pscleanair.gov



Title VI Discrimination Complaint Form

The Puget Sound Clean Air Agency (PSCAA) is committed to ensuring that no person is excluded from participation in or denied the benefits of its services on the basis of race, color, national origin or sex, as provided by the Title VI of the Civil Rights Act of 1964, as amended. Complaints based on protections afforded under other civil rights statutes, including sexual orientation, gender identity, religion or age should also be filed with the Agency. Title VI complaints must be filed within 180 calendar days from the date of alleged discrimination and must be received in writing.

The following information is necessary to assist us in processing your complaint. If you require any assistance in completing this form, please contact the Title VI Coordinator by calling 206-343-8800. The completed form must be returned to the PSCAA – Title VI Coordinator, 1904 Third Avenue, Suite 105, Seattle, WA 98101.

I. COMPLAINANT INFORMATION			
Your Name		Phone	
Tourname		Number	
Business Name			
(if applicable)			
Street Address			
City		State Zip	
City		Code	
Have you filed a c	complaint about this inciden	nt with another	
entity?			
II. INCIDENT INFORMATION			
Which of the following best describes the reason for the alleged discrimination?			
□ Age	□ Disability □	Gender Identity 🗆 Race/ Color	
□ Sexual Orienta	ition 🗆 Religion 🗆	Sex	



pscleanair.gov



Please describe the circumstances of the alleged als	crimination incident, including the date		
of the alleged occurrence, who you believe was resp	onsible, and other specific and relevant		
information. Please attach a separate sheet if addition	onal space is required.		
What remedy are you seeking for the alleged discrimination?			
Signature	Date		