

Central West Virginia Regional Airport Authority Yeager Airport

Grievance Procedures under the Americans with Disabilities Act of 1990

Introduction

In accordance with Title II of the Americans with Disabilities Act (ADA) of 1990, it is the intention of the Central West Virginia Regional Airport Authority (CWVRAA) to provide access to all public facilities, programs and services associated with its operation of Yeager Airport to all persons with disabilities.

The CWVRAA ADA Coordinator is responsible for administering the Airport Authority's overall compliance program, and is designated, in accordance with the federal regulation under the ADA, to coordinate the Airport Authority's efforts to comply with and carry out its responsibilities on the basis of disability, including investigation of any complaint communicated to the CWVRAA, alleging the denial of access to a Yeager Airport service or program, based on disability.

Yeager Airport's ADA Coordinator

The Airport Authority' ADA Coordinator is familiar with federal, state and local government structures, regulations and policies, including knowledge of the ADA and other laws addressing the rights of people with disabilities and has extensive experience with a broad range of disabilities. The ADA Coordinator has knowledge of various alternative formats and alternative technologies that enable people with disabilities to communicate and participate in programs, activities and services available at Yeager Airport. The ADA Coordinator has the ability to work cooperatively with people with disabilities and is familiar with local disability advocacy groups and has the skills and training necessary to negotiate and mediate on behalf of anyone who submits a grievance.

The Grievance Procedure

Any grievance alleging discrimination against anyone with a disability should be documented in writing on the attached ADA Title II Grievance Form and must contain the name, address and phone number of the grievant. The Form should include as much information as possible regarding the alleged violation including date, time, location, and a clear description of the complaint and be received by the ADA Coordinator no later than 30 days following the alleged incident. The Grievance Form must be completed and signed by the grievant or her/his authorized advocate.

Upon receipt, the ADA Coordinator will review the completed Grievance Form within ten workdays. If the Form requires additional information, the ADA Coordinator will contact

the complainant and return the Form for completion. Once the completed Form has been received, the ADA Coordinator will work with the airport's tenants, contractors and concessionaires, if necessary, to identify and implement a mutually agreed upon resolution within 15 business days of receipt of the completed Form.

If the ADA Coordinator determines further investigation is necessary, a Notice of Continued Investigation within 15 work days after receiving the completed Grievance Form or if necessary, meet with the grievant to discuss and possibly resolve the matter. If requested, the ADA Coordinator will make available audio tape or other recordings, radio announcements, large print notice, Braille notice, use of a qualified sign language interpreter at meetings, open or closed-captioned public service announcements on television, ASCII, HTML, or word 2processing format on a computer diskette or CD, HTML format on an accessible website and advertisements in publications with large print versions.

It is the CWVRAA's policy to encourage an informal resolution of all complaints and grievances. If a mutually agreed upon informal resolution cannot be achieved, the ADA Coordinator will respond, in writing, with a decision within 60 business days of the receipt of the completed Form. Nothing in this grievance procedure prevents an individual from filing a complaint with the U.S. Department of Justice, ADA Enforcement Division or with the Federal Aviation Administration, Office of Civil Rights.

Not later than 30 days from receipt of the ADA Coordinator's decision, the grievant or authorized representative may appeal that decision in writing to Rick Atkinson, Airport Director, Yeager Airport, 100 Airport Rd, Charleston, WV 25311. Within 30 days of receipt of this appeal, the Airport Director or his designee will meet with the grievant to discuss the grievance and possible resolution and within 30 days of that meeting, will submit the CWVRAA's final decision to the grievant.

All written and/or recorded communications will remain on file with the ADA Coordinator for a period of three years from the date of the ADA Coordinator's decision or the date of the Airport Director's decision, whichever is later.

The ADA Coordinator shall publish the CWVRAA's Grievance Procedure together with the ADA Coordinator's name, office address, telephone number and email for airport personnel, interested members of the public, individuals with disabilities and organizations representing individuals with disabilities.

Yeager Airport's ADA Coordinator may be reached by email at feedback@yeagerairport.com or by phone at 304-344-8033. Please send all grievances to ADA Coordinator, Yeager Airport, 100 Airport Rd. Suite 175, Charleston, WV 25311.

These Grievance Procedures are reviewed annually by the ADA Coordinator to ensure compliance with federal law.



Americans with Disabilities Grievance Form

In accordance with Title II of the Americans with Disabilities Act (ADA) of 1990, the Central West Virginia Regional Airport Authority provides access to all programs and services associated with its operation of Yeager Airport and to all persons with disabilities. Please use this form to file a grievance if you believe that you were denied access to a CWVRAA program or service based on disability. You may submit your grievance to ADA Coordinator, Yeager Airport, 100 Airport Rd. Suite 175, Charleston, WV 25311, or to feedback@yeagerairport.com or by calling 304-344-8033.

Grievant Information:

FIRST NAME (LEGAL)		MIDDLE NAME (LEGAL)			LAST NAME (I	LEGAL)	
HOME ADDRESS House or Apt #:	Street Name:	City:				State:	Zip Code:
TELEPHONE NUMBERS	3		Secondary	y:			
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EMAIL ADDRESS							

Person (Not Grievant) alleging ADA violation at Yeager Airport

FIRST NAME (LEGAL)		MIDDLE NAME (LEGAL)			LAST NAME (LE	GAL)	
HOME ADDRESS House or Apt #:	Street Name:	City:				State:	Zip Code:
TELEPHONE NUMBERS	;		Secondary:				
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EMAIL ADDRESS							

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Signature: _____ Date: _____