



TITLE II (ADA) COMPLAINT FORM

City of Northglenn

Title II Americans with Disabilities Act (ADA) Complaint Form

Please fill out this form completely, sign, date, and return it to:

Paula Jensen
ADA Coordinator
City of Northglenn
11701 Community Center Drive
Northglenn, CO 80233
Phone: 303.450.8877
Fax: 303.254.7610
Email: pjensen@northglenn.org

Your Name (Complainant): _____

Address: _____

Phone number where you can be reached between 8 a.m. – 5 p.m.: _____

Is this a TDD number? Yes _____ No _____

Email: _____

Reason for grievance/complaint, or why you feel you have been discriminated against. Please be specific and provide as much information as possible including date, time, location, names of people present, etc.

What do you think should be done?

Your Signature: _____ Date: _____

If you need assistance completing this form or require a different format or other accommodation, please contact Paula Jensen at 303.303.450.8877 or pjensen@northglenn.org.

Please allow up to 45 days following the ADA Coordinator's receipt of the complaint **to investigate and respond to your complaint.**