

ADA AND PARATRANSIT RIDER GUIDE,
POLICIES AND PROCEDURES

TWIN CITIES AREA TRANSPORTATION AUTHORITY
275 EAST WALL STREET
BENTON HARBOR, MICHIGAN 49022

CONTACT PERSON: ADA Coordinator

Email: office@tcatabus.org

Please write "Attn: ADA Coordinator"
in the email subject line

Office: 269-927-2268

Dispatch: 269-927-4461

Fax: 269-927-2310

Board Approval Date _____

Board Chair Signature _____

If you or someone you know needs a copy of this document in an alternative accessible format, please call (269) 927-2268.

Alternative options include, but are not limited to:

- Large Print (Font size needed _____)
- Audio
- Alternative Language (e.g. spanish)

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INTRODUCTION

The Twin Cities Area Transportation Authority (TCATA) is a public transit agency serving the Benton Harbor-Saint Joseph-Fairplain Michigan urbanized area. We provide fixed routes, demand response, and complementary ADA Paratransit services. The Authority was started in 1974 and is supported through Federal and State grants, farebox revenue, and local share provided by a property tax millage paid by the people of Benton Harbor. TCATA receives funding as a small urban agency serving urbanized areas greater than 50,000 people through the Federal Transit Administration program 49 USC 5307.

The provision of transportation services to people with disabilities is governed by the Americans with Disabilities Act of 1990. (49 CFR 37) The ADA requires, in part, that *“No entity shall discriminate against an individual with a disability in connection with the provision of transportation service.”*

Any public transit authority operating a fixed route transportation service that is required to provide complementary paratransit service is required to develop a paratransit plan. (49 CFR 37.135)

ADDITIONAL ONLINE INFORMATION

TCATA maintains an online resource with extensive information about our ADA and paratransit services including paratransit rider application, service area map, and policies and procedures information.

It can be found at: <https://www.mywaythere.org/paratransit.asp>

SERVICE AREA AND DESCRIPTION OF FIXED ROUTES

Under the ADA, TCATA shall provide complementary paratransit service to origins and destinations within corridors with a width of three-fourths of a mile on each side of each fixed route. The corridor shall include an area with a three-fourths of a mile radius at the ends of each fixed route. Service is origin to destination, or door-to-door. Regular TCATA demand response service is curb to curb.

TCATA currently operates three fixed routes that operate six days a week, excluding Sunday. The Red Line is a one-way loop route that begins at TCATA headquarters at 275 E Wall St Benton Harbor and travels to St. Joseph, Lakeland Hospital, Meijers Stevensville, and returns to TCATA via I-94 and Benton Harbor city streets. The Blue Line is a one-way loop that starts at TCATA and winds through Benton Harbor streets to the shopping area in Benton Township with stops that include Intercare, Walmart, Meijers, and River Terrace apartments. The Yellow Route is a linear route that travels in both directions from TCATA with stops at Benton Manor, KPEP, the Boys and Girls Club, and Intercare.

TCATA provides ADA complementary paratransit service to individuals needing to be picked up at origins within $\frac{3}{4}$ of a mile from these fixed routes.

(See appendix A for a map of fixed routes and ADA service territory.)

ELIGIBILITY

Eligibility for the TCATA paratransit program is defined as follows:

- 1) Any individual with a disability who is unable, as the result of a physical or mental impairment (including a vision impairment), and without the assistance of another individual (except the operator of a wheelchair lift or other boarding assistance device), for example a personal care attendant (PCA), to board, ride, or disembark from any vehicle on the system which is readily accessible to and usable individuals with disabilities.
- 2) Any individual with a disability who needs the assistance of a wheelchair lift or other boarding assistance device and is able, with such assistance, to board, ride and disembark from any vehicle which is readily accessible to and usable by individuals with disabilities if the

individual wants to travel on a route on the system during the hours of operation of the system at a time, or within a reasonable period of such time, when such a vehicle is not being used to provide designated public transportation on the route.

- 3) Any individual with a disability who has a specific impairment-related condition which prevents such an individual from traveling to a boarding location or from a disembarking location on such a system.

Individuals accompanying an ADA paratransit eligible individual shall be provided service as follows:

- 1) One other individual accompanying the ADA paratransit eligible individual shall be provided service –
 - i) If the ADA paratransit eligible individual is traveling with a personal care attendant (PCA), the entity shall provide service to one other individual in addition to the attendant who is accompanying the eligible individual.
 - ii) A family member or friend is regarded as a person accompanying the eligible individual, and not as a personal care attendant, unless the family member or friend registered is acting in the capacity of a personal care attendant.
- 2) Additional individuals accompanying the ADA paratransit eligible individual shall be provided service, if space is available for them on the paratransit vehicle carrying the ADA paratransit eligible individual and that transportation of the additional individuals will not result in a denial of service to ADA paratransit eligible individuals.
- 3) In order to be considered as “accompanying” the eligible individual for purposes of this paragraph (f), the other individual(s) shall have the same origin and destination as the eligible individual.

While TCATA does ask whether an applicant requires or sometimes travels with a PCA, this information will not impact eligibility decisions. Even when applicants seeking ADA paratransit eligibility indicate that they always need a PCA for travel, TCATA will not require such passengers to have a PCA to travel on any of TCATA vehicles (including ADA paratransit).

To determine eligibility, TCATA asks you to designate the health care or human services professional that is most familiar with your “ability to travel”. The person you designate could be a doctor, physical or occupational therapist, or an agency professional who is very familiar with your mobility. TCATA may contact that person to verify your mobility limitations. If, by a date 21 days following the submission of a complete application, TCATA has not decided of eligibility, the applicant shall be treated as eligible and provided service until and unless TCATA denies the application. Certification will expire after a five-year period. Two months prior to the end of that five-year period, TCATA will notify you and provide you with a Certification Renewal form.

(See appendix B or website for ADA Paratransit Application Form)

APPEALS PROCESS

When TCATA receives your completed application, it will be reviewed for eligibility. You will be notified within 21 days if your application is approved, approved with conditions, or denied. If your application is approved with conditions or not approved, your notification will state the reasons for the decision. You have a right to appeal your eligibility determination and have an opportunity to provide additional information for reconsideration. Eligibility appeals shall not be handled by someone who made the original decision.

Appeals must be made within 90 days of receiving notification of an application being approved with conditions or not approved. If no decision is made within 30 days of completing the appeal process, the applicant shall be treated as eligible and provided service until and unless TCATA denies the application.

FARES POLICY

All customers on the paratransit service are required to pay the exact fare to receive service. The exact fare per trip can be a cash one-way fare, punch card, token, or prepaid by an agency.

In accordance with Federal Regulations (49 C.F.R. Section 37.121), the fare

collected from ADA eligible passengers for trips on complementary paratransit service will be no more than twice the fare that would be charged to an individual paying full fare for a trip of similar length, at a similar time of day, on TCATA's fixed route system, exclusive of discounts. Trips on fixed route buses for ADA eligible passengers shall not exceed half the fare that would be charged on TCATA's fixed route system. Personal care attendants ride free. Companions pay the same fare as the eligible paratransit rider.

(See appendix F for fare structure and service hours.)

HOURS OF SERVICE POLICY

The ADA requires that complementary paratransit service should be available throughout the same hours and days as TCATA regular fixed route service.

TCATA provides ADA paratransit service during the same hours and days as the fixed route service. Paratransit service will also follow any abbreviated schedule as defined by the fixed service schedule of holidays or emergency closings. The service hours will expand or contract if the fixed route days or hours of service are changed.

(See appendix F or website for service hours.)

RESERVATIONS

The ADA requires that TCATA schedule service at least one day in advance (the day before, not 24-hours), negotiate a time no more than one hour before or after the requested time, and that the dispatch office is open within our normal business hours. Depending on availability, TCATA may be able to provide rides scheduled on the same day as the requested service.

The TCATA dispatch office will operate at a minimum within the normal business hours of the agency. These hours are 6 a.m. to 6 p.m. Monday through Friday. Customers can call up to fourteen days in advance to reserve a ride. The normal dispatch number for TCATA is (269) 927-4461.

NO SHOW POLICY

The ADA allows public transit agencies to establish an administrative process to suspend, for a reasonable period, the provision of complementary paratransit service to ADA eligible individuals who establish a pattern or practice of missing scheduled trips.

These following guidelines are hereby established concerning no shows:

- Trip cancellations that take place 1 hour or less from the scheduled pick-up time will be considered “no-shows”
- A trip will be considered a “no-show” if the driver assigned to the passenger’s trip waits longer than 5 minutes without the passenger appearing for their trip.

Repeated failure to comply by a passenger may result in suspension of services. TCATA staff will reach out to a passenger after 3 no-shows within a 30 day period to inquire about the no-shows and see if any reasonable adjustments or accommodations need to be made to further assist the passenger in avoiding additional no-shows.

- After a pattern of four (4) no-shows within 30 days, passengers may be suspended from paratransit service for the duration of one week.
- 10 no-shows within a period of 90 days will result in a 2 week suspension.
- 22 or more no-shows within a period of 180 days will result in a 30 day suspension.
- No-shows are cumulative throughout the calendar year and resets on January 1st of the following year.
- If a passenger is suspended, TCATA will notify them about the suspension in writing.

Notification will include the specific incidents that led to the suspension (including the details and dates of the no-shows) as well as the proposed duration of the suspension. The passenger in question will also be given instructions on how to appeal the decision. If an appeal is filed then the suspension will be “stayed” until, and unless, the outcome of the appeal upholds the initial finding.

To avoid “No-Shows” and help keep TCATA paratransit rides moving smoothly and on time, passengers should bear in mind the following:

- Passengers should be prepared to board the vehicle up to five (5) minutes prior to and thirty (30) minutes after the scheduled pickup time.
- Drivers are not responsible for the preparation of passengers for trips but will assist passengers by safely operating wheelchair lifts and other accessibility equipment installed on TCATA vehicles.

Passengers will not be penalized for “no-shows” caused by reasons outside of their control including, but not limited to, sudden changes in the passenger’s medical status, family emergencies, operational problems, etc.

SUBSCRIPTION POLICY

The subscription service may not absorb more than 50% of the number of trips in any given time of day, unless there is excess non-subscription capacity.

There are no trip purpose restrictions or prioritization considered in applying for subscription service. Subscriptions are reviewed on a regular basis to maximize productivity and efficiency.

Subscriptions may be canceled on designated holidays or emergency closings. Passengers who make the same trip on the same day and at the same time at least once a week for thirty days may request a subscription service.

VISITOR POLICY

The ADA requires public transit agencies that provide complementary paratransit service to make the service available to visitors. For purposes of this section, a visitor is defined as an individual with disabilities who does not reside in the jurisdiction served by TCATA.

TCATA will treat as eligible for its complementary paratransit service all visitors who present documentation that they are ADA paratransit eligible in the

jurisdiction in which they reside. With respect to individuals who do not present such documentation, TCATA may require documentation of the individual's place of residence and, if the individual's disability is not apparent, of his or her disability. As is required by Federal ADA regulations, this documentation will be accepted directly from the individual and TCATA will not require that the documentation be provided directly from the individual's home transit agency. TCATA provides paratransit service to individuals with disabilities who qualify as visitors. TCATA accepts certification by such individuals that they are unable to use fixed route transit.

TCATA will add the visitor into their paratransit system to be completed the same day, or not more than one (1) day later. Service will be made available to a visitor required by this section for any combination of 21 days during any 365-day period beginning with the visitor's first use of the service during such 365-day period. TCATA will not require a visitor to apply for or receive eligibility certification from TCATA before receiving complementary paratransit service.

Riders certified as ADA complementary paratransit eligible who regularly travel from their home jurisdiction to a neighboring jurisdiction (e.g., commuting to work) that also provides ADA complementary paratransit may need to obtain ADA complementary paratransit eligibility certification from TCATA's jurisdiction to complete their trips. TCATA will take reasonable steps to coordinate trips with directly neighboring service areas which are beyond a ¼-mile radius of each of its fixed routes.

SERVICE QUALITY

TCATA will be guided in its provision of ADA Paratransit service *by 49 CFR Part 37 - TRANSPORTATION SERVICES FOR INDIVIDUALS WITH DISABILITIES (ADA) and FTA C 4710.1 Americans with Disabilities Act: Guidance.*

Paratransit means comparable transportation service required by the ADA for individuals with disabilities who are unable to use fixed route transportation systems.

The ADA requires that each public entity operating a fixed route system shall provide paratransit or other special service to individuals with disabilities that is comparable to the level of service provided to individuals without disabilities who use the fixed route system.

SERVICE ANIMALS

Service animals are welcome in any TCATA building or vehicle in accordance with the Americans with Disabilities Act.

“Service animals” means any guide dog, signal dog, or other animal individually trained to work or perform tasks for an individual with a disability, including, but not limited to, guiding individuals with impaired vision, alerting individuals with impaired hearing to intruders or sounds, providing minimal protection or rescue work, pulling a wheelchair, seizure monitoring, or fetching dropped items.

Service animals must be under control by the person with disabilities at all times and must not occupy a seat and must either sit on the floor, or on the person's lap. If the animal is not under the control of the owner or if the animal poses a direct threat to the health or safety of others, the operator may require the animal to leave the bus. Animals that serve as support/comfort animals or dogs are not legally considered service animals and will not be permitted in TCATA buildings or vehicles.

Certifications or other physical proof of the animal’s service is not required, but TCATA staff may ask one or both of the following questions:

1. Is the animal a service animal required because of a disability?
2. What work or task has the animal been individually trained to perform?

Additional information on Service Animals in Michigan can be found at <https://www.michigan.gov/mdcr/divisions/ada-compliance/service-animals>
(link last updated August, 2024)

REASONABLE MODIFICATIONS

Public agencies that provide designated public transportation shall make reasonable modifications in policies, practices, or procedures when the modifications are necessary to avoid discrimination on the basis of disability or to provide program accessibility to their services. This requirement applies to the means public entities use to meet their obligations under all provisions of the law.

In choosing among alternatives for meeting nondiscrimination and accessibility requirements with respect to new, altered, or existing facilities, or designated or specified transportation services, TCATA shall give priority to those methods that offer services, programs, and activities to qualified individuals with disabilities in the most integrated setting appropriate to the needs of individuals with disabilities.

Requests for modification of TCATA's policies and practices may be denied only on one or more of the following grounds:

1. Granting the request would fundamentally alter the nature of the agency's services, programs, or activities.
2. Granting the request would create a direct threat to the health or safety of others.
3. Without the requested modification, the individual with a disability is still able to fully use the entity's services, programs, or activities for their intended purpose.

Basic process requirements that must be met are:

1. Information on the reasonable modification process must be readily available to the public and must be readily accessible
2. Advance notice can be required if feasible. Flexibility is also needed to handle requests that are only practicable on the spot.
3. Individuals requesting modifications are not required to use the term "reasonable modification".

What information should my reasonable modification request include?

1. Your full name, address, telephone number, and e-mail address where we can reach you during the day and evening.
2. If the request is being made by someone else on behalf of the rider, please provide the advocate's name, relationship to the rider, and telephone number.
3. A description of the rider's disability or disabilities.
4. The service policy or procedure that may need to be modified to allow the rider full access to the transit services provided.
5. How the current service policy or program prevents the rider from using transit service.
6. A description of the specific modification to the current service policy or procedure that you are requesting.
7. Copies (not originals) of any required documentation of disability.

To guide you in providing the requested information, you may use the attached ADA reasonable modification request form. (Attachment D)

How do I request reasonable modification by email?

Include all of the information listed above, either in the body of the email or in an attachment. Attach relevant documents to your email. Send your request to office@tcatabus.org (Attn: ADA Coordinator). You will receive a reply email confirming that your request has been received within 48 business hours. Please keep a copy of your request and the reply email for your records. If you do not receive a reply email, please contact TCATA at 269-927-2268.

What happens after my request is received?

After the request is received, TCATA will provide a written response of approval or denial within seven days of its receipt.

How can I find out the status of my request?

We will review each request carefully. If you have not heard from us within seven days, please contact us at 269-927-2268.

ADA COMPLAINTS

File a written complaint with TCATA as soon as possible, but no later than 180 calendar days after the alleged violation.

If TCATA receives a complaint regarding discrimination against an individual under the ADA, we will respond within 30-days of receiving the complaint and will work to resolve the issue with the complainant as quickly as possible. This may involve legal assistance and/or mediation.

- If the complaint does not have enough information to permit TCATA to make a decision, or if an extended factual inquiry is necessary to determine the facts of the matter, TCATA may provide an interim response to the complainant, within 30 days of receiving the complaint. The interim response will state the reasons for needing additional time and inform the complainant of when TCATA expects to issue a determination.
- If necessary, TCATA will meet with the complainant to discuss the complaint and possible resolutions within 15 calendar days of receiving a complaint.
- Within 30 days of the complaint and/or 15 calendar days of the meeting, TCATA will respond in writing or another accessible format. The response will explain the position of TCATA and offer options for substantive resolution of the complaint.
- If the response by TCATA does not resolve the issue, the complainant and/or designee may appeal the decision within 15 calendar days to the Federal Transit Administration Office for Civil Rights.

We will document the entire process, including the resolution, and notify the Michigan Department of Transportation (MDOT) Office of Passenger Transportation (OPT). We will keep the complaint and all related documents on file for at least five years. Records will be made available to MDOT OPT and to the Federal Transit Administration (FTA) upon request.

What information should my ADA complaint include?

Your written ADA complaint should provide the following information:

1. Your full name, address, telephone number, and e-mail address where we can reach you during the day and evening.

2. The name of the party discriminated against, if known and if different from the complainant.
3. The name of the person you believe committed the discrimination, if known.
4. A brief description of the alleged discrimination and the date(s) it occurred.
5. Other information you feel is necessary to support your complaint, including copies (not originals) of relevant documents.
6. Information about how to communicate with you effectively. Please let us know if you want written communications in a specific format (e.g., large print, Braille, electronic documents).

To guide you in providing the requested information, you may use the attached ADA complaint form. (APPENDIX E)

How do I file an ADA complaint by email?

Include all of the information listed above, either in the body of the email or in an attachment. Attach relevant documents to your email. Send your complaint to TCATA office@tcatabus.org. Please write "Attn: ADA Coordinator" in the subject line. You will receive an email reply confirming that your complaint has been received within 48 business hours. Please keep a copy of your complaint and the reply email for your records. If you do not receive a reply email, please contact TCATA at 269-927-2268.

What happens after my complaint is received?

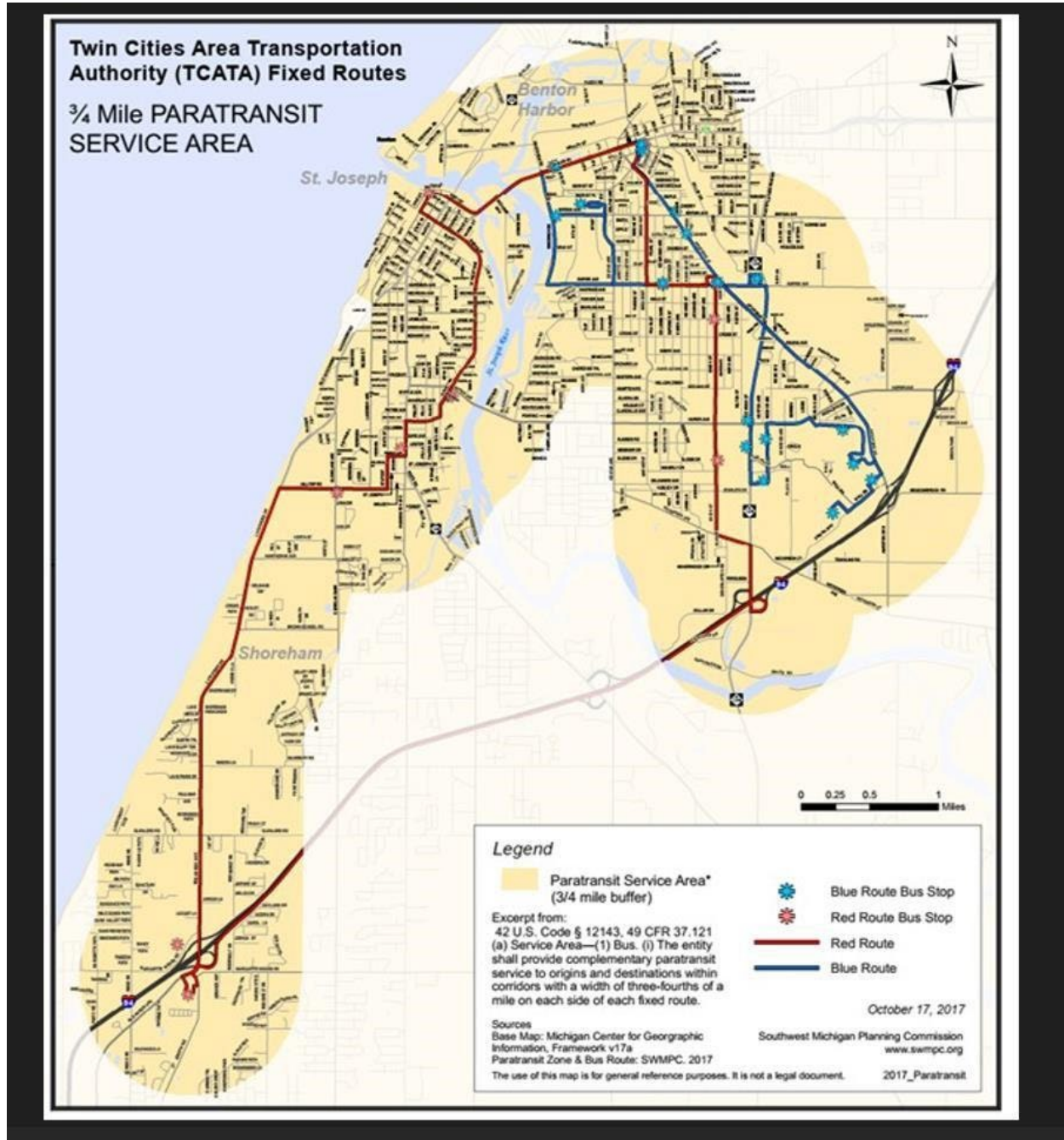
After the complaint is received, we will inform you of our action, which may include:

1. Contacting you for additional information or copies of relevant documents.
2. Working with you to resolve the issue.
3. Referring to your complaint for possible resolution through the U.S. Department of Justice ADA Mediation Program.
4. Referring your complaint to another federal agency with responsibility for the types of issues you have raised.

How can I find out the status of my complaint?

We will review each complaint carefully. If you have not heard from us within 21 days, please contact us at 269-927-2268.

APPENDIX A



APPENDIX B

ADA Complementary Paratransit Application Form

**TWIN CITIES AREA TRANSPORTATION
AUTHORITY**

**275 E. WALL ST.
BENTON HARBOR, MI 49022**

ADA Complementary Paratransit Application

Name _____ Birth Date ___/___/___

Home Phone _____ Cell Phone _____

Address _____

Number Street Apt #

City State Zip Code

Mailing Address (if different than above)

Number Street Apt #

City State Zip Code

E-Mail Address _____

FOR OFFICE USE ONLY			
Alternate Format	N T B L P E	Certification	C U
Applic. Rec'd.	_____	Mob Device	_____
Determination Due	_____	Expiration	_____
Med. Ref. Req.	_____	Letter Sent	_____
Med. Ref. Rec'd.	_____	Jurisdiction	_____
ID #	_____		
Disability Type	_____	Disability Description	_____ PCA?
Yes	___	No	___

Do you manage your own affairs and deal with your own mail?

Yes No

If no, to whom should important correspondence be mailed?

Name _____ **Relationship** _____

Address _____
Number Street Apt #

City State Zip Code

Phone (____) _____

Emergency Contact: This is a person who is authorized to make day-to-day and/or emergency decisions regarding service for the applicant. (In most cases this will be a provider or family member)

Name _____ **Relationship** _____

Home Phone (____) _____ **Cell Phone** (____) _____

Introductions and Instructions

Twin Cities Area Transportation Authority (TCATA) is **your** public transit system. Our mission is to provide the community with public transportation services that are dependable, convenient, safe, cost effective, and **accessible for all**.

TCATA provides three transportation services: Demand Response (door- to-door), Fixed Route bus service, and a paratransit service for individuals who are unable to use the Fixed Route bus system some or all the time (6am-10pm).

To determine whether you are eligible for TCATA paratransit service, we need to know if there is any part of the regular accessible bus system you cannot use due to your disability. Eligibility is not based on the disability itself, but on how it prevents you from using the regularly accessible bus routes. It is possible for you to be eligible for some trips, but not others. If this is the case, you will be paratransit eligible *with conditions*, the conditions being the circumstances preventing your use of the accessible bus system.

ADA paratransit eligible individuals fall into one of the following definitions:

- Any individual with a disability who is unable, as the result of a physical or mental health or psychiatric disability (including a visual disability), to board, ride, or disembark from a fixed-route vehicle on TCATA.
- Any individual with a disability who needs the assistance of a wheelchair lift or other boarding assistance device and is able, with such assistance, to board, ride, or disembark from any vehicle, and one is not available on the route.
- Any individual with a disability who has a specific disability-related condition which prevents the individual from traveling to a boarding location or from a disembarking location served by the fixed-route system.

This application will help TCATA determine whether you qualify for paratransit service according to the criteria noted above. Return your completed application to: **Twin Cities Area Transportation Authority, 275 E. Wall St., Benton Harbor, MI 49022**; you will need to apply postage. Completed applications can also be **faxed** to TCATA at **269-927-2310**.

(3) The enclosed Physician or Agency Professional Verification form asks you to designate the health care or human service professional that is most familiar with your "ability to travel." The person you designate could be a doctor, physical or occupational therapist, human service professional (such as a social worker), who is very familiar with your mobility. TCATA may contact that person to verify your mobility limitations.

If approved, your certification will be for a 3-year period. Two months prior to the end of that 3-year period, you will be notified and provided with a Certification Renewal form.

When TCATA receives your **completed** application, it will be reviewed for eligibility. You will receive written notification within 21 days if your application is approved, approved with conditions, or denied. If your application is approved with conditions or not approved, your notification will state the reasons for the decision. You have a right to appeal your eligibility determination and have an opportunity to provide additional information for reconsideration. Eligibility appeals shall not be handled by someone who made the original decision.

Appeals must be made within 90 days of receiving notification of an application being approved with conditions or not approved. If no decision is made within 30 days of completing the appeal process, the applicant shall be treated as eligible and provided service until and unless TCATA denies the application. You will receive additional details about the appeal process with your letter.

If you have any questions about this form or need it provided in a different format, please call TCATA at (269) 927-2268.

The information obtained in this certification process will only be used by TCATA for the provision of ADA complementary paratransit service. Information will only be shared with other transit providers to facilitate your travel in their operating areas, should you so desire. This information will not be provided to any other person or agency and will be kept strictly confidential.

Please be sure to complete all parts of this application; applications cannot be processed unless all questions are completed. Be sure to complete the front cover with the applicant's personal information.

Applicant Questionnaire

Do you need this application and future written information provided in a different format?

_____ Yes _____ No

If Yes, specify below or call **(269) 927-2268**.

_____ Large Print (Font size needed _____) _____

Other Language (e.g. Spanish)

Audio

Other _____

Email _____

If you do not need a different application format, please continue to the next section

Contact Information

Name _____ Birth Date ____ / ____ / ____
mm/dd/yyyy

Home Phone (____) _____ Cell Phone (____) _____

Address _____
Number Street Apt #

City State Zip Code

Mailing Address (if different than above)

Number Street Apt #

City State Zip Code

E-Mail Address _____

Do you manage your own affairs and deal with your own mail? Yes No If

no, to whom should important correspondence be mailed?

Name _____ Relationship _____

Address _____

Number

Street

Apt #

_____ City

_____ State

_____ Zip Code

Phone (_____) _____

Emergency Contact: This is a person who is authorized to make day-to-day and/or emergency decisions regarding service for the applicant. (In most cases this will be a provider or family member)

Name _____ Relationship _____

Home Phone (_____) _____ Cell Phone (_____) _____

FIXED-ROUTE SERVICE *Please answer the following questions:*

Do you currently use Fixed Route TCATA buses?

- Yes (*Checking yes will not disqualify you from receiving paratransit services*).
- No (*If no, answer next question*):

If No, which of the following limit your ability to use fixed-route buses (check all that apply):

- Physical disability
- Visual disability
- Developmental disability
- Mental health/psychiatric disability
- Other (indicate)___

What would help you ride the fixed-route buses? (Check all that apply):

- Knowing more about fixed-route buses.
- Learning to travel in the community.
- A lift or ramp (accessible bus).
- Communications aid
- Other (indicate)___

Can you follow written or oral instructions to use the fixed-route buses? (check all that apply):

- Yes, always
- Yes,
- sometimes
- No
- I do not know, because I have never tried it.
- I get too confused and might get lost.

I probably could with training.

Other (indicate) _

Do you know where to get on/off the bus? (Check all that apply):

Yes, always

Yes, sometimes

No

I get confused or cannot remember where I am going.

I do not know where my bus stop is located.

I can if the driver calls out the stops.

I probably could with training.

Other (indicate) _____

Does the weather ever keep you from using fixed-route buses?

Yes. (Tell us how the weather keeps you from using fixed-route buses):

No

I do not know.

Does any of the following keep you from using the fixed-route buses?

(Check all that apply):

There are no sidewalks (Please tell us where)

The sidewalks are not accessible or safe (Please tell us where)

My mobility aid will not fit on the lift. _____

I cannot steady myself when the lift is moving.

I do not feel secure on the lift. _____

I probably could with training.

Other (indicate) _____

Please explain as completely as possible how your disability prevents you from boarding, riding and exiting a regular fixed route bus.

How would you best describe your disability or condition as it impacts your transportation needs?

_____Permanent _____Deteriorating _____Changeable _____Temporary

If temporary, until what date: _____

Are there other effects of your disability or condition that we need to be aware of to provide you with appropriate service?

Which of these aids or equipment do you usually use to help you get where you need to go?

- | | | |
|-------------------------------------|--|--|
| <input type="checkbox"/> Cane | <input type="checkbox"/> Manual Wheelchair | <input type="checkbox"/> Personal Care Attendant |
| <input type="checkbox"/> White Cane | <input type="checkbox"/> Electric Wheelchair | <input type="checkbox"/> Power Scooter |
| <input type="checkbox"/> Crutches | <input type="checkbox"/> Walker | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Oxygen | <input type="checkbox"/> Service Animal | <input type="checkbox"/> None |

Do you need a wheelchair accessible/lift equipped vehicle? (circle one)

Yes _____ No

If you use a manual or powered wheelchair or scooter, is it more than 30 inches wide, more than 46 inches long, or does it, when in use, weigh more than 800 pounds? (circle one)

Yes No

Do you ever need the assistance of another person to be able to travel? (circle one)

Yes No Sometimes

If Yes, when do you need help?

- Getting to/from vehicle.
- Getting to the bus stop.

- Getting on or off the bus.
- Getting on or off the vehicle.
- Help while I ride the bus.
- Help to get to where I am going once, I am off the bus
- Other (indicate) _____

What is the longest distance you can walk/travel on level ground without the assistance of another person? (Example 370 feet = 1 block)

Is there any other information not covered in this application that you would like TCATA to consider when reviewing your eligibility for paratransit services?

PHYSICIAN OR AGENCY PROFESSIONAL AUTHORIZATION

Please provide the name, address, and contact information for your health care providers who can verify the information contained in this application.

Name _____

Address _____

Number

Street

Apt #

City

State

Zip Code

Phone (_____) _____ Fax Number (_____) _____

Name _____

Address _____

Number

Street

Apt #

City

State

Zip Code

Phone (_____) _____ Fax Number (_____) _____

I certify that the information I gave in this application is true and correct. Falsification of information may result in denial of service. I understand all healthcare information will be kept confidential except as needed for verification. Only the information required to provide the services I request will be disclosed to those who perform those services. I have read and agree to comply with the policies and procedures set forth by the Twin Cities Area Transportation Authority.

Applicant Signature _____ Date _____

(If Applicant is a minor or incapable of signing this application, please complete page 6

CERTIFICATION OF APPLICANT

If someone has completed this application other than the person applying for certification, that person must complete the following:

I certify that the information provided in this application is true and correct based upon my knowledge of the applicant's health condition or disability.

I certify that the information provided in this application is true and correct based upon information given to me by the applicant.

Signature _____ Date _____

Print Name _____

Daytime Phone (_____) _____

Address _____

Number

Street

Apt #

_____ City

_____ State

_____ Zip Code

Relationship to Applicant _____

Return completed application form to:

Twin Cities Area Transportation Authority

Attn: ADA Coordinator

275 E. Wall St.

Benton Harbor, MI 49022

Email: office@tcatabus.org

Please write Attn: ADA Coordinator in the subject line

If you have any questions regarding completing this application form, the process for becoming certified, or need help completing the application, please **contact TCATA's ADA Coordinator at: (269) 927-2268.**

APPENDIX C

TWIN CITIES AREA TRANSPORTATION AUTHORITY

Procedure to File a Complaint or Request Reasonable Modification Under the Americans with Disabilities Act (ADA)

If you or someone you know needs a copy of this document in an alternative accessible format, please call (269) 927-2268.

If you believe you or another person has been discriminated against under Title II and III of the American Disability Act of 1990 by Twin Cities Area Transportation Authority (TCATA) or one of our employees, you can file a complaint, or alternatively, request reasonable modification, by mail, fax, or email at:

TCATA ADA coordinator

Twin Cities Area Transportation Authority
Attn: ADA Coordinator
275 East Wall Street
Benton Harbor, Michigan 49022

Fax: 269-927-2310

Email: office@tcatabus.org (Attn: ADA Coordinator)

Take the first step: Before filing your complaint or request, contact the TCATA ADA Coordinator to discuss your concerns. They can look into the issue and try to come up with an acceptable resolution to the situation.

You may file a complaint or request a reasonable modification in writing with TCATA using the following procedures:

1. File a written complaint with TCATA as soon as possible, but no later than 180 calendar days after the alleged violation. Requests for reasonable modification may be filed at any time.
2. The written complaint or modification request should be submitted by the grievant and/or their designee.
3. Alternative means of filing complaints and requesting modifications, such as a personal interview or a tape recording, will be made available upon request.
4. The written complaint or modification request should contain the information required by the TCATA's Ada and Paratransit Rider Guide, Policies and Procedures that is available at www.mywaythere.org/ada.asp. Alternative formats and language translations for this document are available on request.
5. Explanation of approval or denial of reasonable modification requests will be made and sent to the requestor within seven calendar days of receipt.
6. If necessary, TCATA will meet with the complainant to discuss the complaint and possible resolutions within 15 calendar days of receiving a complaint.
7. Within 30 days of the complaint and/or 15 calendar days of the meeting, TCATA will respond in writing or another accessible format. The response will explain the position of TCATA and offer options for substantive resolution of the complaint.
8. If the complaint does not have enough information to permit TCATA to make a decision, or if an extended factual inquiry is necessary to determine the facts of the matter, TCATA may provide

an interim response to the complainant, within 30 days of receiving the complaint. The interim response will state the reasons for needing additional time and inform the complainant of when TCATA expects to issue a determination.

9. If the response by TCATA does not resolve the issue, the complainant and/or designee may appeal the decision within 15 calendar days to the Federal Transit Administration Office for Civil Rights.
10. All written documents in the Reasonable Modification process will be retained by TCATA for at least one year. All complaints and related documents will be held for a minimum of five (5) years.

APPENDIX D

TWIN CITIES AREA TRANSPORTATION AUTHORITY

ADA Reasonable Modification Request Form

Instructions: Please fill out this form completely, sign and mail, fax, or email to:

TCATA ADA coordinator

Twin Cities Area Transportation Authority
Attn: ADA Coordinator
275 East Wall Street
Benton Harbor, Michigan 49022

Fax: 269-927-2310

Email: office@tcatabus.org (Attn: ADA Coordinator)

Rider: _____

Street Address: _____

City, State, and Zip Code:

Telephone: Home: _____ Mobile: _____

Email address: _____

Person requesting modification (if other than the rider): _____

Address: _____

City, State and Zip Code: _____

Telephone: Home: _____ Mobile: _____

Email Address: _____

Describe the rider's disability or disabilities. _____

Describe the service policy or program that may need to be modified to allow the rider full access to the transit services provided. _____

How does the current service policy or program prevent the rider from using the transit service or program? _____

Please describe the specific modification to the current policy/procedure that you are requesting. _____

How would you like (transit agency) to respond to your request?

- In writing to the address listed above
- By email to the address listed above

If future communications regarding this request are needed in an alternate format, please indicate the appropriate format below:

- large print (font size needed: _____)
- Spanish
- Audio
- Other _____

This form can be requested in large print by calling 269-927-2268; or emailing office@tcatabus.org (Attn: ADA Coordinator).

Please send the completed form **and any required documentation of disability** to:

TCATA ADA coordinator

Twin Cities Area Transportation Authority
Attn: ADA Coordinator
275 East Wall Street
Benton Harbor, Michigan 49022

Fax: 269-927-2310

Email: office@tcatabus.org (Attn: ADA Coordinator)

Electronic versions of the completed form and scans of required documentation of disability should be sent to office@tcatabus.org. Please write "Attn: ADA Coordinator" in the subject line.

Twin Cities Area Transportation Authority (TCATA) will provide a written response to your request within seven days of its receipt. To check on the status of the request, call TCATA at 269-927-2268; or email office@tcatabus.org (Attn: ADA Coordinator).

APPENDIX E

TWIN CITIES AREA TRANSPORTATION AUTHORITY

ADA Discrimination Complaint Form

Instructions: Please fill out this form completely, sign and mail, fax, or email to:

TCATA ADA coordinator

Twin Cities Area Transportation Authority
Attn: ADA Coordinator
275 East Wall Street
Benton Harbor, Michigan 49022

Fax: 269-927-2310

Phone: 269-927-2268

Email: office@tcatabus.org (Attn: ADA Coordinator)

Complainant (Name): _____

Address: _____

City, State and Zip Code: _____

Telephone: Home: _____ Mobile: _____

Email Address: _____

Person Discriminated Against (if other than the complainant):

Address: _____

City, State and Zip Code: _____

Telephone: Home: _____ Mobile: _____

Email Address: _____

When did the discrimination occur? Date: _____

Describe the acts of discrimination, providing the name(s) where possible of the individuals who discriminated:

Please include any other information you feel is necessary to support your complaint, including copies (not originals) of relevant documents.

Do you or the person discriminated against need the response to this document in a different format?

Yes No

If yes, what Format do you need?

- large print (font size needed: _____)
- Spanish
- Audio
- Other _____

Signature: _____

Date: _____

APPENDIX F

FARE STRUCTURE AND SERVICE HOURS

SERVICE HOURS

	Fixed Route	Demand Response
Weekdays	6:00 A.M. to 10:00 P.M.	6:00 A.M to 6:00 P.M.
Weekend	8:00 A.M. to 10:00 P.M.	8:00 A.M. to 4:00 P.M.
<i>Paratransit trips are available during fixed route service but must be made at least one day in advance.</i>		

FARE STRUCTURE

	Demand Response Trips			Royalton Township		
Trip Origin		Inside the city of BH	Outside the city of BH		Inside the city of BH	Outside the city of BH
	Regular	\$2.00	\$3.00	Regular	\$4.50	\$6.00
	Senior	\$1.00	\$1.50	Senior	\$2.25	\$3.00
	Disabled	\$1.00	\$1.50	Disabled	\$2.25	\$3.00
	ADA Eligible	\$1.00	\$1.50	ADA Eligible	\$2.25	\$3.00
	Children 1-11	\$1.25	\$2.00	Children 1-11	\$2.00	\$2.50

FIXED ROUTE SERVICE

Regular	\$1.00
Seniors	.50
Disabled	.50
ADA Eligible	.50
Children 1-11	.50
Children under 1 year old ride free	