Civil Rights Complaint Form

Memorial-Heights Redevelopment Authority (MHRA) 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, national origin, or disability, as provided by Title VI of the Civil Rights Act of 1964 and the American with Disabilities Act (ADA), as amended. Civil Rights complaints must be filed within 180 days from the date of the alleged discrimination.

Memorial-Heights Redevelopment Authority, 1980 Post Oak Blvd., Suite 1380 Houston, TX 77056, 713-850-9000, info@memorialheightstirz5.com

SECTION I: TYPE OF COMMENT (Choose One)									
RACE		COLOR		NATIONAL ORIGIN		LIMITED ENGLISH PROFICENCY		DISABILITY (ADA)	

SECCIÓN II: INFORMACIÓN DE CONTACTO							
Salutation (Mr/Mrs./Ms).							
Name							
Street Address							
City, State, ZIP Code							
Telephone							
E-mail Address							
Accessible Format	LARGE PRINT		TDD/RELAY		AUDIO		OTHER	

SECTION III: COMMENT DETAILS	
Project	
Date & Time of Occurrence	
Name of Individuals Involved	
Location of Incident	
If any information is unknown, please provide descriptive information here	
Description of Incident	

SECTION IV: FOLLOW UP			
May we contact you if we need more details or information?		Yes	No
What is the best way to reach you?	Phone	E-mail	Mail