



**John J. Presleigh, Director**  
701 Ocean Street, Room 410  
Santa Cruz, CA 95060

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## **ADA ACCESS IN THE PUBLIC RIGHT-OF-WAY**

### **GRIEVANCE PROCEDURE**

#### **Who May File**

Any person with a disability who believes they have been the subject of a disability-related discrimination on the basis of denial of access in the public right-of-way. This grievance procedure covers access to sidewalks and streets, including crosswalks, curb ramps, street furnishings, pedestrian signals, and other components of public right-of-way only.

#### **Procedure**

##### ***Step 1. Grievance Procedure & Form***

Fill out the grievance form attached to this sheet with all the information requested. The grievance form shall be filed with the Department of Public Works within 30 calendar days of the alleged disability-related discrimination. Please contact the Joel La Cagnin at (831) 454-2160 if you need assistance completing this form due to a disability. The grievance procedure and form may be obtained from the Department of Public Works web page and the following location

County of Santa Cruz  
Department of Public Works  
701 Ocean Street, Room 410  
Santa Cruz, CA 95060

***Step 2. An Investigation is Conducted***

The complainant will be notified within 14 calendar days of the receipt of the grievance, and if necessary, Joel La Cagnin or another authorized representative will contact the complainant directly to obtain additional facts or documentation relevant to the grievance.

***Step 3. A Written Response is Prepared and Forwarded to the Complainant***

Joel La Cagnin or other authorized representative shall prepare a written decision, after full consideration of the merits of the grievance, outlining the Department of Public Works course of action and expected timeline. This communication shall be sent to the complainant via postal mail or electronic mail.

***Step 4. Appeal to the EEO Officer, ADA Compliance***

If the complainant is dissatisfied with the written decision, he or she may file a written appeal with Ana Ventura Phares, County of Santa Cruz Equal Employment Officer (EEO), ADA Compliance (701 Ocean Street, Room 310, Santa Cruz, CA 95060) no later than 15 calendar days of receiving the written decision. The appeal must contain a statement of the reasons why the complaint is dissatisfied with the written decision, and must be signed by the complainant or by authorized to do so on the complainant's behalf. The EEO officer will act upon the appeal no later than 30 calendar days after receipt, and a copy of the written decision shall be forwarded to the complainant no later than five working days after preparation of the decision.



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## ADA ACCESS IN THE PUBLIC RIGHT-OF-WAY GRIEVANCE FORM

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Please provide a complete description of your grievance (attach additional pages if necessary):

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

Please specify the location of your grievance (attach map page if necessary):

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

Please state what you think should be done to resolve the grievance (attach additional pages if necessary):

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

Printed Name: \_\_\_\_\_

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

Please mail to: Joel La Cagnin, County of Santa Cruz Department of Public Works, 701 Ocean Street, Room 410, Santa Cruz, CA 95060. You may also fax your form to (831) 454-2385