

TITLE VI DISCRIMINATION COMPLAINT FORM

Please print out this form, fill it out and mail it to: Estuary Transit District or the Federal Transit Administration.

Name: _____

Street Address: _____

City or Town/State/Zip Code: _____

Phone: _____

Discrimination because of: __Race __Color __National Origin __Other

Please provide the date(s) and location of the alleged discrimination, the name(s) of the individual(s) who allegedly discriminated against you including their titles (if known).

Please provide the names, addresses and telephone numbers of any witnesses.

Explain as briefly and as clearly as possible what happened, how you feel that you were discriminated against and who was involved. Please include how other persons were treated differently from you.

Signature/Date _____

You may use additional sheets of paper if necessary. Also include any written materials pertaining to your complaint.

Address: **Joseph Comerford**
Estuary Transit District: Title VI Complaint
91 N Main Street
Middletown, CT 06457
(860) 510-0429 extension 101
jcomerford@estuarytransit.org

Federal Transit Administration (FTA) Title VI complaints may be filed directly to:
FTA Office of Civil Rights
1200 New Jersey Avenue, SE
Washington, DC 20590