TOWN OF UNION ADA GRIEVANCE FORM FOR FACILITIES WITHIN THE PUBLIC RIGHT-OF-WAY

This form is for requesting that the Town of Union review an existing public pedestrian facility as it relates to ADA compliance or to analyze the need for a new ADA compliant public pedestrian facility within the Town of Union's public right-of-way.

Contact Information:	<u>Date</u> :
Name:	
Address:	
Phone Number:	
Email Address:	_
Location and description of ADA grievance (please be as detailed as possible):	
Suggested solution:	
The Town of Union's ADA Coordinator is the Commissioner of calling the Town of Union's Engineering Department at 607-7	
Please submit this form to the following address: Town of Union	
Commissioner of Public Works	
3111 E. Main Street	
Endicott, NY 13760	
This form may also be brought to the Public Works Departme	nt at the above address.
For Office Use Only:	
Date of Response: Action Taken:	