

## **GRIEVANCE PROCEDURE UNDER THE AMERICANS WITH DISABILITIES ACT**

This Grievance Procedure is established to resolve, in a prompt and fair manner, complaints of disability discrimination arising under Title II of the Americans with Disabilities Act of 1990 (ADA), and the Washington Law Against Discrimination (RCW 49.60 et seq.), or other similar local, state, and federal laws.

The complaint should be in writing and contain information about the alleged discrimination. The written complaint needs to be submitted as soon as possible, but no later than 60 calendar days after the alleged violation.

In order to assist Everett Public Facilities District in obtaining the necessary information for your complaint, please follow these steps:

1. Complete Everett Public Facilities District - ADA Complaint/Grievance Form
2. Sign and date the form
3. Submit the form and any attachments to:

ADA Coordinator  
2000 Hewitt Avenue  
Suite 200  
Everett, WA 98201  
Email: [ContactUs-angelofthewindsarena@oakviewgroup.com](mailto:ContactUs-angelofthewindsarena@oakviewgroup.com)

Within 15 calendar days after receipt of the complaint, the ADA Coordinator will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days of the meeting, the ADA Coordinator will respond in writing to the complainant. The response will explain the position of the ADA Coordinator and may offer options for substantive resolution of the complaint. The complainant may appeal the decision within 15 calendar days after receipt of the response to the General Manager or Everett Public Facilities Board President.

Should the complainant not be satisfied with the Everett Public Facilities District's response, the complainant shall be advised of their right to file an ADA complaint with the U.S. Department of Justice Civil Rights Division.

U.S. Department of Justice  
950 Pennsylvania Avenue  
NW Civil Rights Division  
Disability Rights Section 1425  
NYAV Washington, DC 20530  
FAX: (202) 307-1197  
Online: [www.ada.gov](http://www.ada.gov).

Medical or other health information submitted or requested will remain confidential and retained by the ADA Coordinator along with a copy of the accommodation request, ADA Coordinator's decision, and any grievance filed and the decision pursuant to Washington State Local Government Records Retention Schedule (GS50-04C-01).

# ANGEL<sup>OF THE</sup> WINDS ARENA

## Everett Public Facilities District - ADA Complaint/Grievance Form

Complainant Name:

Designee Preparing Complaint (if different from Complainant):

Designee's Relationship to Complainant:

Street Address & Apt. No.:

City:

State:

Zip:

Phone: (       )

E-mail:

Please provide a complete description of the specific complaint or grievance:

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Please specify any location(s) related to the complaint or grievance (if applicable):

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

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Please attached additional pages as needed.

Please do not contact me personally.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return to:** Everett Public Facilities District, Allie Lindert, ADA Coordinator, 2000 Hewitt Avenue, Suite 200, Everett, Washington 98201, 425-322-2600, ContactUs-angelofthewindsarena@oakviewgroup.com.

Upon request, reasonable accommodation will be provided in completing this form, or copies of the form will be provided in alternative formats. Contact Everett Public Facilities District, Allie Lindert, ADA Coordinator, 2000 Hewitt Avenue, Suite 200, Everett, Washington 98201, 425-322-2600, ContactUs-angelofthewindsarena@oakviewgroup.com.