



**Administrative Regulations
Office of the Mayor**

Title: AMERICANS DISABILITY ACT (ADA) –TITLE II
A.R. 4.17 Number: Effective Date: 10/1/2008 Page: 1 of 6
Supersedes: N/A A.R.: N/A DATED: N/A

I. PURPOSE

In accordance with the requirements of Title II of the Americans with Disabilities Act (“ADA”), the City of Richmond will not discriminate against qualified individuals with disabilities on the basis of disability in its services, programs, or activities.

II. POLICY

Effective Communication: The City of Richmond will generally, upon request, provide appropriate aids and services leading to effective communication for qualified persons with disabilities so they can participate equally in the City of Richmond programs, services, and activities, including qualified sign language interpreters, documents in Braille, and other ways of making information and communications accessible to people who have speech, hearing, or vision impairments.

Modifications to Policies and Procedures: The City of Richmond will make all reasonable accommodations/modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy all of its programs, services, and activities.

Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a program, service, or activity of the City of Richmond, should contact the Department of Human Resources ADA Coordinator at (804) 646-7050 as soon as possible, but no later than 48 hours before the scheduled event.

The ADA does not require the City of Richmond to take any action that would fundamentally alter the nature of its programs or services, or impose an undue financial or administrative burden.

Any complaints that a program, service, or activity of the City of Richmond is not accessible to persons with disabilities should be directed to the Department of Human Resources ADA Coordinator at (804) 646-7050. The City of Richmond will not place a surcharge on a particular individual with a disability or any group of individuals with disabilities to cover the cost of providing auxiliary aids/services or reasonable modifications of policy. This may include retrieving items from locations that are open to the public, but are not accessible to persons who use wheelchairs.

III. REASONABLE ACCOMMODATION PROCEDURES

Title II of the Americans with Disabilities Act requires public entities to make reasonable modifications to existing policies, practices and procedures to avoid discrimination on the basis of disability, unless to do so would fundamentally alter the nature of the program, service or activity in question.

The policy of the City of Richmond is to reasonably accommodate individuals with disabilities. Applicants must follow these steps to request a reasonable accommodation:



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STEP 1: Obtain a copy of the City of Richmond’s **REQUEST FOR REASONABLE ACCOMMODATION** form (Attachment A). Copies of the form are available online at <http://www.richmondgov.com/forms> or free of charge from 900 East Broad Street, 9th floor -Room 902, Richmond, VA 23219, or by contacting the Department of Human Resources ADA Coordinator at (804) 646-7050. Alternative means of requesting reasonable accommodation, such as personal interviews, will be made available for persons with disabilities upon request.

STEP 2: Complete the **REQUEST FOR REASONABLE ACCOMMODATION** form. If you need assistance filling out the form the City of Richmond will assist you or you may ask someone else to assist you. All of the information must be provided before the City of Richmond will begin to process the request. The City of Richmond may ask for additional information to process the request, including, in some instances, that the disabled individual, or the information provided, be examined, tested, or reviewed by experts at the City of Richmond’s expense. Failure or refusal to provide the City of Richmond with all of the information necessary to determine your eligibility for accommodation is grounds for denying the request. Any questions or requests for assistance with the procedure or grievances should be directed to the Department of Human Resources ADA Coordinator at (804) 646-7050.

STEP 3: Submit the **REQUEST FOR REASONABLE ACCOMMODATION** form with the Department of Human Resources, ADA Coordinator, 900 East Broad Street, 9th floor -Room 902, Richmond, VA 23219. Private information disclosed in the request will be kept confidential to the extent as required by law, but state and/or federal law may permit or require the City of Richmond to disclose or use the information in City conducted public hearings regarding the request, in court or administrative proceedings, by court order and in other circumstances.

VI. ADA GRIEVANCE PROCEDURE

This Grievance procedure is established to meet the requirements of the Americans with Disabilities Act of 1990 (ADA). It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provisions of services, activities, programs or benefits by the City of Richmond. Please be advised that the City of Richmond’s Personnel Rules and Administrative Regulations govern employment-related complaints of disability discrimination.

STEP 1: Obtain a copy of the City of Richmond’s **ADA DISCRIMINATION COMPLAINT** form (Attachment B). Copies of the form are available online at <http://www.richmondgov.com/forms> or by contacting the Department of Human Resources ADA Coordinator at (804) 646-7050. The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint will be made available for persons with disabilities upon request.

STEP 2: The complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than 60 calendar days after the alleged violation to the Department of Human Resources, ADA Coordinator, 900 East Broad Street, 9th floor -Room 902, Richmond, VA 23219.

STEP 3: Within 15 calendar days after receipt of the complaint, the ADA coordinator or his/her designee will meet with the complainant and/or respond in writing and where appropriate, in a format accessible to the complaint, such as print, Braille, or audiotape. The response will explain the position of the City of Richmond and offer options for substantive resolution of the complaint.

STEP 4: If the response by the ADA coordinator or designee does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision within 15 calendar days after receipt of the response to the Chief Administrative Officer or his/her designee. Within a reasonable time, the Chief Administrative Officer or his/her designee will meet with the complainant and/or respond in writing and where appropriate, in a format accessible to the complaint, such as print, Braille, or audiotape. The response will explain the position of the City of Richmond and discuss possible resolutions if appropriate.



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All written complaints received by the ADA coordinator or his/her designee, appeals to the Chief Administrative Officer or his/her designee, and responses will be retained by the City of Richmond for at least three years.

III. REGULATION UPDATE

The Office of the Mayor, Department of Human Resources and the City Attorney's Office shall be responsible for modifications to this Policy.

APPROVED:

MAYOR



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Attachment A

City of Richmond

**Title II of the Americans with Disabilities Act Section 504 of the Rehabilitation Act of 1973
Request for Reasonable Accommodation**

Section 1

Person Requesting Accommodation:

Street Address:

City, State and Zip:

Home Telephone:

Business Telephone:

Person completing form (if other than the concerned):

Street Address:

City, State and Zip:

Home Telephone:

Business Telephone:

Section 2

Accommodation Requested. *(Be as specific as possible, e.g., adaptive equipment, reader, interpreter)*

Section 3

Reason for Request. *(If accommodation is time sensitive, please explain)*

Signature:

Date:

**Submit the REQUEST FOR REASONABLE ACCOMMODATION form with the Department of Human Resources,
ADA Coordinator, 900 East Broad Street, 9th floor -Room 902, Richmond, VA 23219**



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Attachment B

**Title II of the Americans with Disabilities Act Section 504 of the Rehabilitation Act of 1973
ADA Discrimination Complaint Form**

Name of Complainant:

Street Address:

City, State and Zip:

Home Telephone:

Business Telephone:

Person completing form (if other than the complainant):

Street Address:

City, State and Zip:

Home Telephone:

Business Telephone:

City Agency or Department which you believe has discriminated

Name:

Street Address:

City, State and Zip:

Have efforts been made to resolve this complaint with the Agency or Department?

Yes No

Not Applicable

If yes, what is the outcome?

Has the complaint been filed with any other Federal, State or local civil rights agency or court?

Yes No

Not Applicable

If yes, which Agency or Court:

Contact Person:

