



**TOWN OF BERLIN, MASSACHUSETTS
AMERICANS WITH DISABILITIES ACT GRIEVANCE PROCEDURE**

Section 1: In accordance with the Americans with Disabilities Act (ADA), The Town of Berlin may not discriminate on the basis of disability against any qualified individual with a disability in the services, programs, or activities it provides, in providing access to public meetings, and in its employment practices.

Section 2: In the event that a person with a disability believes he/she has been discriminated against, a complaint may be filed, using the following format:

- a. Complaint shall be in writing, signed by the Complainant or an authorized representative.
- b. Complainant shall include Complainant's name, address and telephone, or alternative method of contact.
- c. Complaint shall identify the Town Department, employee, officer, or agency committing the alleged discriminatory action.
- d. Complaint shall describe, in detail, the alleged discriminatory action.

Section 3: The Complaint shall be submitted, within thirty (30) days of the alleged discriminatory action, or knowledge thereof, to the appropriate ADA Coordinator:

Attn: ADA Coordinator
Council on Aging/Social Services Director
Town of Berlin
23 Linden Street
Berlin, MA 01503
EMAIL: coadirector@townofberlin.com
FAX: 978-838-0014

Note: Complaints should be submitted in writing, via email, or by completing the website complaint form and will be promptly addressed. If you prefer to use an alternative format such as Braille or a telephone interview, please contact the ADA Coordinator at (978) 838-2750 or at coadirector@townofberlin.com to ensure that the Town can accommodate the format of your choice.

Section 4: The Coordinator shall contact and/or meet with the Complainant within fifteen (15) calendar days to discuss the nature of the Complaint and to request/obtain clarifying information from the Complainant.

Section 5: The Town's designated ADA Coordinator ("Coordinator") shall investigate the Complaint and meet with the appropriate board, official, or employee(s), to resolve the Complaint. Within fifteen (15) calendar days after such meeting, the Coordinator shall inform the Complainant of the resolution. This communication shall explain the position of the Town of Berlin and offer options for resolution. A copy of this correspondence shall be provided to the Town Administrator and the Town's Commission on Disabilities.

Section 6: If the response given by the Coordinator does not satisfactorily address the issue, the Complainant may within fifteen (15) days of the receipt of the response file a request to appeal the decision of the Coordinator to the Town Administrator or his/her designee.

Section 7: The Town or his/her designee will contact or meet with the Complainant to discuss the appeal within fifteen (15) calendar days of receipt of the appeal.

Section 8: The Town Administrator or his/her designee shall appeal to the appeal in writing or alternative format as appropriate within fifteen (15) calendar days of the appeal contact or meeting with a final resolution of the complaint. A copy of this correspondence and the original request to appeal will be sent to the Massachusetts Commission on Disabilities.

Section 9: All complaints alleging discrimination on the basis of a disability received by the ADA Coordinator, appeals to the Town Administrator or his/her designee, and responses from the ADA Coordinator, Town Administrator, or his/her designee will be retained by the Town of BERLIN for a minimum of three (3) years.

Section 10: Nothing in this Grievance Procedure shall preclude the Complainant from filing a complaint with: any appropriate state or federal agencies, or by the filing of a lawsuit in Federal Court.

Adopted by the Board of Selectmen 8/19/2019; updated 6/8/2023