

Title VI Complaint Process

In compliance with U.S. Department of Transportation Title VI regulations (49 CFR Part 21), Lift Line operates without regard to race, color, age, sex, sexual orientation, gender identity, or national origin. Any person who believes he or she has been discriminated against by Lift Line on the basis of race, color, age, sex, sexual orientation, gender identity, or national origin may file a Title VI complaint.

If the complainant is unable to write a complaint, a representative may file on his or her behalf, or Lift Line staff will provide assistance. Complaints must be filed within 180 calendar days of the alleged incident.

1. Lift Line will contact the complainant within 10 business days of receipt of complaint. Any requested information must be received by Lift Line within 5 days of request*.
2. Lift Line will begin the investigation within 15 business days of receipt of complaint if the alleged discrimination is found to be a violation of Title VI regulations.
3. Lift Line will complete the investigation within 60 calendar days of receipt of complaint. If additional time is needed for the investigation, the complainant will be notified.
4. A written investigation report will be prepared, including a summary description of the incident, investigative findings, and recommended corrective action.
5. A closing letter will be provided to the complainant. The complainant will have 5 business days from receipt of the closing letter to file an appeal. If no appeal is filed, the complaint will be closed.
6. Lift Line will forward a copy of the investigation report to the appropriate federal agency, if required.

***Lift Line will process and investigate all complaints that meet the requirements of Title VI discrimination. If the complainant fails to provide required information within the required timeframe, the complaint may be closed.**

**Complaint forms should be mailed to 545 Ohlone Parkway Watsonville, Ca. 95076
You may contact Nadia Noriega, Operation Manage at 831-688-9663 Ext. #231**

TITLE VI COMPLAINT FORM

Section I:

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Telephone (Home/Cell) : _____ Telephone (Work) _____

Email Address: _____

Do you required an accessible format?: _____
 Large Print TTY/TDD Audio Tape Other

Section II:

Are you filling this complaint on your own behalf? (Circle) **Yes** **No**

If you answered “yes” to this question, go to Section III.

If not, please supply the name and relationship of the person for who, you are filing:

Full Name: _____
Last First M.I.

Have you obtain permission from this person? **Yes** **No**

Please describe the alleged discrimination incident. Provide the names and titles of all Lift Line employees involved if available. Explain what happened and who you believe was responsible

Section IV:

Have you previously filed a Title VI complaint with Lift Line? **Yes** _____ **No** _____

Contact Name: _____ Phone: _____

Section V:

Have you filed this complaint with any other federal, state, or local agency, or with any federal or state court?

Yes No

If yes, check all that apply:

- Federal Agency: _____ Federal Court: _____
- State Agency: _____ State Court: _____
- Local Agency: _____ Local Court: _____

Please provide contact information for the person you spoke to at the above agency:

Name: _____ Title: _____

Agency: _____

Address: _____

Telephone: _____

You may attach any writing materials or other information that you think is relevant to your complaint your signature and date are requires bellow:

Signature

Date

Lift Line operates without regard to race, color, or national origin. If you need assistance completing this form, contact Lift Line at: (831) 688-9663