

Notifying the Public of Rights Under Title VI

## **THE CAMBRIA COUNTY PLANNING COMMISSION**

- The Cambria County Planning Commission operates its programs and services without regard to race, color, and national origin in accordance with Title VI of the Civil Rights Act. Any person who believes he or she has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with the Cambria County Planning Commission.
- For more information on the Cambria County Planning Commission's civil rights program, and the procedures to file a complaint, contact (814) 472-2106, email [eimhoff@co.cambria.pa.us](mailto:eimhoff@co.cambria.pa.us); or visit our administrative office at 401 Candlelight Drive, Suite 215, Ebensburg, Pennsylvania.

For more information, visit [www.co.cambria.pa.us](http://www.co.cambria.pa.us)

- If information is needed in another language, contact (814) 472-2106.

## **Cambria County Planning Commission Title VI Complaint Procedures**

### **Purpose:**

The Cambria County Planning Commission Title VI Complaint Procedures is written to specify the process employed by Cambria County Planning Commission to investigate complaints, while ensuring due process for Complainants and Respondents. The process does not preclude Cambria County Planning Commission from attempting to informally resolve complaints.

This procedure applies to all external complaints relating to any program or activity administered by Cambria County Planning Commission and/or its subrecipients, consultants and contractors, filed under Title VI of the Civil Rights Act of 1964 as amended, (including Disadvantage Business Enterprise and Equal Employment Opportunity components), as well as other related laws that prohibit discrimination on the basis of race, color, disability, sex, age, low income, nationality or Limited English Proficiency. Additional statutes include, but not limited to, Section 504 of the Rehabilitation Act of 1973, the Civil Rights Restoration Act of 1987, and the Americans with Disability Act of 1990.

These procedures are part of an administrative process that does not provide for remedies that include punitive damages or compensatory remuneration for the Complainant. Intimidation or retaliation of any kind is prohibited by law.

**Process:**

An individual, or his or her representative, who believes that he or she has been subject to discrimination or retaliation prohibited by Title VI and other nondiscrimination provisions, has the right to file a complaint. Complaints need to be filed within 180 calendar days of alleged occurrence, when the alleged discrimination became known to the Complainant, or when there has been a continuing course of conduct, the date on which the conduct was discontinued or latest instance of the conduct.

Complaints may be mailed to:

Title VI Compliance Manager  
Cambria County Planning Commission  
401 Candlelight Drive, Suite 215  
Ebensburg, PA 15931

Title VI Specialist  
Bureau of Equal Opportunity  
PennDot  
P.O. Box 3251  
Harrisburg, PA 17105-1720

Equal Opportunity Specialist  
U.S. Department of Transportation  
Federal Highway Administration  
228 Walnut Street; Room 508  
Harrisburg, PA 17105-1720

Equal Opportunity Specialist  
PA Human Relations Commission  
Harrisburg Regional Office  
Riverfront Office Center, 5th Floor  
1101-1125 South Front Street  
Harrisburg, PA 17104-2515

U.S. Department of Justice  
Civil Rights Division  
950 Pennsylvania Avenue, N.W.  
Office of the Assistant Attorney General, Main  
Washington DC 20530

Civil Rights Officer  
U.S. Department of Transportation  
Federal Transit Administration  
1760 Market Suite 500  
Philadelphia, PA 19103-4124

Title VI Coordinator  
Office of Civil Rights  
Federal Aviation Administration  
800 Independence Ave., SW  
Washington DC 20591

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### **Procedures for Logging a Complaint:**

Complaints shall be in writing and signed by the Complainant(s). If complaints are received by telephone or in person, the Title VI Compliance Manager or other authorized representative shall formally interview the person to provide the basis for the written complaint. If necessary, the authorized person will assist the Complainant in writing the complaint. The written complaint must include the following information:

- Name, address and telephone number of Complainant.
- Basis of the complaint (e.g., Race, Color, National Origin, Sex, Age, Disability or Retaliation).
- A detailed description of the circumstances of the incident that lead the Complainant to believe discrimination occurred.
- Names address and phones numbers of people who may have knowledge of the alleged incident or are perceived as parties in the complained-of-incident.
- Date or dates on which the alleged discrimination occurred.
- Other agencies where the complaint was filed.
- As an investigation moves forward, additional information may be required.

If the Cambria County Planning Commission receives a complaint, the Cambria County Planning Commission will acknowledge receipt of the complaint by notifying the Complainant and immediately transmitting the complaint to the proper state and federal agency (e.g. Federal Highway Administration, Federal Transit Administration, and PennDOT) for investigation and disposition pursuant to that agency's Title VI complaint procedures.

The Cambria County Planning Commission Title VI Compliance Manager will maintain a log of all complaints received by the Cambria County Planning Commission.

**Cambria County Planning Commission Title VI Complaint Form**

Please Print All Information Below.

Complainant Name: \_\_\_\_\_

Name of Individual Assisting Complainant: \_\_\_\_\_

Complainant Address:

Assisting Individual Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Complainant Phone Number:

Assisting Individual Phone Number:

\_\_\_\_\_

\_\_\_\_\_

Basis of Complaint: (e.g., Race, Color, National Origin, Sex, Age, Disability, Retaliation)

\_\_\_\_\_

Date(s) of alleged discrimination:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please provide a detailed description of the circumstances of the incident(s), including any additional information supporting your complaint (please use additional pages as necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please provide the name(s), title and address of the person who discriminated against the Complainant:

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Please provide, if applicable, names and contact information of people who may have knowledge of the alleged incident(s) or are perceived as parties in the complained-of incident(s):

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Please list any other agency where complaint has been filed:

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Complainant Signature:

Date:

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Next Action(s):

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