

COUNTY OF KINGS
DEPARTMENT OF
PUBLIC WORKS
Kings County Government Center
1400 W. Lacey Boulevard
Hanford, CA 93230
Phone: (559) 852-2690
FAX: (559) 582-2506
Kevin J. McAlister, Director

Grievance Form: Allegations of Violations of the Americans with Disabilities Act or California State
Disability Civil Rights Laws

Instructions: Please fill out this form completely. Sign and return as instructed on page 2.

(1) Person filling out this form:

Address:

City, State and Zip Code:

Telephone:

Email:

(2) Preferred method of contact: ___Telephone ___Email

(3) If filled out on behalf of person other than person listed above provide the following:

Name:

Address:

City, State, and Zip Code:

Telephone:

(4) Circumstances related to the facts of complaint:

Date:

Location:

Details of complaint: (Please be as specific as possible, and include the names and contact information of anyone who might have knowledge of the facts regarding the complaint. To help us to address your concerns promptly, please stick to the facts: who, what, when, where, and how. Please attach additional pages if necessary.)

(5) Signature of person completing form:

(6) Date:

The complaint should be submitted by the complainant and/or his/her designee as soon as possible, but no later than 60 calendar days after the alleged violation to: Kevin McAlister/ADA Coordinator County Government Center 1400 West Lacey Blvd, Hanford CA 93230 TEL (559) 852-2690 or California Relay 711 FAX (559) 584-0865