

Muskogee County Public Transit Authority

Title VI Complaint Form

Contact Name: _____

Address: _____

Phone Number: _____

Email: (Optional) _____

Date of Incident: _____

Describe how your rights were violated. What happened and who was responsible?

What Muskogee Transit employee(s) was involved in the incident? i.e. Driver, Veh Number

Where did the incident take place? Please provide location, Veh number, driver's name, time.

Names & phone numbers of any persons, if known, that Muskogee Transit may use for additional information to clarify your allegations.

You may attach any written materials or other information that you think is relevant to your complaint.

Signature and date required below

Signature

Date

Please submit this form in person at the address below, or mail this form to:

Muskogee County Public Transit Authority
P.O. Box 2973
Muskogee, OK 74402

Telephone: (918) 682-1721 Fax: (918) 683-2292 Website: www.muskogeecountytransit.org