

# DEPARTMENT OF PUBLIC HEALTH AMERICANS WITH DISABILITIES ACT (ADA) COMPLAINT FORM



This form is designed to collect information needed to resolve complaints regarding alleged violations of the Americans with Disabilities Act.
Person completing form ( $\it check one$ ): $\Box$ Complainant $\Box$ Authorized Representative
Complainant Information
Name:
Address:
Telephone No.: ()Email:
<u>Authorized Representative Information</u> (If Applicable)
Name of Authorized Representative (if any):
Relationship to Complainant:
Telephone No: ()Email:
ALLEGED VIOLATIONS
Please provide sufficient detail to make your complaint clear (attach additional pages if necessary).
Date/Time of Occurrence:
Details (e.g., location, people involved):
REQUESTED ACTION
What actions do you request the County take?
Signature: Date:

### Instructions

## **OPTION 1**

You may mail or email your complaint(s) to Public Health ADA Compliance Coordinator:

# **ADA Compliance Coordinator**

5555 Ferguson Drive, Suite 3033 Commerce, CA 90022 Telephone: (844) 914-1006

Email: <u>DPH-ADA@ph.lacounty.gov</u>

- You may request an informal meeting with the Public Health ADA Compliance Coordinator to answer any questions.
- Public Health will acknowledge receipt of your complaint in writing within five (5) workdays from the date the complaint was filed.

# **OPTION 2**

Instead of using option 1, you may choose to mail or email your complaint(s) to the CEO, Disability Civil Rights Section at:

Chief Executive Office
Disability Civil Rights Section
500 West Temple Street, Room 754
Los Angeles, California 90012

Telephone: (213) 202-6944 TTY: (855) 872-0443

Email: Adavis@ceo.lacounty.gov

The CEO will work with you directly to respond to your complaint.

### Please Note:

- Using this informal complaint procedure is not a requirement nor does it prevent you from filing a complaint with the appropriate enforcement agency.
- Any retaliation, coercion, intimidation, threat, interference, or harassment for filing
  of a complaint is prohibited and should be reported immediately to the Public
  Health ADA Compliance Coordinator: (844) 914-1006 or to the County's Chief
  Executive Office (CEO), Disability Civil Rights Section: (213) 202-6944.

This Form and Related Materials Are Available in Alternate Formats and Languages, Upon Request