



Title VI Complaint Form

Butler County Regional Transit Authority (BCRTA)

BCRTA is committed to ensuring that no person is excluded from participation in or denied the benefits of its services on the basis of race, color or national origin, as provided by Title VI of the Civil Rights Action of 1964, as amended. Title VI complaints must be filed within 180 days from the date of the alleged discrimination.

The following information is necessary to assist us in processing your complaint. If you require any assistance in completing this form, please contact the Title VI Coordinator by calling (513) 785-5378. The completed form must be returned to BCRTA Title VI Coordinator, 3045 Moser Court, Hamilton, Ohio 45011.

Your Name:	Phone:
Street Address:	Alt Phone:
	City, State & Zip Code:
Person(s) discriminated against (if someone other than complainant):	
Name(s):	
Street Address, City, State & Zip Code:	

Date of Incident: _____

Which of the following best describes the reason for the alleged discrimination took place (Circle one):

- Race
- Color
- National Origin (Limited English Proficiency)
- Sex
- Disability
- Age

Please describe the alleged discrimination incident. Provide the names and title of all BCRTA employees involved if available. Explain what happened and whom you believe was responsible. Please use the back of this form if additional space is required.

Complete reverse side of form

