Reasonable Modification Request Form

Please complete this form to request reasonable modification of Liberty Transit Services and submit the completed form to the Transit Director libertytransit@cityofhinesville.org or by mail 115 East MLK Jr Dr. Hinesville, Ga. 31313

Name: _____ **Today's Date:** _____

Email Address: _____ **Phone Number:** _____

Street Address: _____

City: _____ **Zip Code:** _____

Description of Your Reasonable Request:

_____

_____

_____

_____

Specific location where we may need to take action: (if applicable)

_____

_____

Are you able to use Liberty Transit Services without this modification?

( ) **Yes** ( ) **No**

Please explain:

_____

_____