

## Appendix D: Title VI Sample Notice to Public

### Notifying the Public of Rights Under Title VI

#### The Rome Transit Department and the Metropolitan Planning Organization of Rome and Floyd County

The Rome Transit Department operates their programs and services without regard to race, color, and national origin in accordance with Title VI of the Civil Rights Act. Any person who believes she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with The Rome Transit Department.

For more information on The Rome Transit Department's civil rights program, and the procedures to file a complaint, contact 706-236-4523; email [cgriffin@romea.us](mailto:cgriffin@romea.us); or visit our administrative office at 168 North Avenue, Rome, Georgia 30162. You may also contact the Metropolitan Planning Department at 706-236-4675, email [bwood@romea.us](mailto:bwood@romea.us); or visit the planning department at 607 Broad Street, Rome, Georgia 30162. For more information, visit [www.romefloyd.com](http://www.romefloyd.com).

If information is needed in another language, contact 706-236-4523.

You may also file your complaint directly with the FTA at: Federal Transit Administration Office, 230 Peachtree Street NW, Suite 800, Atlanta, GA 30303 Attention: Regional Civil Rights Officer

The Rome and Floyd County Metropolitan Planning Organization fully complies with Title VI of the Civil Rights Act of 1964 and its related statutes and regulations in all programs and activities.

As set forth in the Americans with Disabilities Act of 1992, the Rome City Government and the Floyd County Government do not discriminate on the basis of disability, and will assist citizens with special needs given proper notice (seven working days). As set forth in Title VI of the Civil Rights Act of 1964, 42 U.S.C. 2000d et seq., 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 otherwise subjected to discrimination under any program or activity that receives Federal financial assistance. To that end the City or Rome and Floyd County will make a reasonable effort to find translators, given proper notice (seven working days).

For more information or to obtain a Discrimination Complaint Form, please call (706)-236-4675 or e-mail [bwood@romea.us](mailto:bwood@romea.us).

**Appendix E: Title VI Complaint Form**



**ROME - FLOYD COUNTY METROPOLITAN PLANNING ORGANIZATION (MPO)  
TITLE VI COMPLAINT FORM**

**Section I:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone (home): \_\_\_\_\_ Telephone (work): \_\_\_\_\_

Electronic Mail Address: \_\_\_\_\_

Accessible Format Requirements:

Large Print: \_\_\_\_\_

TDD: \_\_\_\_\_

Audio Tape: \_\_\_\_\_

Other: \_\_\_\_\_

**Section II:**

Are you filing this complaint on your own behalf? Yes\* \_\_\_\_\_ No: \_\_\_\_\_

\*If you answered "yes" to this question, go to Section III.

If not, please supply the name and relationship of the person for whom you are complaining

\_\_\_\_\_

Please explain why you have filed third

party \_\_\_\_\_

Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party. Yes \_\_\_\_\_ No \_\_\_\_\_

**Section III:**

I believe the discrimination I experienced was based on (check all that apply);

Race \_\_\_\_\_ Color \_\_\_\_\_ National Origin \_\_\_\_\_

Date of Alleged Discrimination (Month, Day, Year): \_\_\_\_\_

Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of

any witnesses. If more space is needed, please use the back of this form.

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**Section IV:**

Have you previously filed a Title VI complaint with this agency? Yes \_\_\_\_ No \_\_\_\_

**Section V:**

Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State Court? Yes \_\_\_\_ No \_\_\_\_

If Yes, check all that apply:

Federal Agency \_\_\_\_ State Agency \_\_\_\_ Federal Court \_\_\_\_

Local Agency \_\_\_\_ State Court \_\_\_\_

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

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

**Section VI:**

Name of agency complaint is against: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone number: \_\_\_\_\_

You may attach any written materials of other information that you think is relevant to your complaint.

Signature and date required below

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please submit this form in person at the address below, or mail this form to:

Courtney Griffin  
Transit Director  
City of Rome  
168 North Avenue  
Rome, Georgia 30162

OR

Brice Wood  
Planning Director  
Rome and Floyd County  
607 Broad Street  
Rome, Georgia 30161

Mailing Address: P.O. Box 1433  
Rome, Georgia 30162