



**KINGS COUNTY AREA PUBLIC TRANSIT AGENCY**

610 W. 7th St. • Hanford, CA 93230 • (559) 852-2717 • www.kartbus.org

**KINGS COUNTY AREA PUBLIC TRANSIT AGENCY  
TITLE VI  
COMPLAINT FORM**

<b>Section I:</b>			
Name:			
Address:			
Telephone (Home):		Telephone (Work):	
Email Address:			
Accessible Format Requirements?	Large Print		Audio Tape
	TDD		Other
<b>Section II:</b>			
Are you filing this complaint on your own behalf?		Yes*	No
*If you answered "Yes" to this question, go to Section III			
If not, Please supply the name and relationship of the person for whom you are complaining:			
Please explain why you have filed for a third party:			
Please confirm that you have obtained the permission of the aggrieved party if you are filing on behalf of a third party.		Yes	No
<b>Section III:</b>			
I believe the discrimination I experienced was based on (check all that apply):			
<input type="checkbox"/> Race <input type="checkbox"/> Color <input type="checkbox"/> National Origin			
Date of Alleged Discrimination (Month, Day, Year): _____			
Explain as clearly as possible what happened and why you believe you are discriminated against. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known) as well as names and contact information of any witnesses. If more space is needed, please use the back of this form.			
<b>Section IV:</b>			
Have you previously filed a Title VI complaint with this agency?		Yes	No



**KCAPTA**

Kings County Area Public Transit Agency

610 W. 7th St. • Hanford, CA 93230 • (559) 852-2692 • www.kartbus.org

**KINGS COUNTY AREA PUBLIC TRANSIT AGENCY  
TITLE VI  
COMPLAINT FORM**

<b>Section V:</b>	
Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State Court?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, check all that apply:	
<input type="checkbox"/> Federal Agency: _____	
<input type="checkbox"/> Federal Court: _____	<input type="checkbox"/> State Agency: _____
<input type="checkbox"/> State Court: _____	<input type="checkbox"/> Local Agency: _____
<b>Continue on Next Page</b>	
Please provide information about a contact person at the agency/court where the complaint was filed.	
Name: _____	
Title: _____	
Agency: _____	
Address: _____	
Telephone: _____	
<b>Section VI</b>	
Name of agency complaint is against: _____	
Contact person: _____	
Title: _____	
Telephone number : _____	

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:  
Kings County Area Public Transit Agency  
Title VI Complaint  
610 W. 7<sup>th</sup> Street  
Hanford, CA 93230

**KINGS COUNTY AREA PUBLIC TRANSIT AGENCY  
TITLE VI  
COMPLAINT INSTRUCTION**

In compliance with U.S. Department of Transportation Title VI regulations (49 CFR Part 21), Kings County Area Public Transit Agency (KCAPTA) operates without regard to race, color, or national origin. Any person who believes he or she has been discriminated against by KCAPTA on the basis of race, color, or national origin may file a Title VI complaint.

A Title VI complaint form can be downloaded at <https://www.kartbus.org/title-vi-dbe/> or by calling (559) 852-2717. If the complainant is unable to write a complaint, a representative may file on his/or her behalf, or KCAPTA staff will provide assistance. Complaints must be filed within 180 calendar days of the alleged incident.

1. KCAPTA will contact the complainant within 10 business days of receipt of complaint.  
*Any requested information must be received by KCAPTA within 5 days of request*
2. KCAPTA will begin the investigation within 15 business days of receipt of complaint if the alleged discrimination is found to be a violation of Title VI regulations.
3. KCAPTA will complete the investigation within 60 calendar days of receipt of a complaint. If additional time is needed for the investigation, the complainant will be notified. A written investigation report will be prepared, including a summary of the incident, investigative findings, and recommended corrective action.
4. A closing letter will be provided to the complainant. The complainant will have 5 business days from the receipt of the closing letter to file an appeal. If no appeal is filed, the complaint will be closed.
5. KCAPTA will forward a copy of the investigation report to the appropriate federal agency, if required.

\* KCAPTA will process and investigate all complaints that meet the requirements of Title VI discrimination. If the complainant fails to provide required information within the required timeframe, the complaint may be closed.

**Complaint forms should be mailed to KCAPTA, Title VI Complaint, 610 W 7<sup>th</sup> Street, Hanford CA 93230.**

Complaints may also be filed with the Federal Transit Administration, Office of Civil Rights, East Building, 5<sup>th</sup> Floor – TCR, 1200 New Jersey Ave., SE, Washington DC 20590 or online at <https://www.transit.dot.gov/regulations-and-guidance/civil-rights-ada/fta-civil-rights-complaint-form>

If you need assistance filling out this form or need language assistance please contact KCAPTA at (559) 852-2717.