



Village of East Dundee

120 Barrington Avenue
East Dundee, Illinois 60118
Office (847)426-2822

Grievance Procedure Form

If you feel that due to a disability you have suffered, discrimination in a Village facility or program use, please fill out this form completely and submit it to our ADA coordinator, Robert Urbanowitz at the Village of East Dundee, 120 Barrington Ave, East Dundee IL 60118.

SECTION A: Reporting Individual

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone Number: _____

SECTION B: Person Allegedly Discriminated Against (If other than Reporting Individual)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone Number: _____

SECTION C: Program or Facility Alleged to be Inaccessible

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone Number: _____

When did the alleged discrimination occur? (Date) _____

Describe the acts of alleged discrimination, or way in which the program or facility is not accessible providing the name(s) where possible of the individuals who allegedly discriminated and the requests for accommodations, and what was the response.

