



## REASONABLE MODIFICATIONS REQUEST FORM

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Please complete this form to request a reasonable modification of Valley Transit District ADA Paratransit bus service. Submit the completed form to the Reasonable Modification Coordinator via mail at 41 Main Street, Derby, CT 06418, or via email at [rmrequests@valleytransit.org](mailto:rmrequests@valleytransit.org) .

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

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Description of Request: \_\_\_\_\_

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Are you able to ride without this modification? \_\_\_\_\_

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Comments regarding a reasonable modification request can be sent to [rmrequests@valleytransit.org](mailto:rmrequests@valleytransit.org) or call 203-735-6824 ext. 102