

## ADA Reasonable Modification for Transit Services Request Form

In determining whether to grant a requested modification, Lorain County Transit (LCT) will be guided by the provisions of the Americans with Disabilities Act (ADA) as amended and the United States Department of Transportation (DOT) regulations in conjunction with the guidance provided in Appendix E of Title 49 CFR Part 37 (<https://www.transit.dot.gov/regulations-and-guideance/civil-rights-ada/part-37-transportation-services-individuals-disabilities>).

Requests may be initiated by:

- Contacting LCT at 440-329-5525
- Submit request in writing to: Lorain County Transit, 226 Middle Avenue, Elyria OH 44035
- Email to [pnovak@loraincounty.us](mailto:pnovak@loraincounty.us)

Name of individual requesting modification

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Name of individual wishing to utilize modification

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address of passenger who needs modification

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ Phone (Mobile): \_\_\_\_\_

Describe any modifications to LCT's policies, practices or procedures in order for you (an individual with disabilities) to access the services

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Address where you will need the requested modification

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Describe the problem(s) you face preventing you from utilizing LCT fixed route and/or Dial-A-Ride Services

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