



# **Title VI**

# **Complaint Procedures**

*Updated November 19, 2020*



## **CAPE FEAR PUBLIC TRANSPORTATION AUTHORITY TITLE VI COMPLAINT PROCEDURES**

The Cape Fear Public Transportation Authority (Wave Transit) grants equal access to public transportation services and programs administered to all citizens. This document is so ensure citizens are aware of their rights to such access, and serves to educate citizens so that they may understand the civil rights laws that protect their receipt and benefit of such services as defined by Title VI of the Civil Rights Act of 1964.

In compliance with FTA C 4702.1B as revised October 1, 2012, the Cape Fear Public Transportation Authority (Wave Transit) employs the following practices:

1. Hires personnel and operates programs without regard to race, color, and national origin of a specific individual or group of individuals.
2. Provides the following procedure in which members of the public should follow in order to request additional information on nondiscrimination obligations. All correspondence should be made in writing and mailed to:

**Wave Transit**  
**Attn: Title VI Coordinator**  
**P.O. Box 12630**  
**Wilmington, NC 28405**

3. Communicates procedures that members of the public should follow to file a complaint (see section entitled *Wave Transit Title VI Complaint and Investigation Procedures*).

### **WHAT IS TITLE VI**

Title VI is a section of the Civil Rights Act of 1964 requiring that *No person in the United States shall on the grounds of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.* Title VI prohibits discrimination based on race, color and national origin and does not extend to sex or gender.

### **WAVE TRANSIT TITLE VI COMPLAINT AND INVESTIGATION PROCEDURES**

These procedures cover all complaints filed under Title VI of the Civil Rights Act of 1964 for alleged discrimination in any program, service or activity administered by Wave Transit.

These procedures do not deny the right of the complainant to file formal complaints with other state or federal agencies or to seek private counsel for complaints alleging discrimination. Every effort will be made to obtain early resolution of complaints at the lowest level possible. The option of informal mediation meeting(s) between the affected parties and Wave Transit may be utilized for resolution. Any individual, group of individuals or entity that believes they have been subjected to discrimination prohibited under Title VI and related statutes may file a complaint.



## Cape Fear Public Transportation Authority

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The following outlines procedures for taking such action:

1. A formal complaint must be filed within one-hundred eighty (180) days of the alleged occurrence. Complaints shall be in writing and signed by the individual or his/her representative, and will include the complainant's name, address and telephone number; name of alleged discriminating official, basis of complaint (race, color, national origin), and the date of alleged act(s). A statement detailing the facts and circumstances of the alleged discrimination must accompany all complaints. A Wave Transit Title VI complaint form can be found at the end of this document. Wave Transit encourages individuals to submit Title VI complaints in writing using this form and mailing it to:

**Wave Transit**

**Attn: Title VI Coordinator**

**P.O. Box 12630**

**Wilmington, NC 28405**

2. In the case where a complainant is unable or incapable of providing a written statement, a verbal complaint of discrimination may be made to the Wave Transit Title VI Coordinator. Under these circumstances, the complainant will be interviewed, and the Wave Transit Title VI Coordinator will assist the complainant in completing a written statement.
3. When a complaint is received, the Title VI Coordinator will provide written acknowledgment to the Complainant, within ten (10) business days by registered mail.
4. If a complaint is deemed incomplete, additional information will be requested, and the Complainant will be provided sixty (60) business days to submit the required information. Failure to do so may be considered good cause for a determination of no investigative merit.
5. Within fifteen (15) business days from receipt of a complete complaint, Wave Transit will determine its jurisdiction in pursuing the matter and whether the complaint has sufficient merit to warrant investigation. Within five (5) days of this decision, the authority director or his/her authorized designee will notify the Complainant and Respondent, by registered mail, informing them of the disposition.
  - a. If the decision is not to investigate the complaint, the notification shall specifically state the reason for the decision.
  - b. If the complaint is to be investigated, the notification shall state the
  - c. grounds of the authority's jurisdiction, while informing the parties that their full cooperation will be required in gathering additional information and assisting the investigator.
6. When Wave Transit does not have sufficient jurisdiction, the director or his/her authorized designee will refer the complaint to the appropriate local, state, or federal



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agency holding such jurisdiction.

7. If the complaint has investigative merit, the director or his/her authorized designee will instruct the Title VI Coordinator to fully investigate the complaint. A complete investigation will be conducted, and an investigative report will be submitted to the director within sixty (60) days from receipt of the complaint. The report will include a description of the incident, summaries of all persons interviewed, and a finding with recommendations and proposed resolution where appropriate. If the investigation is delayed for any reason, the Title VI Coordinator will notify the appropriate authorities, and an extension will be requested.
8. The director or his/her authorized designee will issue letters of finding to the Complainant and Respondent within ninety (90) days from receipt of the complaint.
9. If the Complainant is dissatisfied with the authority's resolution of the complaint, he/she has the right to file a complaint with:

**New Hanover County Human Relations Commission  
230 Government Center Drive, Suite 135  
Wilmington, NC 28401**

**-or-**

**Civil Rights Compliance Officer  
FTA Region IV  
230 Peachtree, NW  
Suite 800  
Atlanta, GA 30303  
Telephone (404) 865-5600  
Fax (404) 865-5605**



**Title VI Complaint Form**  
Cape Fear Public Transportation Authority  
(dba. Wave Transit)

**Do you think you have been mistreated by Wave Transit because of race, color or national origin?**

Wave Transit 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 or national origin, as provided by US law (Title VI of the Civil Rights Act of 1964, as amended).

**Complaints under the Title VI law must be filed within 180 days from the date of the alleged discrimination. Please complete the information below to file your complaint. If you need help completing this form, call Wave Transit at 910-343-0106 or email [mmatheny@wavetransit.com](mailto:mmatheny@wavetransit.com).**

Your Name: \_\_\_\_\_ Street Address \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

Phone number: \_\_\_\_\_ Other phone: \_\_\_\_\_

Who was discriminated against? (Please circle)      You      Someone Else

If someone else, please provide their:

Name(s): \_\_\_\_\_ Street Address \_\_\_\_\_

City State & Zip Code: \_\_\_\_\_

Was the discrimination based on? (Circle one)

- Race
- Color
- National Origin (Limited English Proficiency)

Date of Incident: \_\_\_\_\_

Please describe the alleged discrimination incident. If possible, provide the names and titles of all Wave Transit employees involved. Explained what happened and who you believe was responsible. Please use the back of this form if additional space is required.

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Incident description continued:

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Have you filed a complaint with any other federal, state or local agencies? (Circle one)

Yes / No

If so, list agency or agencies and contact information below:

Agency:	Contact Name:
Street Address, City, State & Zip Code:	Phone:
Agency:	Contact Name:
Street Address, City, State & Zip Code:	Phone:

I affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

Complainant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please return the completed and signed form to the following address:**

**Wave Transit  
 Attn: Title VI Coordinator  
 PO Box 12630  
 Wilmington, NC 28405**

<b><i>Wave Transit Office Use Only</i></b>
Print or Type Name of Complainant:
Date Received:
Received By: