



## REASONABLE MODIFICATION REQUEST FORM

To request a reasonable modification to current RFTA policies or procedures, complete this form and email or mail to the address below. To ensure we can effectively evaluate your request, please provide as much specific, detailed information as possible.

Before completing this form please review RFTA's at <https://www.rfta.com/reasonable-modification-statement/>

Please include the following items in your request:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

How would you like to be contacted?

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Best Time of Day to contact you?     Morning     Afternoon     Evening

### Modification Requested:

- Why, based on a disability, is the modification necessary?
- Provide a description of your limitation(s) and how it is affected by RFTA's policies/procedures. Use an extra page if necessary.

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### Send this completed form to:

Dawn Dexter, RFTA ADA Compliance Officer  
2307 Wulfsohn Road  
Glenwood Springs, CO 81601  
Email: [ddexter@rfta.com](mailto:ddexter@rfta.com)  
Phone: (970) 379-5505