

Title VI Complaint Form

Please provide the following information necessary in order to process your complaint. Assistance is available upon request. Upon completion, this form will be:

IF EMAILED: DGillam@flybirmingham.com

IF MAILED: Birmingham Airport Authority
 ATTN: Diane Gillam
 Title VI Program Manager
 5900 Messer Airport Highway
 Birmingham, Alabama 35212

COMPLAINANT'S NAME:

ADDRESS:

STREET ADDRESS:

CITY STATE ZIP CODE

TELEPHONE NUMBER (Home):

Person filling out the form (if other than complainant):

ADDRESS:

STREET ADDRESS:

CITY

STATE

ZIP CODE

DATE OF THE INCIDENT:

DESCRIBE HOW YOUR RIGHTS WERE VIOLATED. WHAT HAPPENED AND WHO WAS RESPONSIBLE:

WHAT BIRMINGHAM AIRPORT AUTHORITY EMPLOYEE(S) WAS/WERE INVOLVED? i.e. Driver, Call Center, Security Officer, Other

WHERE DID THE INCIDENT TAKE PLACE? PLEASE PROVIDE LOCATION, TIME, DATE, ETC.
