



## ADA CITIZEN REQUEST FOR ACCOMMODATION

DATE \_\_\_\_\_

Person Submitting Request \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Request is made on behalf of myself      Yes \_\_\_\_\_      No \_\_\_\_\_

If request is made on behalf of another person, please provide the name of the person on whose behalf the request is being submitted \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

**Individuals with disabilities who wish to participate in County programs, services, or activities and who need an accommodation in order to do so are invited to present their requests for accommodation to the County by completing this Request for Accommodation form or by calling (864) 898-5940.**

**Please indicate the type of accommodation you are requesting below:**

- Community Services

Name of Activity or Service \_\_\_\_\_

Date(s) of Activity or Service \_\_\_\_\_

Location \_\_\_\_\_

- Board/Commission Meeting

Description of Meeting \_\_\_\_\_

Date \_\_\_\_\_ Location \_\_\_\_\_

*Pickens County is an equal opportunity provider and employer.*

- Access to County Department or Public Hearing

Department or Hearing Description \_\_\_\_\_

Date \_\_\_\_\_ Location \_\_\_\_\_

**Please describe the nature of the specific accommodations you are requesting. If you perceive multiple options that would satisfy your request, please indicate all possible options.**

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Signature of Person Completing Request \_\_\_\_\_

Individuals with questions concerning Requests for Reasonable Accommodation may contact the Pickens County ADA Coordinator, at Pickens County Human Resources Department, (864) 898-5940.

222 McDaniel Ave B-14  
Human Resource Department  
Pickens, SC 29671  
Phone: (864) 898-5940  
Fax: (864)898-1873  
Email: [mikeh@co.pickens.sc.us](mailto:mikeh@co.pickens.sc.us)