Date Complaint Received	Complaint Number

South East Texas Transit ADA Complaint Form

The Americans with Disabilities Act of 1990 (ADA), provides that no individual with a disability shall, on the basis of disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any SETT program, service or activity.

If you have a complaint under the ADA, complete this form and submit it to South East Texas Regional Planning Commission, Transportation & Environmental Resources Department, Anna Papoutsis, 2210 Eastex Freeway, Beaumont, TX 77703-4929.

I. COMPLAINANT INFORMATION

Name

Address		
City – State – Zip		
Telephone	Email Address	
Accessible Format Requirements? [] Large Print [] TDD [] Audio Tape [] Other		
II. PRIMARY/THIRD PARTY INFORM	IATION	
Are you filing this complaint on your own behalf?		
[] YES If you answered "YES" to the question, go to Section III.		
[] NO → If you answered "NO" to the question, answer the following questions:		
a. Please supply the name and relation	nship of the person for whom you are complaining?	
b. Please explain why you have filed for a third party?		
c. Please confirm that you have obtained behalf of a third party. [] YES [d the permission of the aggrieved party if you are filing on] NO	

III. COMPLAINT BASIS

Date of Alleged Discrimination (Month, Day, Year)
Explain as clearly as possible what happened and why you believe you were discriminated against
Describe all persons who were involved. Include the name and contact information of the person(s) who
discriminated against you (if known) as well as names and contact information of any witnesses. If more
space is needed, please use the back side of this form or a separate sheet of paper.
IV. COMPLAINT FILING CONTACTS
Have you previously filed an ADA complaint with SETT? [] YES [] NO
Have you filed this complaint with any other federal, state or local agency or with any federal or state
court? [] YES [] NO If YES, check all that apply:
[] Federal Agency [] State Agency [] Local Agency [] Federal Court [] State Court
Please provide information for a contact person at the agency/court where the complaint was filed.
NY .
Name:
Title:
Agency:
City – State – Zip Code
Telephone:
You may attach any written materials or other information that you think is relevant to your complaint.
Complainant's Signature Date
complement a significant

Please submit this form in person at the address below or mail this form to:

South East Regional Planning Commission Transportation & Environmental Resources ATTENTION: Anna Papoutsis 2210 Eastex Freeway Beaumont, TX 77703-4929

OFFICE USE ONLY

Jurisdiction: on or before 180 days post event	
Closure:	
[] 1 – Closure Letter	
[] 2 – Letter of Finding	
[] 3 – Administrative - Transportation	
[] 4 – Administrative - Admin	
Appeal: 10 days post receipt date of Closure Letter or Letter of	
Finding	