



# Request for Accommodation for Accessibility



**This form allows residents and businesses to submit requests for accessibility or accommodation to facilities, programs, and services.**

The City of Renton strives to ensure that its programs and facilities are accessible to all residents. In accordance with the Americans with Disabilities Act (ADA), efforts are made to accommodate people with disabilities. In accordance with Title VI of the Civil Rights Act of 1964, the City offers the same services and programs to all, regardless of race, color, income, national origin or English proficiency.

### TYPE OF ACCESSIBILITY OR ACCOMMODATION REQUEST:

Check the box  below for the primary issue.

- |                                      |  |  |
|--------------------------------------|--|--|
| <input type="checkbox"/> Curb Ramp   | <input type="checkbox"/> Trip Hazard     | <input type="checkbox"/> Park Programs   |
| <input type="checkbox"/> Sidewalk    | <input type="checkbox"/> Signage         | <input type="checkbox"/> City Facilities |
| <input type="checkbox"/> Facility    | <input type="checkbox"/> Signal          | <input type="checkbox"/> Utilities       |
| <input type="checkbox"/> Obstruction | <input type="checkbox"/> Park Facilities | <input type="checkbox"/> Other           |

**Problem Location:** \_\_\_\_\_

**Street Address/Cross Street:** \_\_\_\_\_

**Accommodation Needed:**

Describe accommodation that is being requested and include a brief statement of why it is needed.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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### REQUESTOR INFORMATION

<b>Name:</b>		<b>Date of Request:</b>	
<b>Address:</b>			
<b>City, State, ZIP:</b>		<b>Telephone Number:</b>	(    )    -
<b>E-mail Address:</b>			

If person needing accommodation is not individual completing this form, please enter:

<b>Name:</b>		<b>Telephone Number:</b>	(    )    -
<b>Other Contact Information:</b>			

Send completed form to the department where accommodation is needed or send to:

ADA Coordinator, Human Resources & Risk Management  
 1055 S. Grady Way, Renton, WA 98057  
 E-mail: [kkolaz@rentonwa.gov](mailto:kkolaz@rentonwa.gov)

This form will be reviewed by the appropriate department and a response will be provided.