Hillsborough Transit Authority (HART) is committed to ensuring that no person is excluded from participation in or denied the benefits of its services on the basis of race, color, or national origin, as provided by Title VI of the Civil Rights Act of 1964, as amended.

Any person who believes that he or she has been subjected to discrimination under Title VI on the basis of race, color or national origin may file a Title VI complaint utilizing the below form within 180 days from the date of the alleged discrimination. Title VI complaints may be filed with HART in writing to the Civil Rights Officer at:

Sylvia Berrien, Deputy Attorney and
Title VI Officer
Hillsborough Transit Authority (HART)
1201 E. 7th Avenue
Tampa, FL 33605

HART will provide appropriate assistance to complainants who are limited in their ability to communicate in English. A more thorough statement of HART’s Title VI Program and complaint procedures can be found at www.gohart.org (bottom of home page).

| Complaint No. | __________________________ |
| Home Number | __________________________ |
| Work Number | __________________________ |
| Email Address | __________________________ |
| Address | __________________________ |
| City | __________________________ |
| Zip Code | __________________________ |

List type of discrimination (please check all that apply):

Race ( ) National Origin ( ) Color ( )
Other __________________________

Please indicate your race/color, if it is a basis of your complaint __________________________

Please describe your national origin, if it is a basis of your complaint __________________________

Location where incident occurred: __________________________

Time and date of incident: __________________________
Name/Position title of the person who allegedly subjected you to Title VI discrimination:


Briefly describe the incident (use a separate sheet, if necessary):


Did anyone else witness the incident?  Yes ( )  No ( )

List witnesses (Use a separate sheet, if necessary)

Name ________________________________
Address ________________________________
Telephone No. __________________________

Name ________________________________
Address ________________________________
Telephone No. __________________________

Have you filed a complaint about this incident with the Federal Transit Administration?  Yes ( )  No ( )  If yes, when? ________________

____________________________________
Signature

____________________________________
Date