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## **NOTICE UNDER THE AMERICANS WITH DISABILITIES ACT**

In accordance with the requirements of title II of the Americans with Disabilities Act of 1990 ("ADA"), the **City of Wilson** will not discriminate against qualified individuals with disabilities on the basis of disability in its services, programs, or activities.

**Employment:** The **City of Wilson** does not discriminate on the basis of disability in its hiring or employment practices and complies with all regulations promulgated by the U.S. Equal Employment Opportunity Commission under title I of the ADA.

**Effective Communication:** The **City of Wilson** will generally, upon request, provide appropriate aids and services leading to effective communication for qualified persons with disabilities so they can participate equally in The **City of Wilson's** programs, services, and activities, including qualified sign language interpreters, documents in Braille, and other ways of making information and communications accessible to people who have speech, hearing, or vision impairments.

**Modifications to Policies and Procedures:** The **City of Wilson** will make all reasonable modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy all of its programs, services, and activities. For example, individuals with service animals are welcomed in the **City of Wilson** offices, even where pets are generally prohibited.

Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a program, service, or activity of The **City of Wilson**, should contact the office of:

**Renee Smith**  
**Human Relations Director**  
**City of Wilson**  
**P.O. Box 10**  
**Wilson, NC 27894**  
**252-399-2309**

as soon as possible but no later than 48 hours before the scheduled event.

The ADA does not require the **City of Wilson** to take any action that would fundamentally alter the nature of its programs or services, or impose an undue financial or administrative burden.

Complaints that a program, service, or activity of the **City of Wilson** is not accessible to persons with disabilities should be directed to:

**Renee Smith**  
**Human Relations Director**  
**City of Wilson**  
**P.O. Box 10**  
**Wilson, NC 27894**  
**252-399-2309.**

The **City of Wilson** will not place a surcharge on a particular individual with a disability or any group of individuals with disabilities to cover the cost of providing auxiliary aids/services or reasonable modifications of policy, such as retrieving items from locations that are open to the public but are not accessible to persons who use wheelchairs.

## **Grievance Procedure under The Americans with Disabilities Act**

This Grievance Procedure is established to meet the requirements of the Americans 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 **City of Wilson**. The **City of Wilson** 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 available for persons with disabilities upon request.

The complaint should be submitted by the grievant and/or his/her designee as soon as possible but no later than 60 calendar days after the alleged violation to:

**Renee Smith, Human Relations Director**  
**City of Wilson**  
**P.O. Box 10**  
**Wilson, NC 27894**  
**252-399-2309**

Within 15 calendar days after receipt of the complaint, **Renee Smith** or her designee will meet with the complainant to discuss the complaint and the possible resolutions. Within 15 calendar days of the meeting, **Renee Smith** or her designee will respond in writing, and where appropriate, in a format accessible to the complainant, such as large print, Braille, or audio

tape. The response will explain the position of the **City of Wilson** and offer options for substantive resolution of the complaint.

If the response by **Renee Smith** or 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 **City Manager** or their designee

Within 15 calendar days after receipt of the appeal, the [**City Manager/County Commissioner/ other appropriate high-level official**] or [*his/her*] designee will meet with the complainant to discuss the complaint and possible resolutions. Within 15 calendar days after the meeting, the **City Manager** or their 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 **Renee Smith** or her designee, appeals to the **City Manager** or their designee, and responses from these two offices will be retained by the **City of Wilson** for at least three years.