Instructions: To Submit a Title VI complaint to City of Loveland Transit, please print and complete the following form, sign and return to: City of Loveland, Title VI Coordinator, 500 East Third Street, Loveland, CO 80537 or email to TitleSix@cityofloveland.org. For questions or a full copy of City of Loveland Transit’s Title VI policy and complaint procedure, please submit a written request to the above address or visit www.cityofloveland.org/COLT.

Section I

Name: ____________________________________________
Address: ____________________________________________

Phone numbers:
Home ____________________________________________
Work ____________________________________________
E-mail ____________________________________________

Accessible Format Requirements?

Large Print: ☐ Audio tape: ☐ 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 relationship of the person for whom you are complaining: ____________________________________________

Please explain why you have filed for a third party. ____________________________________________

Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party. Yes ☐ No ☐
**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.

**Section IV**

Have you previously filed a Title VI complaint with this agency? Yes ☐ No ☐

**Section V**

Have you filed this complaint with any other Federal, State or local agency or with any Federal or State court? Yes ☐ No ☐

☐ Federal Agency ________________________________ ☐ State Agency ________________________________

☐ Federal Court ________________________________ ☐ Local Agency ________________________________

☐ State Court ________________________________

Please provide information about a contact person at the agency/court where the complaint was filed.

Name: __________________________________________

Title: __________________________________________

Agency: ________________________________________

Address: ______________________________________

Phone: _________________________________________

*On separate sheets, please describe your complaint.* You should include specific details such as names, dates, times, route numbers, witnesses, and any other information that would assist us in our investigation of your allegations. Please also provide any other documentation that is relevant to this complaint.

Signature _______________________________ Date ______________

*[Note - We cannot accept your complaint without a signature.]*

Please mail your completed form to:
City of Loveland
Attention: Title VI Coordinator
500 East Third Street
Loveland, CO 80537