

AMERICANS WITH DISABILITIES COMPLAINT PROCESS

"RFTA shall not discriminate against an individual with a disability in connection with the offering of transportation services."

The Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973 prohibits discrimination against individuals with disabilities be excluded from, denied the benefits of, or subject to discrimination with regards to employment, transportation, public accommodation, communications, and governmental activities. Under the ADA, a person has a disability if he or she has a physical or mental impairment that substantially limits a major life activity. RFTA offers and provides options for accessible transportation to those persons with an assessed inability to access or navigate the fixed-route bus system due to a temporary or permanent disability.

RFTA's ADA Complementary Paratransit service provides accessible transportation for persons with an **assessed** inability to access any of RFTA's fixed-route transportation modes that exist in designated service areas. ADA Complementary Paratransit service is offered, with qualifications, to individuals of any age with an **assessed** disability. Individuals must complete and submit an ADA Complementary Paratransit service application, available on the RFTA website, https://www.rfta.com/paratransit, a RFTA representative will then complete an in-person functional ability assessment and provide a written determination of eligibility letter. Disabled individuals unable to use regular bus service may be eligible for ADA Complementary Paratransit service within the municipal limits of Aspen, Carbondale, and Glenwood Springs. All paratransit vehicles are equipped with wheelchair lifts and all buses are ADA compliant, equipped with either a wheelchair lift or low-floor boarding.

Anyone who believes they have been excluded from participation in, denied the benefits of, or otherwise subjected to discrimination under any RFTA program or activity because of their disability may file a complaint with RFTA's Regulatory Compliance Officer.

Federal law requires that RFTA investigate, track, and report ADA complaints. Complaints must be filed, in writing, within 180 days from the date of the alleged discrimination, and will be investigated within thirty (30) days of submission.

While not required, complainants are encouraged to use the ADA Complaint Form which can be found at www.rfta.com/paratransit (ADA Complaint Form).

Complaints may be submitted via email, phone, fax, or in person to the following:

Roaring Fork Transportation Authority

Nicole Schoon, Regulatory Compliance Officer 2307 Wulfsohn Road Glenwood Springs, CO 81601 nschoon@rfta.com

Phone: (970) 384-4974 Fax: (970) 384-4937

Investigating a complaint includes interviewing all parties involved and key witnesses. The Regulatory Compliance Officer may request relevant information such as files, records, electronic information, and other sources of information from all involved parties. The complainant has thirty (30) days from the

Roaring Fork Transportation Authority

ADA COMPLAINT PROCESS

original complaint date to respond to RFTA's Regulatory Compliance Officer with the requested information.

If the Regulatory Compliance Officer does not receive the requested information within thirty (30) days from the original complaint date, RFTA can administratively close the complaint. The complainant will be informed of the complaint closure through a registered, return receipt letter.

After the Regulatory Compliance Officer reviews the complaint and any additional information, one of two (2) letters will be issued to the complainant based on its findings:

- 1. Complaint Closure Letter: This letter will state that RFTA is found to be in compliance with ADA regulations. The letter will include an explanation of why RFTA was found to be in compliance, and provide notification of the complainant's appeal rights.
- 2. Letter of Finding: This letter will state that RFTA is found to be non-compliant with ADA regulations. The letter will include a summary of allegations, each violation referenced, the applicable regulations, and a brief description of proposed remedies and actions taken. If the complainant wishes to appeal the decision contained in the Letter of Finding, he/she will have ten (10) days after receipt of the Letter of Finding to do so.

If the complainant is not satisfied with the findings and/or actions taken by RFTA, the complainant may file his/her complaint with the FTA's Office of Civil Rights.

Federal Transit Administration

Office of Civil Rights East Building, 5th Floor-TCR, 1200 New Jersey Ave., SE Washington, DC 20590 (888) 446-4511 www.fta.dot.gov

RFTA will make reasonable efforts to assist persons with disabilities, non-English speakers, and others unable to file a written complaint. This document is available in accessible formats upon request. To obtain paper copies of this ADA Complaint Process, as well as information regarding these accessible formats or assistance with completing forms, call RFTA's Regulatory Compliance Officer at (970) 384-4974 or Spanish Translation at (970) 384-4950. Individuals with hearing impairments may contact Relay Colorado at (800) 659-2656.

Este procedimiento de queja y el Formulario de Queja de Discriminación están disponibles en español en www.rfta.com/paratransit.

RFTA prohibits retaliation against individuals because they have filed a discrimination complaint or otherwise participated in a discrimination investigation. Any alleged retaliation should be reported in writing to the Regulatory Compliance Officer.

AMERICANS WITH DISABILITIES ACT COMPLAINT FORM

For questions about RFTA's Americans with Disabilities Act (ADA) complaint procedures or complaint form contact Nicole Schoon, Regulatory Compliance Officer, (970) 384-4974 or titleVI@rfta.com.

Full Name (Complainant):		
Phone Number: ()	Email:	
Address:		
City: Se	ate: Zip	Code:
Preferred Contact Method: ☐ Phone ☐ E-Mail ☐ US Mail Are you filing this complaint on your own behalf?		
☐ Yes		
If not, Please provide the name and relationship to Name: Relationship:	the person for whon	n you are filing the complaint:
Date of alleged disability discrimination:		
Time of Day:		
Name/Position (Title) of person(s) who allegedly	discriminated against	you:
Location of Incident:		Date:
Explain as clearly as possible what happened and	why you believe you	were discriminated against:
(Attach separate sheet(s), if necessary)		

Witness(es): □ YES □ NO
List Witness(es): (Attach a separate sheet, if necessary)
(1) Name:
Phone Number: ()
(2) Name:
Phone Number: ()
(3) Name:
Phone Number: ()
(4) Name:
Phone Number: ()
Complaint filed with Federal, State, or Local agency; or Federal or State court? YES NO If YES, check all that apply: Local Agency State Agency Federal Agency State Court Federal Court
Contact Information for Court/Agency of Complaint filed:
Agency:
Contact Name:
Phone Number: ()
Address:
City: State: Zip Code:

AFFIRMATION

By signing below, you agree that (1) you have read, understood and accepted the terms and procedures for tracking and investigating ADA complaints and (2) you affirm that the information above is true to the best of your knowledge.

Signature

Printed Name

Date

Send this completed form along with any written materials or other information that you think is relevant to your complaint to:

ROARING FORK TRANSPORTATION AUTHORITY

Nicole Schoon, Regulatory Compliance Officer 2307 Wulfsohn Road Glenwood Springs, CO 81601 titleVI@rfta.com

INTERNAL USE ONLY

cole R. Schoon, Regulatory Compliance Officer
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eferred to another department on/
ecepted for formal Investigation/
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