

Section III: Please recommend the reasonable modification in policy or practice that you would ask METRO to consider.

You may attach any written materials or other information that you think is relevant to your request.

Signature and date required below:

Signature

Date

Submission Options: You may submit this form in person at the address below, by mail to the address below or you may scan this completed form along with all supporting materials and e-mail to the individual stated below:

Transit Operations Manager
Greater Portland Transit District
114 Valley Street
Portland, ME 04102
tridge@gpmetrobus.com

METRO OFFICE USE ONLY

Reasonable Modification Determination

APPROVED _____

NOT APPROVED _____

Describe modification:	Describe reasons for denial:

Determination made by: _____

Date: _____

Customer Notified by: _____

Date: _____

Dispatch/CS Notified by: _____

Date: _____

