

CITY OF OLIVE BRANCH
CURB RAMP ACCESSIBILITY
GRIEVANCE PROCEDURE

Who May File

Any person with a disability who believes that they have been the subject of disability-related discrimination on the basis of denial of access where the sidewalks cross curbs. The Grievance Form is attached.

Procedure

Step 1. Grievance Procedure & Form

Fill out the grievance form attached to this sheet with all the information requested. The grievance form shall be filed with the ADA Coordinator within 60 working days of the alleged disability-related discrimination. Upon request, reasonable accommodations will be provided in completing this form. Contact the ADA Coordinator at (662) 892.9351. The grievance procedure and form may be obtained from the City of Olive Branch web page and the following locations:

Public Works Department	City Hall
10175 Hwy 178	City Engineer's Office
Olive Branch, MS 38654	9200 Pigeon Roost Rd
662.893.5209	Olive Branch, MS 38654
	662.892.9351

Step 2. An Investigation is Conducted

The complainant will be notified within 5 working days of the receipt of the grievance, and the ADA Coordinator or other authorized representative will commence an investigation into the merits of the complaint, within 30 days. If necessary, the ADA Coordinator or other authorized representative, will contact the complainant directly to obtain additional facts or documentation relevant to the grievance.

Step 3. A Written Decision is Prepared and Forwarded to the Complainant

The ADA Coordinator or other authorized representative shall prepare a written decision, after full consideration of the merits of the grievance, no later than 60 days following the receipt of the grievance. A copy of the written decision shall be mailed to the complainant no later than five working days after preparation of the written decision.

Step 4. Appeal to the Mayor

If the complainant is dissatisfied with the written decision he or she may file a written appeal with the Mayor (9200 Pigeon Roost Road, Olive Branch, MS 38654) no later than 15 days of the date of the mailing of the decision. The appeal must contain a statement of the reasons why the complainant is dissatisfied with the written decision, and must be signed by the complainant or by someone authorized to do so on the complainant's behalf. The Mayor will act upon the appeal no later than 30 days after receipt, and a copy of the Mayor's written decision shall be forwarded to the complainant no later than five working days after preparation of the decision.

The ADA coordinator shall maintain the confidentiality of all files and records relating to grievances filed, unless disclosure is authorized or required by law. Any retaliation, coercion, intimidation, threat, interference, or harassment for the filing of a grievance, or use to restrain a complainant from filing, is prohibited and should be reported immediately to the ADA Coordinator.



**CITY OF OLIVE BRANCH
Curb Ramp Accessibility
Grievance Form**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Please provide a complete description of your grievance:

Please specify the location of your grievance:

Please state what you think should be done to resolve the grievance:

Please attach additional pages as needed.

Signature: _____ Date: _____

Please return to: ADA Coordinator, 9200 Pigeon Roost Rd, Olive Branch, MS 38654

Upon request, reasonable accommodation will be provided in completing this form.
Contact the ADA Coordinator at (662)892.9351 or go to the location listed above.