

Americans with Disabilities Act (ADA) Grievance Procedure

This grievance procedure is established to meet the requirements of the **Americans with Disability Act (ADA) of 1990**. It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, programs, or benefits by **Hamilton County Government**. **Hamilton County Government's Personnel Policy** contained in the *General Government Employee's Handbook* governs employment-related complaints of disability discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number, email address of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint will be made available for persons with disabilities upon request.

The complaint should be submitted as soon as possible, or preferably *within 60 calendar days* of the alleged violation to:

Mr. Bill Stoll
Risk Manager/ADA Coordinator
317 Oak Street, 2nd Floor
Chattanooga, TN 37403
423-209-6120

Within *15 calendar days* after receipt of the complaint, **Bill Stoll or his designee** will communicate or meet with the complainant to discuss the complaint and the possible resolutions. Within *15 calendar days* of the meeting, **Bill Stoll or his designee** will respond in writing, and where appropriate, in a format that is accessible to the complainant, such as large print, Braille, or audio tape. The response will explain the position of **Hamilton County Government** and offer options for substantive resolution of the complaint.

If the response by **Bill Stoll or his designee** does not satisfactorily resolve the issue, the complainant may appeal the decision within *15 calendar days* after receipt of the response to the **County Mayor's Office or his designee**.

Within *15 calendar days* after receipt of the appeal, the **County Mayor's Office or his designee** will meet with the complainant to discuss the complaint and possible resolutions. Within *15 calendar days* after the meeting, the **County Mayor's Office or his designee** will respond in writing, and, where appropriate, in a format that is accessible to the complainant, with a final resolution of the complaint.

All written complaints received by **Bill Stoll or his designee**, appeals to the **County Mayor's Office or his designee**, and responses from these two offices will be retained by **Hamilton County Government** for at least three years.