



city of beech grove

City of Beech Grove, Indiana

ADA Title II Request for Reasonable Accommodation Form

Instructions: If you are completing this form for another individual, please submit their contact information and the preferred method of contact. If you are the person we should contact, please submit your information and your preferred method of contact. Submit this form and any additional information to: Joe Prindle, ADA Coordinator 806 Main Street Beech Grove, IN 46107 or through e-mail at adacoordinator@beechgrove.com

Person Completing this form:	<input type="checkbox"/> Citizen <input type="checkbox"/> Representative of Citizen
Today's Date	
Citizen Contact Information	
Name	
Street Address, Zip Code	
Telephone Number	
E-mail Address	
Preferred Method of Contact	<input type="checkbox"/> E-Mail <input type="checkbox"/> Telephone <input type="checkbox"/> Mail
Representative of Citizen Contact Information	
Name	
Street Address, Zip Code	
Telephone Number	
E-Mail Address	
Preferred Method of Contact	<input type="checkbox"/> E-Mail <input type="checkbox"/> Telephone <input type="checkbox"/> Mail
Accommodation Information	
Please identify the City department or office associated with the program, service, or activity:	
Please specify the program, service, or activity you are seeking to participate:	
Accommodation you are requesting:	
How will this accommodation assist you?	
If you would like to include additional information, please provide that information and attach it to this form.	