



REASONABLE MODIFICATIONS REQUEST FORM

Please complete this form to request a reasonable modification of Valley Transit District ADA Paratransit bus service. Submit the completed form to the Reasonable Modification Coordinator via mail at 41 Main Street, Derby, CT 06418, or via email at rmrequests@valleytransit.org.

Date: _____ Name: _____

Phone Number: _____ Email: _____

Address: _____

Description of Request: _____

Are you able to ride without this modification? _____

Comments regarding a reasonable modification request can be sent to rmrequests@valleytransit.org or call 203-735-6824 ext. 101