



**Citrus County
Board of County Commissioners
DEPARTMENT OF COMMUNITY SERVICES
TRANSIT SERVICES**

1300 S. Lecanto Highway, • Lecanto, FL 34461
Telephone (352) 527-7630 • Facsimile (352) 527-7635

ADA COMPLAINT /GRIEVANCE FORM

Complainant: _____

Person Preparing Complaint (if different from Complainant): _____

Relationship to Complainant (if different from Complainant): _____

Street Address & Apt. No.: _____

City: _____ State: _____ Zip: _____

Phone(____) _____ Email: _____

Please provide a complete description of the specific complaint or grievance:

Please specify any locations(s) related to the complaint or grievance (if applicable)

Please state what you think should be done to resolve the complaint or grievance:

Please attach additional pages as needed.

Please do not contact me personally.

Signature: _____ Date: _____

Please return to: Charlie Gatto, ADA Coordinator
3600 W. Sovereign Path, Suite 212
Lecanto, FL 34461
Charlie.Gatto@citrusbocc.com