Title VI Complaint Procedure

Any individual, group of individuals or entity that believes they have been discriminated against on the basis of race, color, or national origin by the **Tri County Transit** may file a Title VI complaint by completing and submitting the agency's Title VI Complaint Form.

Any individual having filed a complaint or participated in the investigation of a complaint shall not be subjected to any form of intimidation or retaliation. Individuals who have cause to think that they have been subjected to intimidation or retaliation can file a complaint of retaliation following the same procedure for filing a discrimination complaint.

A complaint must be filed with the Tri County Transit no later than 180 days after the following:

- 1. The date of the alleged act of discrimination; or
- 2. The date when the person(s) became aware of the alleged discrimination; or
- 3. Where there has been a continuing course of conduct, the date on which that conduct was discontinued of the latest instance of the conduct.

Once the complaint is received, the **Tri County Transit** will review it to determine if our office has jurisdiction. A copy of each Title VI complaint received will be forwarded to the New Hampshire Department of Transportation within ten (10) calendar days of receipt. The complainant will receive an acknowledgement letter informing her/him whether the complaint will be investigated by our office.

The **Tri County Transit** has 45 days to investigate the complaint. If more information is needed to resolve the case, the **Tri County Transit** may contact the complainant requesting further information. The complainant has **15** business days from the date of the letter to send requested information to the investigator assigned to the case. If the investigator is not contacted by the complainant or does not receive the additional information within **15** business days, the **Tri County Transit** can administratively close the case.

After the investigator reviews the complaint, the agency will issue one of two (2) letters to the complainant: a closure letter or a letter of finding (LOF).

- ✓ A <u>closure letter</u> summarizes the allegations and states that there was not a Title VI violation and that the case will be closed.
- ✓ A <u>letter of finding (LOF)</u> summarizes the allegations and the interviews regarding the alleged incident, and explains whether any disciplinary action, additional training of the staff member, or other action will occur.

If the complainant wishes to appeal the decision it must direct the appeal to the agency initially. The complainant has **30** days after the date of the closure letter or the letter of finding to do so. If there is outstanding concern, the appeal may be directed to the state DOT or FTA. The appeal process information will be included in the letter.

A person may also file a complaint directly with the: New Hampshire Department of Transportation, Attn: Shannon Aiton, Title VI Coordinator, PO Box 483, 7 Hazen Drive Concord, NH 03302-0483; 603-271-2467; TTY: 800-735-2964; titlevi@dot.nh.gov

Or

Federal Transit Administration, Office of Civil Rights, Attention: Complaint Team, East Building, 5th Floor-TCR, 1200 New Jersey Ave., SE Washington, DC, 20590. If information is needed in another language, then contact **888-648-2227**.



Tri County Transit 31 Pleasant Street Berlin NH 03570 603-752-1741 1-888-997-2020

TITLE VI COMPLAINT FORM

Section I:			
Name:			
Address:			
Telephone (Home):			
Telephone (Work):			
Electronic Mail Address (email):			
Accessible Format Requirements? (Circle One) Lagre Print TDD Audio Tape Other			
Section II:			
Are you filing this complaint on your own behalf? *If you answered "yes" to this question, go to Section III. If not, please supply the name and relationship of the person for whom you are complaining			
Please explain why you have filed for a third party:			
Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party. (Circle One) Yes No			
Section III:			
I Believe the discrimination I experienced was based on (Circle all that apply):			
Race Color National Origin			
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 of this form.			
Section IV:	oucly filed a Titl	e VI complaint with this agency? (Circle One)	
nave you previ	ously lifed a Titi	le vi complaint with this agency: (chicle one)	
Yes	No	Date of filing:	
Section V:			
Have you filed or State court?	-	vith any other Federal, State, or local agency, or with any Federal	
Yes	No		
If yes, check all	that apply:		
Federal Agency	7:	State Agency:	
Federal Court:		State Court:	
Local Agency: _			
Please provide information about a contact person at the agency/court where the complaint was filed.			
Name:			
Title:			
Agency:			
Address:			
Telephone:			

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Section VI			
Name of Agency complaint is against:			
Contact Person:			
Title:			
Telephone Number:			
*You may attach any written materials or other information that you think is relevent to your complaint.			
Siganture and date required below.			
Signature : Date:			
Please submit this form in person at the address below, or mail this form to:			
Tri County Transit			
Jeanene McDonald,, Transportation Director			
Tri County CAP Inc.			
31 Pleasant Street			
Berlin NH 03570			