

Reasonable Modification Complaint Form

It is the policy of the Mason City Public Transit System to uphold and assure full compliance with the Americans with Disabilities Act (ADA), and related statutes. If you believe you or others are not being provided with a Reasonable Modification for disability under DOT 49 CFR Parts 27 & 37 and related statutes in receiving Mason City Public Transit Services, you may file a written complaint by the following:

Transit Operations Manager
10 First Street NW
Mason City, IA 50401
or by email
dschulte@masoncity.net

I believe that Mason City Public Transit failed to comply with the following:

_____ Americans with Disabilities Act (ADA)
_____ DOT 49 CFR Parts 27 & 37
_____ Other (Please be Specific): _____

Name: _____

Address: _____

City, State & Zip Code: _____

Telephone Number: _____

E-Mail Address: _____

Are you filing this on your own behalf? YES: _____ NO: _____

If not, please supply the name and relationship of the person for whom your filing this complaint:

Signature of Person Completing Form: _____

Date

Please attach the details of the complaint to this form.