The American's with Disabilities Act (ADA) prohibits discrimination on the basis of disability in State and local government, public accommodations, commercial facilities, transportation, and telecommunications.

This form may be used to appeal a complaint filed with the Michigan Department of Transportation for alleged violations of ADA. If you need assistance completing this form, please contact us by phone at 517-241-4424 or TTY through the Michigan Relay Center at 800-649-3777 or dial 711.

NAME
PHONE NO.
ALTERNATE PHONE NO.
ADDRESS
CITY
STATE
ZIP CODE
EMAIL ADDRESS
DATE
PREFERRED METHOD OF CONTACT
[ ] Email  [ ] Phone  [ ] Mail
DATE OF MDOT LETTER PROVIDING NOTICE OF FINDING
COMPLAINT REFERENCE NO. PROVIDED ON MDOT NOTICE LETTER
EXPLAIN THE REASON(S) FOR YOUR APPEAL. INCLUDE REASON(S) FOR DISAGREEMENT WITH MDOT FINDINGS.

SIGNATURE
DATE

If you have questions regarding the completion of this form, please contact:

Michigan Department of Transportation-Office of Business Development
ADA/504 Coordinator
425 West Ottawa Street
P.O. Box 30050
Lansing, Michigan 48933
Phone: 517-241-4424
Fax: 517-335-0945
TTY: 800-649-3777 or dial 711
Email: mdot-ada@michigan.gov