ADA Complaint Form
SF Bay Ferry/Water Emergency Transportation Authority (WETA)

SF Bay Ferry/WETA is committed to ensuring that it complies with the American with Disabilities Act (ADA), including 49 CFR Parts 27 and 37. Any person who wishes to file a complaint regarding a request for Reasonable Modification or alleging any action by SF Bay Ferry/WETA prohibited by the Americans with Disabilities Act (ADA) regulations found at 49 CFR Parts 27, 37, 38, 39, may file a written complaint with WETA. Please provide in writing the following information and submit it to:

ADA Coordinator
San Francisco Bay Area Water Emergency Transportation Authority
Pier 9, Suite 111, The Embarcadero
San Francisco, CA 94111
Fax: (415) 291-3388
customerservice@sanfranciscobayferry.com

For additional assistance please contact the ADA Coordinator by calling (415) 291-3377 or 711.

WETA will begin an investigation within 15 working days of receipt of a written complaint and will request any additional information necessary to complete the investigation within 30 days after receipt of the complaint. WETA will complete the investigation within 90 days of receipt of the written complaint. If additional time for investigation is needed the complainant will be contacted.

Your Name:	Phone:
Street Address:	Alt Phone:
	City, State & Zip Code:

Date of Incident: _____

Please describe your complaint and/or what modification you requested that is necessary for you to use SF Bay Ferry. Please include any information about the issue you are trying to remedy. Be specific. For additional space attached additional sheets of paper.

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Complainants Signature: _____ Date: _____

Date Received: _____
Received By: _____