

TARTA'S REASONABLE MODIFICATION APPEAL FORM

In determining whether to grant a requested modification, the Toledo Area Regional Transit Authority (TARTA) will be guided by the provisions of the Americans with Disabilities Act (ADA) as amended and the United States Department of Transportation (DOT) regulations in conjunction with the guidance provided in Appendix E of Title 49 CFR Part 37.

Name of individual requesting modification: _____

Name of passenger wishing to utilize modification: _____

Address of passenger who needs modification:

Street _____

City _____ State _____ Zip Code _____

Phone# (Primary) _____ Phone# (Secondary) _____

Date modification requested: _____ Date modification denied: _____

Reason for appeal:

This form may be dropped off in person or mailed to TARPS on 130 Knapp St., Toledo, OH 43604; or completed online at www.tarta.com.

FOR OFFICE USE ONLY

Date Received _____

Date Eligibility Established _____

Sent for Evaluation _____

Request Approved/Denied _____

Response Issued _____

Notification sent _____