



Regional Planning Commission
New Orleans, Slidell, Mandeville Covington, Hammond Ponchatoula Urbanized areas
ADA Complaint Form

Act of 1990 (ADA) forbids discrimination against individuals with disabilities. These laws require federal aid recipients and other government entities to take affirmative steps to reasonably accommodate the disabled and ensure that their needs are equitably represented.

If you feel that your ADA protection has been violated, you may file a complaint with the MPO's ADA Coordinator. The following information is necessary to assist us in processing your complaint. Should you require any assistance in completing this form, please let us know.

1. Complainants' Name: _____

Street Address: _____

City, State and Zip Code: _____

Telephone Number: _____

2. Person discriminated against or denied access (if someone other than the complainant)

Name _____

Address _____

City, State and Zip Code _____

3. When and where did the alleged discrimination take place? Include name of agency, department or program you believe discriminated against you. Explain what happened and whom you believe was responsible. Use the back of this form if additional space is required.

4. List the names and contact information of persons who may have knowledge of the alleged discrimination

Name and Contact Information: _____

Name and Contact Information: _____

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

Yes _____ No _____

If yes, check all that apply:

_____ Federal Agency _____ State Agency _____ Local Agency

_____ Federal Court _____ State Court _____ Local Court

6. Please provide information of a contact person at the agency/court where the complaint was filed.

Name: _____

Address: _____

City, State and Zip Code: _____

Telephone Number: _____

Please sign below. You may attach any written materials or other information that you think is relevant to your complaint.

Complainant's Signature: _____

Date: _____

Hand Deliver or Mail this ADA Complaint Form to:

Nik Richard
ADA Coordinator
Regional Planning Commission
10 Veterans Blvd.
New Orleans, LA 70124