



REASONABLE MODIFICATION COMPLAINT FORM

Version: 1
Effective: 07/13/15

Mail to: RGRTA
Legal Affairs Department

1372 East Main Street
Rochester NY 14609

If assistance is needed in another language, please call 585.288.1700
Si necesita información en otro idioma, por favor llame al 585-288-1700.

Section 1

Name: _____

Address: _____

Telephone (Home): _____ Telephone (Work): _____

Electronic Mail Address: _____

RTS Service Provider RTS Monroe RTS Genesee RTS Ontario RTS Seneca
 RTS Access RTS Livingston RTS Orleans RTS Wayne RTS Wyoming

Accessible Format Requirements? Large Print Audio Tape
 TDD Other _____

Section 2

Are you filing this complaint on your own behalf? Yes No

If you answer YES, go to Section 3.

If you answer NO, complete Section 2.

Supply the name of the third party and your relationship to the third party.

Name: _____ Relationship: _____

Why you are filing a complaint for a third party? _____

Did you obtain the permission of the aggrieved party to file on his/her behalf? Yes No



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Section 3

Date you requested the modification (Month, Day, Year): _____

How did you make the request? _____

Explain why the modification is necessary for you to use the RTS service. If you need more space, please attach a separate sheet.

Identify the period of time for which you need the modification.

Signature and Date Required Below

Signature: _____ Date: _____

Please submit this form in person at the address below, or mail this form to
RGRTA Legal Affairs Department
1372 East Main Street
Rochester NY 14609