

Town of Ashland City

P. O. Box 36 233 Tennessee Waltz Parkway, Suite 103 Ashland City, Tennessee 37015 Phone: 615-792-6455 Fax: 615-792-3501

REQUEST FOR ACCOMMODATION OR BARRIER REMOVAL

Check one: Accommod	lation Barrier	Removal	
Name of Complainant: <u>La</u>	st	MI	First
Address:			
City:	State:	Zip:	
Telephone Number:	E-mail	Address:	
Preferred Method(s) of Co Voice Telephone TTY			
Accommodation needed c			
	al requests are co		zed by the City with
CERTIFICATION: I certify reasonable accommoda or work adjustments des	tion, which will b scribed above.	e met by acquiring the	
If person needing accomn Representative's Name: _			
Address:			
Telephone Number:			
		-4i	

For more information or assistance in completing the form, please contact the ADA Coordinator via (direct line) (615) 792-6455 or anicholson@ashlandcitytn.gov