



ADA Complaint Form

Burlington Stage Lines, LTD (dba Burlington Trailways) is committed to ensuring that our implementation of public transportation services is fully compliant with the American Disabilities Act. Any person who believes there may be either a(n): 1) **ACCESSIBILITY ISSUE** (e.g., physical barriers) or 2) **DISCRIMINATION BASED ON DISABILITY** may file a signed, written ADA complaint with Burlington Trailways.

Please mail or deliver this form to: Burlington Trailways, 906 Broadway, West Burlington, Iowa 52655

Section 1: Basic Information of Complainant

PERSON SUBMITTING COMPLAINANT INFORMATION
Name: _____

COMPLAINANT'S INFORMATION (only if different than
the person submitting the complaint)

Address: _____

Name: _____

City/State/Zip: _____

Address: _____

Telephone Number: _____

City/State/Zip: _____

Email Address: _____

Telephone Number: _____

Email Address: _____

Section 2: Incident Details

ACCESSIBILITY COMPLAINT

DISCRIMINATION BASED ON DISABILITY COMPLAINT

1) Date, if any, when accessibility issue occurred?

1) Date of alleged discrimination based on disability?

2) Location of Accessibility Issue:

Bus Station?

Bus Stop?

Bus Route or Number?

Other?

3) Describe in detail the incident below in SECTION 3.

2) Have you filed this complaint with any other federal, state or local agency; or with any federal or state court?

NO? _____ YES? _____

3) If yes, please provide the contact information for the agency/court where the complaint was filed.

Agency/Court Name _____

Address _____

Telephone Number _____

4) If yes, please provide the applicable complaint number, if known.

5) Describe in detail the incident below in SECTION 3.

SECTION 3: EVENT DETAILS

ACCESSIBILITY ISSUE: If there is an accessibility issue, please explain how, when, where, and why you believe Burlington Trailways is not accessible to persons with disabilities. You may attach additional pages if additional space is required. You may also attach any written materials or other information that you think is relevant to your complaint.

DISCRIMINATION BASED ON DISABILITY: If there is alleged discrimination based on disability, please explain what happened and whom you believe was responsible. Provide all details, pertinent facts and circumstances surrounding the alleged discrimination that will help Burlington Trailways investigate your complaint. Specific details include: dates, times, route numbers, bus numbers and locations. You may attach additional pages if additional space is required. You may also attach any written materials or other information that you think is relevant to your complaint.

SECTION 4: SIGNATURE

Complainant's Signature: _____ Date: _____