

TITLE VI POLICY ATTACHMENT B2

**HOUSATONIC VALLEY
METROPOLITAN PLANNING ORGANIZATION**

Providing transportation planning for Greater Danbury, CT including
Bethel, Bridgewater, Brookfield, Danbury, New Fairfield, New Milford,
Newtown, Redding, Ridgefield and Sherman

166 Whisconier Road, Brookfield, CT 06804
203-312-1073 – hvceo.org – director@hvceo.org

*-- For those who need auxiliary aids to attend, or information
on how to file a Title VI Civil Rights complaint, contact 203-312-1073
-- If additional information is needed in another language, contact 203-312-1073
-- Si se necesita informacion adicional en otro idioma, comuniquese con 203-312-1073
-- Se a informacao adicional e necessaria em outra idioma, entre em contato com 203-312-1073*

**TITLE VI
COMPLAINT FORM**

Submit this form to HVMPO within 180 days of the alleged occurrence
or 180 days from when the alleged occurrence became known.

Complainants Name: _____

Street Address: _____

City/State/Zip: _____

Phone: _____

Were you discriminated against because of:

Race, Color, Ethnicity

National Origin

Limited English

Low Income

Age

Disability

Other Reasons

Date(s) of the Incident:

Please provide the location of the alleged discrimination, the name(s) of the individual(s) who allegedly discriminated against you.

Please provide the names, addresses and telephone numbers of any witnesses.

Explain as clearly as possible what happened and how you were discriminated against. If more space is needed please use the back of the form.

Have you filed this complaint with any other federal, state, or local agency, or with any federal or state court? Yes No

Note that complaints may also be filed with the CT DOT Office of Contract Compliance, Debra Goss, Title VI Coordinator, 2800 Berlin Turnpike, Newington, CT 06111.

If yes as to additional filings, check all that apply: Federal Agency/ Federal Court/
 State Agency/ State Court/ Local Agency

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

Name _____

Address _____

City, State and Zip Code _____

Telephone Number _____

Please sign and date below. You may attach any written materials or other information that you think is relevant to your complaint.

Signature: _____

Date: _____

Submit this complaint to:
Jonathan Chew, Title VI Coordinator
Housatonic Valley Metropolitan Planning Organization
162 Whisconier Road
Brookfield, CT 06804
Phone 203-775-6256
Fax 203-740-9167
Email director@hvceo.org