

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 Captial 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:

Preferred Method of Contact: _

Street Address:		
Dity:	State:	Zip Code:
Phone (day):	(evening):	
Email:		
Preferred Method of Conta	act:	
Person Completing Forn	n (If other than the complainant):	
lame:		
Street Address:		
	State:	Zip Code:
Sity:	Olate	
	ctate: (evening):	

lave e	fforts been made to resolve this complaint with the Commission previously? $\ \square$ Yes $\ \square$ No
•	If yes, what was the outcome?
 	
	
las a d compla	complaint related to the alleged discrimination that is the subject of this complaint been filed by the inant or his/her designee with any other Federal, State, or local civil rights agency or court?
	Yes
•	If yes, with which agency(ies) and/or court(s)? Date filed?
•	Who is the contact person?
SECTION	<u>ON 3</u>
When a	and where did the alleged discrimination occur?

Were the	y any witnesses	to the alleged	discrimination?	Ye	es 🗌 No	
				and at the form		
• It	yes, please pro	ovide the withes	sses' names and	contact informa	tion?	

<u>AFFIRMATION</u>
I affirm that the above complaint is true and accurate to the best of my knowledge, information, and belief.
 DATE:

Capital Region Airport Commission, 1 Richard E. Byrd Terminal Drive, Suite C, Richmond International Airport, VA 23250, or by fax to (804) 625-2610.

NOTE: Please be advised that the Commission is obligated to comply with the Virginia Freedom of Information Act. Furnishing of the requested information is voluntary, except that the failure to provide such information may result in the Commission being unable to process your complaint.