East Bay Paratransit

1750 Broadway Oakland, CA 94612

AC Transit and BART, who operate East Bay Paratransit (EBP), are committed to ensuring no person is excluded from participation in, or denied the benefits of its services on the basis of race, color or national origin as protected by Title VI of the Civil Rights Act of 1964, (Title VI). If you believe you have been subjected to discrimination by East Bay Paratransit under Title VI, you may file a written complaint or call the paratransit offices. Title VI complaints should be filed as close to the date of the alleged discrimination as possible, but no later than 180 days.

The following information is necessary to assist us in processing your complaints. The completed form must be returned to: **East Bay Paratransit, 1750 Broadway, Oakland, CA 94612.** You may also file a complaint over the phone by dialing (510) 446-2006 or dial 711 for the California Relay Service.

Your Name:	Your Phone: ()
Street Address:	
City, State, Zip:	Alternate Phone: ()
,,	,
E-mail Address:	
Person discriminated against (if other than yourself)	
. cross and an anguines (in carrot and an year com)	
Street Address, City, State and Zip:	
on out Addition, Only, State and Zip.	

Which of the following best describes the reason you think the alleged discrimination took place? (Circle One)

- Race
- Color
- National Origin (Limited English Proficiency

Please describe the alleged discrimination incident in the space provided. Give the names and title of any East Bay Paratransit personnel that may have been involved. Explain what happened and who you believe was responsible. If you prefer, attach a letter.	
 Have you filed a complaint with any othe If so, please list the agency contacted ar 	ŭ , <u> </u>
Agency:	Contact Name:
Street Address:	Phone:
City:	State, Zip:
I affirm I have read the above complaint and it i and belief:	s true to the best of my knowledge, information
Signature of individual making the complaint	Date
Date received by East Bay Paratransit:	