

Title VI Complaint Procedures and Form

This document outlines the Title VI complaint procedures for any person who believes they have been discriminated against on the basis of race, color, or national origin by ECCTA. It does not deny the complainant the right to file formal complaints with the California Department of Transportation, the Secretary of the U.S. Department of Transportation, Equal Employment Opportunity Commission (EEOC), Federal Highway Administration (FHWA), Federal Transit Administration (FTA), or to seek private counsel for complaints alleging discrimination, intimidation, or retaliation of any kind that is prohibited by law.

Title VI of the Civil Rights Act of 1964 requires that no person in the United States shall, on the grounds of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.

1. Filing Complaint

Any person who believes that they have been subjected to discrimination based on race, color, or national origin by ECCTA may file a Title VI complaint. Federal and State law requires complaints be filed within one-hundred eighty (180) calendar days of the last alleged incident.

- a. Complainants have the right to complain directly to the appropriate federal agency, however they must do so within one-hundred eighty (180) calendar days of the last alleged incident. A person may file a complaint directly with the Federal Transit Administration:
Federal Transit Administration Office of Civil Rights
Attention: Complaint Team, East Building, 5th Floor-TCR
1200 New Jersey Avenue SE
Washington, DC 20590
- b. To file a written complaint with ECCTA, the complainant may download the Title VI Complaint Form from ECCTA's website (www.TriDeltaTransit.com) or request the Title VI Complaint Form from ECCTA's Customer Service Department or Compliance Manager by calling 1-925-754-6622. Complaints may also be filed with ECCTA's Customer Service Department over the phone at 1-925-754-6622 or in person at ECCTA's Administration Office at 801 Wilbur Avenue, Antioch, CA.
- c. The complainant may also submit a written statement that contains all of the information identified in Section c (1) through (7).

The complaint will include the following information:

1. Name, address, and telephone number of the complainant.
2. The basis of the complaint i.e., race, color, or national origin.
3. The date or dates on which the alleged discriminatory event or events occurred.
4. The nature of the incident that led the complainant to feel discrimination was a factor.

5. Names, addresses, and telephone numbers of persons who may have knowledge of the event.
6. Other agencies or courts where complaint may have been filed and a contact name.
7. Complainant's signature (optional) and date.

If the complainant is unable to write a complaint, ECCTA staff will assist the complainant. If requested by complainant, ECCTA staff will provide a language or sign interpreter.

The complaint may be sent or faxed to the following address:

Eastern Contra Costa Transit Authority
Compliance Manager
801 Wilbur Avenue
Antioch, CA 94509
(925) 754-6622
(925) 757-2530 (fax)

Or emailed to CivilRights@eccta.org

2. Reviewing Complaint

- a. Upon receipt of a potential Title VI complaint, the complaint is investigated, then the Compliance Manager or designee will review the information to determine if it is covered under Title VI.

3. Following Up on Complaint

- a. Upon review of the complaint, the Compliance Manager or designee will discuss findings and/or recommendations for resolution with ECCTA management.
- b. The Compliance Manager or designee will send a letter to the complainant stating the outcome of the investigation, the right to appeal, and appeal process no later than sixty (60) calendar days after the date ECCTA received the complaint. If more time is required, the complainant will be notified of the estimated time-frame for completing the review.

4. Submitting Appeal

- a. A complainant can appeal the decision by submitting an appeal in writing stating the reason(s) for the appeal. The written appeal is to be submitted to:
Eastern Contra Costa Transit Authority
Chief Executive Officer
801 Wilbur Avenue
Antioch, CA 94509

ECCTA's Chief Executive Officer (CEO), or designee, shall promptly consider the appeal. Consideration of the appeal will be based on the written appeal and accompanying

documentation and with the discretion of the CEO or designee, may include a meeting with the appealing party. ECCTA's CEO or designee shall within a reasonable time frame, but not to exceed sixty (60) calendar days from receipt of the appeal by ECCTA, issue a written decision to the appealing party. The decision by the CEO or designee shall constitute the final administrative determination by ECCTA.

If information is needed in another language, please contact 1-925-754-6622.

Si necesita información en español, llame al 1- 925-754-6622.

如果需要中文信息, 请致电 1-925-754-6622.

Kung kailangan ng impormasyon sa Tagalog, mangyaring tumawag sa 1-925-754-6622.

Nếu cần thông tin bằng tiếng Việt, vui lòng gọi 1-925-754-6622.



Eastern Contra Costa Transit Authority
Title VI Complaint Form

Title VI of the Civil Rights Act of 1946 states, "No person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance."

Please provide the following information in order to process your complaint. Assistance is available upon request. Complete this form and mail or deliver to:

Eastern Contra Costa Transit Authority
Compliance Manager
801 Wilbur Avenue
Antioch, CA 94509

Alternatively, it can be faxed to 1-925-757-2530 or emailed to CivilRights@eccta.org

Complainant's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number (Home): _____ (Business): _____

Person discriminated against (if other than complainant)

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Which of the following best describes the reason you believe the discrimination took place?

(Check all that apply):

- ___ Race
___ Color
___ National Origin

What date did the alleged discrimination take place? _____

Describe the alleged discrimination in as much detail as possible. Explain 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. Please include the route number and direction of travel, the time the incident occurred, and the bus number, if applicable. For additional space, attach additional sheets of paper or use the back of this form.

Four horizontal lines for providing detailed description of the incident.

Did you file this complaint with another federal, state, or local agency; or with a federal or state court?
(Check appropriate space) _____ Yes _____ No

If the answer is yes, check each agency that your complaint was filed with:

Federal Agency _____ Federal Court _____ State Agency _____

State Court _____ Local Agency _____ Other _____

Provide the contact person information for the agency (or agencies) you filed the complaint with:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____

Date Filed: _____

Sign the complaint in the space below. Attach any documents you believe support your complaint.

(Signature-optional)

(Date)

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