

Reasonable Accommodation Request Form

Name _____

Date _____ Phone Number _____

Email _____

Address _____

Description of Request: _____

Service and/or Location:

Are you able to ride without this accommodation?

Please complete this form to request a reasonable accommodation from Daniel Boone Transit (DBT). Submit the completed form to DBT at:

Email: Whitney.Arnett@danielboonecaa.org

Fax: 606-598-4330

Mail: Daniel Boone Transit (DBT)

Attn: Whitney Arnett

1535 Shamrock Road, Manchester, KY 40962