



RICHMOND INTERNATIONAL AIRPORT®

ADA DISCRIMINATION COMPLAINT

If you believe that you or another have been subjected to discrimination on the basis of disability in the provisions of services, activities, programs, or benefits by the Capital Region Airport Commission (the "Commission"), you may complete and submit this form to the Commission's ADA Coordinator. Please be advised that the Commission's Personnel Manual governs employment-related complaints of disability discrimination. If you have any questions or need alternative means to submit a complaint due to a disability, please contact:

Russell L. Peaden, C.M.
Director Real Estate & Facilities and ADA Coordinator
Capital Region Airport Commission
1 Richard E. Byrd Terminal Drive, Suite C
Richmond International Airport, VA 23250
Tel: (804) 226-8520
Fax: (804) 625-2610
TTY: (804) 226-1437
Email: RPeaden@flyrichmond.com

SECTION 1

Complainant Information:

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone (day): _____ (evening): _____

Email: _____

Preferred Method of Contact: _____

Person Completing Form (If other than the complainant):

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone (day): _____ (evening): _____

Email: _____

Preferred Method of Contact: _____

SECTION 2

Have efforts been made to resolve this complaint with the Commission previously? Yes No

- If yes, what was the outcome?

Has a complaint related to the alleged discrimination that is the subject of this complaint been filed by the complainant or his/her designee with any other Federal, State, or local civil rights agency or court?

Yes No

- If yes, with which agency(ies) and/or court(s)? Date filed?

- Who is the contact person?

SECTION 3

When and where did the alleged discrimination occur?
