City of Tucson Americans with Disabilities Act (ADA) Accessibility Complaint Form

Please help the City identify barriers to accessibility in its facilities, programs/services/activities, and/or streets/traffic for persons with disabilities such as:

♦ Inside Facility: restrooms, doors, counters, paths of travel, elevators, and drinking fountains;

♦ Outside Facility: curb ramps, slopes, curb cuts, sidewalks, parking, paths of travel, and handrails;

♦ Streets/Traffic: right-of-way, pedestrian crossing signals, pedestrian crosswalks;

♦ Programs/Services/Activities: service animals, classes, meetings, voting, payments and KIDCO

Name of COT Facility, Program/Services/Activities and/or Street/Traffic:

__________________________________________________

Specific Location: (address)

_________________________________________________________________

Description of Problem:

________________________________________________________________________________

__________________________________________

Your Name: _______________________________ Phone: _________________________

Address: ________________________________________________________________

Date: _________________________

Print and email this document as an attachment to ADA1@tucsonaz.gov or mail to the address below.

Office of Equal Opportunity Programs
P.O. Box 27210 • Tucson, Arizona 85726-7210
(520) 791-4593 • Fax (520) 791-5140 • TTY (520) 791-2639