

HUNTSVILLE-MADISON COUNTY AIRPORT AUTHORITY

TITLE VI COMPLAINT FORM

Purpose: Use this form to file a complaint if you believe the Huntsville-Madison County Airport Authority has subjected you to discrimination on the basis of race, color, national origin, sex, creed, or age.

Within 15 days after receipt, this form will be forwarded to the:

**FEDERAL AVIATION ADMINISTRATION,
OFFICE OF CIVIL RIGHTS, ACR-1
800 Independence Avenue S.W.
Washington, D.C. 20591**

Instructions: Complete this form: print it, sign it, and mail or email to:

**Amy Nation, Civil Rights Coordinator
Huntsville-Madison County Airport Authority
1000 Glenn Hearn Blvd. SW
Huntsville, Alabama 35724
anation@hsvairport.org**

Complainant Name

Complainant Name	Email Address		
Address	City	State	Zip Code
Home Phone (include area code)	Business Phone (include area code)		

Person (other than Complainant) Alleging a Title VI Violation

Complainant Name	Email Address		
Address	City	State	Zip Code
Home Phone (include area code)	Business Phone (include area code)		

Airport Service, Program, Opportunity or Activity Allegedly in Violation

Date Alleged Violation Occurred (mm/dd/yyyy)	Location
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Description of Service, Program, Opportunity or Activity (if traveling, indicate Airline used)	O R	Description of Service, Benefit or Encounter (Limited English Proficiency only)
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Description of Alleged Violator (Airport, Tenant, Concessionaire, Contractor, Other)
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Description of Alleged Violation and Requested Remedy: (attach additional sheets if necessary)
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Has this case been filed with the Department of Justice or other government agency or court?
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If You Answered "Yes" to the Previous Question, Complete the Following

Agency or Court

Contact Person

Address	City	State	Zip Code
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Phone (include area code)	Date Filed (mm/dd/yyyy)
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Other Comments: (attach additional sheets if necessary)

Signature _____

Date _____