

METROPOLITAN TRANSIT AUTHORITY OF BLACK HAWK COUNTY 1515 BLACK HAWK ST., WATERLOO, IOWA 50702 PHONE (319) 234-5714

Title VI Complaint Process

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

A Title VI complaint form can be downloaded at www.mettransit.org or by calling 319-234-5714.

(TTY/TDD 800-735-2942). If the complainant is unable to write a complaint, a representative may file on his or her behalf, or MET Transit staff will provide assistance. Complaints must be filed within 180 calendar days of the alleged incident.

- 1. MET will contact the complainant within 10 business days of receipt of complaint. Any requested information must be received by MET within 5 days of request*.
- 2. MET 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. MET 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. A written investigation report will be prepared, including a summary description of the incident, investigative findings, and recommended corrective action.
- 4. 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.
- 5. MET will forward a copy of the investigation report to the appropriate federal agency, if required.

*MET 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 time frame, the complaint may be closed.

All the information involved with this process will be kept confidential.



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TITLE VI COMPLAINT FORM

Section I:							
Name:							
Address:							
Telephone (Home/Cell):	Telephor	ne (Work)):				
Email:			<u></u>				
Do you require an accessible format?	Large Print TTY/TDD		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.							
If not, please supply the name and relationsh	nip of the person	for whom	you are filinç	g:			
Have you obtained permission from this person?			Yes	No			
Please explain why you are filing for this person:							
Section III:							
I believe the discrimination I experienced was based on (check all that apply):							
[] Race [] Color [] National Origin							
Date of Alleged Discrimination (Month, Day, Year):							
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 against you (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form.							
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Section IV					
Have you previously filed a Title VI complaint with MET?		Yes	No		
Contact name:	Telephone number:				
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 written materials or other inform Your signature and date are required below:		to your cor	nplaint.		
Signature	Da	ate			

MET Transit operates without regard to race, color, or national origin. If you need assistance completing this form, contact:

MET Transit at: 319-234-5714

Language assistance is also available.

For TDD/TYY communications please contact:
Iowa Telecommunications Relay Service at 800-735-2942
or email info@mettransit.org

Please submit this form in person or by mail to:

MET Transit 1515 Black Hawk St Waterloo, IA. 50702