

Title VI Complaint Procedures

This document outlines the Title VI complaint procedures related to providing programs, services, and benefits of the **Xpress** commuter service.

Persons still reserve the right to file formal complaints with the Georgia Department of Transportation, the Secretary of the U.S. Department of Transportation, Equal Employment Opportunity Commission (EEOC), Federal Highway Administration (FHWA), Federal Transit Administration (FTA), or to seek private counsel for complaints alleging discrimination, intimidation, or retaliation of any kind that is prohibited by law.

Title VI of the Civil Rights Act of 1964 requires that no person in the United States shall, on the grounds of race, color or national origin, be excluded from, be denied the benefits of, or be subjected to, discrimination under any program or activity receiving federal financial assistance.

1. Any person who believes that they have been subjected to discrimination may file a written complaint with the Georgia Regional Transportation Authority Civil Rights Officer. Federal and State law requires complaints be filed within one-hundred eighty (180) calendar days of the last alleged incident.
2. The complainant may download the complaint form here at www.XpressGa.com or request the complaint form from the Civil Rights Officer. The complainant may also submit a written statement that contains all of the information identified in Section 3a through 3f
3. The complaint will include the following information:
 - a. Name, address, and telephone number of the complainant.
 - b. The basis of the complaint i.e., race, color, national origin, sex, elderly or disabled.
 - c. The date or dates on which the alleged discriminatory event or events occurred.
 - d. The nature of the incident that led the complainant to feel discrimination was a factor.
 - e. Names, addresses, and telephone numbers of persons who may have knowledge of the event.
 - f. Other agencies or courts where complaint may have been filed and a contact name.
 - g. Complainant's signature and date.
 - h. If the complainant is unable to write a complaint, GRTA Civil Rights Officer will assist the complainant. If requested by complainant, OCR will provide a

language or sign interpreter.

- i. The complaint may be sent or faxed to the following address:

**GRTA Civil Rights Officer
Georgia Regional Transportation Authority
245 Peachtree Center Ave
Atlanta, GA 30341
(404) 463-2430
(770) 334-5264 (fax)**

The complaint may be sent via email to: gfranklin@grta.org

- j. Complainants have the right to complain directly to the appropriate federal agency however, they must do so within one-hundred eighty (180) calendar days of the last alleged incident.
4. GRTA Civil Rights Officer will begin an investigation within fifteen (15) working days of receipt of a complaint.
 5. GRTA Civil Rights Officer will contact the complainant in writing no later than thirty (30) working days after receipt of complaint for additional information, if needed to investigate the complaint. If the complainant fails to provide the requested information in a timely basis and may administratively close the complaint.
 6. GRTA Civil Rights Officer will complete the investigation within ninety (90) days of receipt of the complaint. A written investigation report will be prepared by the investigator. The report shall include a summary description of the incident, findings, and recommendations for disposition.
 7. The GRTA Civil Rights Officer will review the report. A closing letter and exit interview will be provided to the complainant. The respondent will also receive a copy of the closing letter. Each will have five (5) working days from receipt of the report to respond. If either party responds negatively or has additional information to provide, an informal meeting will be arranged by the Civil Rights Officer. If neither party responds, the complaint will be closed.
 8. The investigation report with recommendations and corrective actions taken will be forwarded to the appropriate federal agency, the complainant, and the respondent.
 9. GRTA Civil Rights Officer will advise complainants of their appeal rights to the appropriate federal agency.

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Georgia Regional Transportation Authority

Title VI Complaint Form

Title VI of the Civil Rights Act of 1964 states "No person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance." Two Executive Orders extend Title VI protections to Environmental Justice, which also protects persons of low income, and Limited English Proficiency (LEP).

Please provide the following information in order to process your complaint. Assistance is available upon request. Complete this form and mail or deliver to: Georgia Regional Transportation Authority, 245 Peachtree Center Ave, NE Suite 900, Atlanta GA 30303. Alternatively it can be faxed to (770) 334-5264 or emailed to gfranklin@grta.org.

1. Complainant's Name: _____
2. Address: _____
3. City : _____ State: _____ Zip Code: _____
4. Telephone No. (Home): _____ (Business): _____
5. Person discriminated against (if other than complainant)

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

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

- Race/Color Sex
- National Origin Disability
- Low Income Elderly
- Limited English Proficiency

Date of incident resulting in discrimination: _____

Describe the discrimination. What happened and who was responsible? For additional space, attach additional sheets of paper or use back of form.

1. Did you file this complaint with another federal, state, or local agency, or with a federal or state court? (Check appropriate space) Yes No

If answer is yes, check each agency complaint was filed with:

Federal Agency _____ Federal Court _____ State Agency _____

State Court _____ Local Agency _____ Other _____

1. Provide contact person information for the agency you also filed the complaint with:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Date Filed: _____

1. Sign the complaint in space below. Attach any documents you believe supports your complaint.

Complainant