



Let's go!

The Complaint Procedure

If you believe that you have received discriminatory treatment by **TRANSPORT CENTRAL** on the basis of race, color or national origin, you have the right to file a complaint with the **TRANSPORT CENTRAL Mobility Manager**.

Methods of filing a complaint:

Complete the Complaint Form, and send it to:

Rafah Templeton
Transport Central
258 Highland Street
Plymouth NH 03264

Verbal complaints are accepted and transcribed by **the Mobility Manager**. To make a verbal complaint, call 603-254-5261 and ask for **Rafah Templeton**.

TRANSPORT CENTRAL investigates complaints received no more than **sixty days after** the alleged incident. **TRANSPORT CENTRAL** will process complaints that are complete. Once the complaint is received, **TRANSPORT CENTRAL** will review it and the complainant will receive an acknowledgement letter informing them whether the complaint will be investigated by **TRANSPORT CENTRAL**.

TRANSPORT CENTRAL has up to **thirty days** to investigate the complaint. If more information is needed to resolve the case, **TRANSPORT CENTRAL** may contact the complainant. The complainant has thirty days from the date of the letter to send requested information to the investigator assigned to the case.

If **TRANSPORT CENTRAL's** investigator is not contacted by the complainant or does not receive the additional Information within thirty days, **TRANSPORT CENTRAL** can administratively close the case. A case can be administratively closed also if the complainant no longer wishes to pursue their case.

All complaints will be forwarded to DOT.

After the investigator reviews the complaint, one of two letters will be issued to the complainant: a closure letter or a letter of finding (LOF). A closure letter summarizes the allegations and states that, there was not a Title VI violation and that the case will be closed.

A LOF 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 against the decision, she/he has ten days after the date of the letter or the LOF to do so.

A person may also file a complaint directly with the Federal Transit Administration, at:

Federal Transit Administration
Office of Civil Rights
1200 New Jersey Avenue SE
Washington, DC 20590



TITLE VI COMPLAINT FORM

Section I:

Name: _____ Address: _____
 Primary Phone: _____ Secondary Phone: _____ Email: _____

Accessible Format Requirements? TDD Large Print Audio Tape Other

Section II:

*Are you filing this complaint on your own behalf? Yes No

*If you answered "yes" to this question, go to **Section III**.

In 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. Yes No

Section III:

I believe the discrimination I experienced was based on Race Color Nationality

Date of Alleged Discrimination (mm/dd/yyyy) _____

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 you (if know) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form.

Section IV:

Have you previously filed a Title VI complaint with this agency? Yes No Date _____

Section V:

Have you filed this complaint with any other Federal, State or Local Agency, or with any Federal/State Court?

 Yes No Date _____

If yes, check all that apply:

_____ State Agency _____ Federal Agency _____ Local Agency
_____ State Court _____ Federal Court

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

Agency: _____
Name: _____ Title: _____
Telephone: _____ Address: _____

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 relevant to your complaint.

Signature and date required below

Signature: Date: _____

Please submit this form in person at the address below, or mail this form to:

Transport Central
Rafah Templeton
Mobility Manager
258 Highalnd St. / PO Box 855
Plymouth NH 03264