

CATC ADA Discrimination Complaint Form



If you think you have been discriminated against on the basis of race, color, or national origin or that you were excluded or denied service by CATC due to a disability, please fill out this form and send or e-mail it to ADA Complaints, CATC 1715 E. 4th Street, Casper, WY 82601
 e-mail: catcbus@catcbus.com

1. Name (Complainant):	2. Phone:	3. Home address (St #,city state, zip):
4. If applicable, name and title of person(s) who allegedly discriminated against you:		6. Date and time of alleged incident:
5. Location of alleged event:		
7. Discrimination based on (circle one): Race National Origin Color Disability Religion Veteran Status		o <i>ADA Accessibility</i> If your complaint is regarding Bus or Stop. Accessibility, please fill out your contact information on this page and then move to page 2 .
8. Please describe the alleged discrimination incident. You may attach a separate sheet of paper if necessary. You should include specific details such as names, dates, times, bus and routes, witnesses, use of mobility devices, and any other information that would assist us in our investigation of your allegations . Please also provide any other documentation that is relevant to this complaint.		
9. Why do you believe these events occurred?		
10. How can this/these issue(s) be resolved to your satisfaction?		
11. Please list below an person(s) we may contact for additional information to support or clarify your complaint (witnesses, fellow employees, supervisors, others): <u>Name:</u> <u>Relationship:</u> <u>Contact Information:</u>		
Signature :(complainant must sign and date) Date :		

ADA accessibility complaint/concern is regarding: <i>(check one)</i>	
<input type="radio"/> Bus Stop <input type="radio"/> Landing Area <input type="radio"/> Bus Shelter	<input type="radio"/> Bus <input type="radio"/> Other
Bus Stop Location:	
What is the bus stop number?	
What route(s) or destination(s) does the bus stop serve?	
What is the direction of bus travel on that street? <i>(Northbound, Southbound, Eastbound, Westbound)</i>	
Please include any other information that will help CATC locate the bus stop.	
Landing Area Issues: (An area for a lift/ramp to deploy, when getting on or off the bus)	
Is there a landing area that can accommodate a customer using a mobility device?	<input type="radio"/> YES <input type="radio"/> NO
If so, are there problems with the landing area surface? <i>Please describe the problem(s).</i>	
Describe any obstacles that would limit the mobility of a wheelchair user? (i.e. ,trash receptacle, newspaper boxes, landscaping, etc.)	
Is the sidewalk or pathway leading to the bus stop accessible for a person using a wheelchair or mobility device?	
Passenger Shelter Issues:	
Please describe the issue if your complaint/concern is regarding Passenger Shelter accessibility.	
Bus Accessibility Issues:	
Bus Number (if applicable)	
Please describe any accessibility issues you may have experienced <i>(inoperable lift, securement apparatus, etc.)</i>	
other:	
If your complaint or concern is something other than what is listed here, please explain:	

To file a complaint directly with the Federal Transit Administration (FTA) please visit the FTA website at: <https://www.transit.dot.gov/regulations-and-guidance/civil-rights-adafile-complaint-fta>