. Use of this complaint procedure is not a prerequisite to the pursuit of other remedies.