CITY OF MARGATE DIVISION OF SENIOR SERVICES & TRANSPORTATION MARIANNE CHRISTIAN DIRECTOR



9001 WINCHESTER AVE MARGATE, NJ 08402 PHONE: (609) 822-2605 FAX: (609) 822-3171

# Michael Becker Mayor

Americans with Disabilities Act Complaint Form

City of Margate is committed to ensuring that no person is denied access to its services, programs, or activities on the basis of their disabilities, as provided by title 11 of the Americans with Disabilities Act of 1990 ("ADA"). ADA complaints must be filed within 180 days from the date of the alleged incident.

The following information is necessary to assist us in processing your complaint. If you require any assistance in completing this form, or if you would like to make a verbal complaint, please contact the City of Margate Senior Services & Transportation at (609)822-2605.

Complainant; Phone: Street Address; City, State, Zip Code Alt Phone: Person Preparing Complaint (if different from Complainant): Street Address, City, State, Zip Code

Date of Incident:

Please describe the alleged discriminatory incident, including the location(s), if applicable. Provide the names and titles of "Agency Name' employee's involved, if available

Description of incident continued:

Have you filed a complaint with any other federal, state; or local agencies? Yes/No (Circle One). If so, list agency/agencies and contact information below:

## Agency Contact Name:

Street Address, City, State, Zip Code Phone: \_\_\_\_\_

Agency Contact Name: \_\_\_\_\_

I affirm that I have read the above charge and that it is true to the best of my knowledge, information, and belief.

Complainant's Signature Date

Print or Type Name of Complainant

Date Received: \_\_\_\_\_

Received By: \_\_\_\_\_

### · Services & Transportation

largate Division of Senior Services provides services to our seniors & disabled citizen through the Atlantic County Para-Transit am.

- \* Doctor Appointments
- Medical Treatments
- Grocery Shopping
- Nutrition Sites (include DSS Center)
- VA Hospital
- Recreation Trips

vivision of Senior Services works towards-enhancing the quality of life for older Americans & individuals with Disabilities who are ents of the City of Margate.

ory Councils (Aging& Disabled) advocate & assist in the full inclusion & fair representation of residents who are sixty years of age er & residents of any age that have disabilities.

/1 Non Discrimination Policy

- \* Title VI Non Discrimination Policy Complaint Form {English}
- \* Formulario de QueJasTftulo VI Poliza No Discrimination (Espanola)
- \* Title VI Non Discrimination Policy Complaint Form (Arabic)

To make an ADA Complaint or If you require information in alternative format

Call 609-822-2605

Or write to

Margate City

9101 Winchester Ave

Margate NJ 08402

ADA Commitment &

**Compliance Policy** 

ADA Complaint Form

ADA Reasonable Modification Policy

# **Contact Us**

#### **City of Margate**

Marianne Christian Director 9001 Winchester Ave Margate NJ 08402

Phone: (609)822-2605

# Staff Directory

Monday-Friday 9:00am-4:00pm

In this Department

More Information Locations

Document Center - New & Notices Other -Related Pages - Forms & Applications

