

# Reasonable Accommodation Request Form

Name\_\_\_\_\_

Date\_\_\_\_\_Phone\_\_\_\_\_

Email\_\_\_\_\_

Address\_\_\_\_\_

Description of request:

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Location:

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Are you able to ride without this accommodation?

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Please complete this form to request a reasonable accommodation from HART Transit. Submit the completed form to HART Transit:

Email: [cmwindhaus@hendersonky.gov](mailto:cmwindhaus@hendersonky.gov)

Fax: 270-831-1253,

Mail: H.A.R.T., P.O. Box 716, Henderson, KY 42419

