TITLE VI COMPLAINT FORM

Any person who believes that he or she has been discriminated against by Valley Metro or any of its service providers, and believes the discrimination was based upon race, color or national origin may file a formal complaint with Valley Metro Customer Service.

Please provide the following information to process your complaint. Alternative formats and languages are available upon request. You can reach Customer Service at (602) 253-5000/TTY: (602) 251-2039, or email at csr@valleymetro.org.

Section I: Customer Information

Name:

Address:

City:	State:	Zip:
Work Phone:	Home Phone:	Cell Phone:

Email Address:

Section II: Incident Information

Date of Incident:	Time of Incident: AM/PM	City:

Incident Location:	Direction of Travel:

Route #:	Bus/Light Rail #:

Service Type: ☐ Local ☐ Express/RAPID ☐ Light Rail ☐ Circulator/Connector ☐ Dial-a-Ride

Operator Name:

Operator Description:

What was the discrimination based on? (Check all that apply)

☐ Race ☐ Color ☐ National Origin ☐ Other:

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 of this form.

Have you filed this complaint with the Federal Transit Administration? ☐ Yes ☐ No

If yes, please provide information about a contact person at the Federal Transit Administration where the complaint was filed.

Name:	Title:
Address:	Telephone:

Have you previously filed a Title VI complaint with this agency: ☐ Yes ☐ No

You may attach any written materials or other information that you think is relevant to your complaint.

Signature and date required below:

Signature Date

602.253.5000
TTY: 602 251.2039
valleymetro.org

VALLEY METRO

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