

OWEN COUNTY PUBLIC TRANSIT REASONABLE MODIFICATION REQUEST FORM

In determining whether to grant a requested modification, Owen County Public Transit (OCPT) will be guided by the provisions of the Americans with Disabilities Act (ADA) as amended and the United States Department of Transportation (DOT) regulations in conjunction with the guidance provided in Appendix E of Title 49 CFR Part 37.

Name of individual requesting modification _____

Name of individual wishing to utilize modification _____

Address of passenger who needs modification _____

City _____ State _____ Zip Code _____

Telephone Number (Home) _____ Telephone Number (Cell) _____

Describe any modifications to OCPT's policies, practices or procedures in order for you (an individual with disabilities) to access the services (attach additional sheets if necessary):

Please indicate the location (or address) where you will need the requested modification

Describe the problem you face that prevents you from utilizing OCPT's on-demand Services

This form may be completed online and emailed to ptadm@owencountyky.us; dropped off in person at 100 N. Thomas St., Owenton, KY 40359; or mailed to Public Transit Administrator, 100 N. Thomas St., Owenton, KY 40359.

For Office Use Only: _____ Date Received _____ Date Eligibility Established

_____ Sent for evaluation _____ Request Approved/Denied

_____ Response Issued _____ Notification sent