

3.0 Title VI Notice to the Public

FTA Circular 4702.1B, Chapter III, Paragraph 5: Title 49 CFR 21.9(d) requires recipients to provide information to the public regarding the recipient's obligations under DOT's Title VI regulations and apprise members of the public of the protections against discrimination afforded to them by Title VI.

3.1 Notice to Public

Alternative Living dba Twin Cities Pavilion/Crestview Manor will notify all residents and/or their designee of their rights under Title VI and include the notice and where it is posted in the Title VI Program. The notice must include:

- A statement that the agency operates programs without regard to race, color and national origin
- A description of the procedure's members should follow to request additional information on the grantee's nondiscrimination obligations
- A description of the procedure members should follow in order to file a discrimination complaint against the grantee

The following is **Alternative Living dba Twin Cities Pavilion/Crestview Manor's** Title VI notice to its members:

Alternative Living dba Twin Cities Pavilion/Crestview Manor operates without regard to race, color, and national origin in accordance with Title VI of the Civil Rights Act of 1964. Any person who believes she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with the **Alternative Living dba Twin Cities Pavilion/Crestview Manor**.

For more information on the **Alternative Living, Inc.** civil rights program, and the procedures to file a complaint about the transportation program, contact the Title VI Liaison, Kimberly A. Fraley, at 850-833-9165, 207 Hospital Drive, Fort Walton Beach, FL 32548, www.elder-services.org.

A complainant may file a complaint directly with the Florida Department of Transportation by filing a complaint with the District 3 Title VI Coordinator, Ian Satter, 888-638-0250.

A complainant may also file a complaint directly with Federal Transit Administration by filing a complaint with the Office of Civil Rights, Attention: Complaint Team, East Building, 5th Floor-TCR, 1200 New Jersey Ave., SE, Washington, DC 20590.

3.2 Notice Posting Locations

The Notice to members will be posted at many locations to apprise them of **Alternative Living dba Twin Cities Pavilion/Crestview Manor's** obligations under Title VI and to inform them of the protections afforded them under Title VI. At a minimum, the notice will be posted in common areas of **Alternative Living dba Twin Cities Pavilion/Crestview Manor's** facility(s) and in all vehicles.

Alternative Living dba Twin Cities Pavilion/Crestview Manor’s notice to members will be posted at the following locations:

Location Name	Address	City
Twin Cities Pavilion	1053 John Sims Parkway	Niceville
Crestview Manor	603 North Pearl Street	Crestview
Cutaway Vehicle	1053 John Sims Parkway	Niceville
Cutaway Vehicle	603 North Pearl Street	Crestview

The Title VI notice and program information will also be provided on **Alternative Living dba Twin Cities Pavilion/Crestview Manor’s** website at www.elder-services.org.

4.0 Title VI Procedures and Compliance

FTA Circular 4702.1B, Chapter III, Paragraph 6: All recipients shall develop procedures for investigating and tracking Title VI complaints filed against them and make their procedures for filing a complaint available to member of the public.

4.1 Complaint Procedure

Any person who believes he or she has been discriminated against on the basis of race, color, or national origin by Alternative Living dba Twin Cities Pavilion/Crestview Manor may file a Title VI complaint by completing and submitting the agency's Title VI Complaint Form. Complaints can also be submitted by emailing the Executive Director, Kimberly Fraley, at mail@elder-services.org. Alternative Living dba Twin Cities Pavilion/Crestview Manor investigates complaints received no more than 180 days after the alleged incident. Alternative Living dba Twin Cities Pavilion/Crestview Manor will only process complaints that are complete. To be considered complete, complainants must, at a minimum, include their name, contact information, date of alleged incident, and a description of the incident.

Once the complaint is received, Alternative Living dba Twin Cities Pavilion/Crestview Manor will review it to determine if our office has jurisdiction. The complainant will receive an acknowledgement letter informing him/her whether the complaint will be investigated by our office.

Alternative Living dba Twin Cities Pavilion/Crestview Manor has ninety (90) days to investigate the complaint. If more information is needed to resolve the case, Alternative Living dba Twin Cities Pavilion/Crestview Manor may contact the complainant. The complainant has ten (10) business days from the date of the letter to send requested information to the investigator assigned to the case. If the investigator is not contacted by the complainant or does not receive the additional information within ten (10) business days, Alternative Living dba Twin Cities Pavilion/Crestview Manor can administratively close the case. A case can also be administratively closed if the complainant no longer wishes to pursue their case.

After the complaint is reviewed, she/he will issue one of two letters to the complainant: a closure letter or a letter of finding (LOF). A closure letter summarizes the allegations and states that there was not a Title VI violation and that the case will be closed. A LOF summarizes the allegations and the interviews regarding the alleged incident, and explains whether any disciplinary action, additional training of the staff member or other action will occur. If the complainant wishes to appeal the decision, she/he has seven (7) days to do so from the time he/she receives the closure letter or the LOF.

The complaint procedures and forms will be made available to all members at Alternative Living dba Twin Cities Pavilion/Crestview Manor's facilities.

4.2 Complaint Form

Section I:			
Name:			
Address:			
Telephone (Home):		Telephone (Work):	
Electronic Mail Address:			
Accessible Format Requirements?	Large Print		Audio Tape
	TDD		Other
Section II:			
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
Section III:			
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	<input type="checkbox"/> Age
<input type="checkbox"/> Disability	<input type="checkbox"/> Family or Religious Status	<input type="checkbox"/> Other (explain) _____	
Date of Alleged Discrimination (Month, Day, Year): _____			
Explain as clearly as possible what happened and why you believe you were 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. _____ _____			
Section IV			
Have you previously filed a Title VI complaint with this agency?		Yes	No

Section V

Have you filed this complaint with any other Federal, State, or local agency, or with any Federal or State court?

Yes No

If yes, check all that apply:

Federal Agency: _____

Federal Court _____

State Agency _____

State Court _____

Local Agency _____

Please provide information about a contact person at the agency/court where the complaint was filed.

Name:

Title:

Agency:

Address:

Telephone:

Section VI

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:

Kimberly A. Fraley, Executive Director
 207 Hospital Drive
 Fort Walton Beach, Fl 32548

4.3 Record Retention and Reporting Policy

FTA requires that all direct and primary recipients document their compliance by submitting a Title VI Program to their FTA regional civil rights officer once every three (3) years. Alternative Living dba Twin