



Americans with Disabilities Act Compliance Policy

300 W. Merrill St. Birmingham, MI 48009 | 248-647-1700 | www.baldwinlib.org

The Baldwin Public Library (BPL) affirms its support of equal access for persons with disabilities and for the Americans with Disabilities Act. BPL seeks to make its services, facilities, and programs as accessible as possible to the public, including those who have disabilities. The following procedures have been developed in order to assist BPL in addressing concerns about accessibility.

All forms referenced in this policy may be requested from BPL Administration by calling (248) 647-7339 or by visiting the BPL Administration office. The forms are also available on the BPL's website.

HOW TO FILE AN ACCOMMODATION REQUEST

Requests for accommodation can be submitted by filling out the **Reasonable Accommodation Request Form**. Completed forms should be sent to the Library Director or submitted online. Requests can also be made to the Library Director over the phone or in person. The Library Director will make every attempt to provide an accommodation within ten (10) working days of receipt of request. The Reasonable Accommodation Request Form can be found at the end of this policy or on BPL's website.

HOW TO FILE AN ACCOMMODATION COMPLAINT

If a resolution is not achieved after a request for accommodation has been submitted, then the individual should follow the following three-step procedure.

1. **Complaint:** Present a written complaint on the **Accessibility Complaint Form** within 180 days of the incident. This form may be mailed to the address on the form or presented in person. BPL Administration, if asked, will provide assistance with completing this form. Completed forms are reviewed by the Director and a formal response is made to the user within ten (10) working days of the date of original submission of the form. The formal response will be either a letter or a telephone call, the latter of which will be followed by a letter confirming the telephone discussion. The Director will make every attempt to resolve the issue during this step.
2. **Appeal:** If resolution is not achieved after the second step, the concerned individual may request that the complaint be presented to the BPL Board of Directors. The Director will place the matter on the agenda for the next regularly scheduled BPL Board meeting so that the concerned individual can present the concern directly to the BPL Board. The decision of the BPL Board is final.

Individuals may submit complaints to the BPL Board either verbally by calling (248) 647-7339 or by writing to the following address:

Baldwin Public Library Board
300 W. Merrill Street
Birmingham, MI 48009

3. **Further Course of Action:** If resolution is not achieved after the appeal, the concerned individual may file a complaint directly with the Civil Rights Division of the U.S. Department of Justice. No one may threaten or harass anyone who makes a complaint. To file a complaint with the Civil Rights Division, contact:

The Office on the American with Disabilities Act
Civil Rights Division
U.S. Department of Justice
Washington, DC 20035-6118
(202) 514-0301 (Voice) or (202) 514-0381 (TDD)

GENERAL INFORMATION

In accordance with Section 35.106 of the ADA's Title II Regulations, all applicants, participants, beneficiaries, and other interested persons are advised that further information may be obtained from the Office on the Americans with Disabilities Act, Civil Rights Division, U.S. Department of Justice, Washington, DC 20035-6118 (202) 514-0301 (Voice) or (202) 514-0381 (TDD).

BALDWIN PUBLIC LIBRARY
REASONABLE ACCOMMODATION REQUEST FORM

Name _____

Address _____

Phone _____

What service, program, or activity does this request concern?

Date (if applicable) _____

What accommodation is requested?

For help in completing this form contact the Library Administration, Baldwin Public Library,
300 W. Merrill Street, Birmingham, MI 48009 or (248) 647-7339

Signature

Date

Return completed form to the
Baldwin Public Library Administration,
300 W. Merrill Street, Birmingham, MI 48009

BALDWIN PUBLIC LIBRARY
ACCESSIBILITY COMPLAINT FORM

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE NUMBER: _____

NAME OF THE DEPARTMENT AND/OR EMPLOYEE AGAINST WHOM THE COMPLAINT IS FILED:

DESCRIPTION of the action or treatment which you think was discriminatory. Include information about who, what, when, where, how, why and the names, addresses and phone numbers of any witnesses, if you know them. You may write this on another sheet of paper if you need more room.

STATE RESOLUTION OR ACCOMMODATION DESIRED

Signature

Date

Send completed form to:
Baldwin Public Library Administration
300 W. Merrill Street, Birmingham, MI 48009
(248) 647-7339