



Village of Lemont Grievance Procedures Under The Americans with Disabilities Act

This Grievance Procedure is established to meet the requirements of the American with Disabilities Act of 1990 ("ADA"). It may be used by anyone who wishes to file a complaint alleging discrimination on the basis of disability in the provision of services, activities, programs, or benefits by the Village of Lemont. The Village's Personnel Policy governs employment related complaints of disability discrimination.

The complaint should be in writing and contain information about the alleged discrimination such as name, address, phone number of complainant and location, date, and description of the problem. Alternative means of filing complaints, such as personal interviews or a tape recording of the complaint, will be made for persons with disabilities upon request.

The complaint should be submitted by the complainant and/or his/her designee to the ADA Coordinator as soon as possible but no later than 60 calendar days after the alleged violation to. The ADA Coordinator for the Village of Lemont is:

Stacy Patrianakos, Human Resources Manager
418 Main St.
Lemont, IL 60439
Email: spatrianakos@lemont.il.us

Within 15 calendar days after receipt of the complaint, the ADA Coordinator or his/her designee will meet with the complainant to discuss the complaint and the possible resolutions. Within 15 calendar days of the meeting, ADA Coordinator or his/her designee will respond in writing, and where reasonable accommodations are requested, in a format accessible to the complainant, such as large print, Braille, or audio tape. The response will explain the position of the Village of Lemont and offer options for substantive resolution of the complaint.

If the response by the ADA Coordinator or his/her designee does not satisfactorily resolve the issue, the complainant and/or his/her designee may appeal the decision within 15 calendar days after receipt of the response to the Village Administrator or his/her designee.

Within 15 calendar days after receipt of the appeal, the Village Administrator or his/her designee will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days after the meeting, the Village Administrator or his/her designee will respond in writing, and, where appropriate, in a format accessible to the complainant, with a final resolution of the complaint.

All written complaints received by the ADA Coordinator or his/her designee, appeals to the Village Administrator or his/her designee, and responses from these two offices will be retained by the Village of Lemont for at least three years.



Village of Lemont
ADA Grievance Form

Name: _____ Date of Occurrence: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Email: _____

Please provide a complete description of your grievance:

Please specify the location of your grievance:

Please state what you think should be done to resolve the grievance:

Please attach additional pages or photo(s) as needed.

Signature: _____ Date: _____

Please return to:
Stacy Patrianakos, ADA Coordinator, 418 Main St., Lemont, IL 60439
Email: spatrianakos@lemont.il.us

Upon request, reasonable accommodations will be provided in completing this form.
Contact Stacy Patrianakos, ADA Coordinator, 418 Main St., Lemont, IL 60439
Phone: (630) 257-1552
Email: spatrianakos@lemont.il.us