

PAT

**PORT ARTHUR
TRANSIT**

**Title VI Complaint Form
City of Port Arthur Transit Department
Office of Civil Rights**

PAT is committed to ensuring that no person is excluded from participation in or denied the benefits of its services on the basis of race, color, or national origin, as provided by Title VI of Civil Rights Act of 1964, as amended. Title VI complaints must be filed within 180 days from the date of the alleged discrimination.

The following information is necessary to assist us in processing your complaint. If you require any assistance in completing this form, please contact Title VI Coordinator by calling **(409) 983-8248**. The completed form must be returned to:

**PAT Office of Civil Rights
Title VI Coordinator
444 4th Street, Annex Building Suite 201
Port Arthur, TX 77640**

Your Name:	Phone:
Street Address:	Alternate Phone: _____
	City, State & Zip Code:
Person(s) discriminated against (if someone other than complainant):	
Name(s):	
Street Address, City, State & Zip Code:	

Date of Incident: _____

Time (approximate): _____

Which of the following best describes the reason of the alleged discrimination? (Circle One)

- Race
- Color
- National Origin (Limited English Proficiency)
- Refused Access to Ride (Why)?