

# Title VI Program Guidance

The following information is provided for guidance purposes only. For further guidance see Federal Transit Administration (FTA) Circular 4702.1B. If the subrecipient agency chooses to utilize this document in preparation of their Title VI Program plan, please ensure that all sections are specifically updated to reflect the subrecipient’s policies and procedures.

Additionally, subrecipients must certify that the policies and procedures listed in this plan will be implemented. Compliance Audits and/or field reviews by the **City of Phoenix Public Transit Compliance** Division will be conducted based on the subrecipients compliance with the submitted Title VI Program plan.

**\*Delete the Title VI Program Guidance page at the time of final plan submission. Please address all areas of the checklist prior to final plan submission. Please delete all instructional language that is underlined and italicized prior to plan submittal. Remove all template yellow and gray highlights prior to final plan submission.**

This Checklist has been created to assist you with incorporating the required program plan elements of your Title VI Plan, per FTA C 4102.1B Chapter III.

| Title VI Program Plan Requirements – FTA Circular 4102.1 B - Chapter III | Primary Recipient – City of Phoenix | 5307 Subrecipients |
|--|-------------------------------------|--------------------|
| Cover Page   | Required                            | Required           |
| Table of Contents  | Required                            | Required           |
| Signed Title VI Assurance  | Required                            | Required           |
| Notice to the Public   | Required                            | Required           |
| Complaint Procedures   | Required                            | Can use Primary’s  |
| Complaint Form   | Required                            | Can use Primary’s  |
| Public Participation Plan  | Required                            | Can use Primary’s  |
| Language Assistance Plan   | Required                            | Can use Primary’s  |
| List of Complaints   | Required                            | Required           |
| Non-elected Transit Boards, Committees, Councils w/Racial Makeup         | Required                            | Required           |
| Facility Title VI Equity Analysis  | Required                            | Required           |
| Regional System Wide Standards and Policies                              | Required                            | Required           |
| Service and Fare Policy Changes  | Required                            | Required           |
| Monitoring for Subrecipient Title VI Compliance                          | Required                            | Required           |
| Governing Body Approval of Title VI Plan (Board of Directors)            | Required                            | Required           |
| List of Public Outreach to Minorities                                    | Required                            | Required           |
| Civil Rights Website Compliance  | Required                            | Required           |

---

# *Title VI Implementation Plan*

---

***[Optional] Insert town/agency  
picture here***

***Enter 3-year plan  
implementation dates  
(Ex: December 1, 2018-November 30, 2021)***

# Contents

---

|   |    |
|---|----|
| Title VI Policy Statement .....                         | 3  |
| Title VI Notice to the Public .....                     | 4  |
| Title VI Notice to the Public -Spanish.....             | 5  |
| Title VI Complaint Procedures.....                      | 6  |
| Title VI Complaint Form .....                           | 7  |
| Title VI Investigations, Complaints, and Lawsuits ..... | 9  |
| Public Participation Plan.....                          | 10 |
| Limited English Proficiency Plan .....                  | 12 |
| Non-elected Committees Membership Table .....           | 15 |
| Title VI Equity Analysis .....                          | 16 |
| Board Approval for the Title VI Program.....            | 19 |

# Title VI Policy Statement

---

The TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE policy assures full compliance with Title VI of the Civil Rights act of 1964 and related statutes and regulations in all programs and activities. Title VI states that “no person shall on the grounds of race, color or national origin be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination” under any TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE sponsored program or activity. There is no distinction between the sources of funding.

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE also assures that every effort will be made to prevent discrimination through the impacts of its programs, policies and activities on minority and low-income populations. Furthermore, TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE will take reasonable steps to provide meaningful access to services for persons with limited English proficiency.

When TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE distributes Federal-aid funds to another entity/person, TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE will ensure all subrecipients fully comply with TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE Title VI Nondiscrimination Program requirements. The TITLE OF HIGHEST RANKING OFFICIAL has delegated the authority to TYPE AGENCY PERSON RESPONSIBLE FOR TITLE VI , Title VI Program Coordinator, to oversee and implement FTA Title VI requirements.

\_\_\_\_\_  
NAME AND TITLE OF HIGHEST RANKING OFFICIAL

# Title VI Notice to the Public

---

## Notifying the Public of Rights Under Title VI **TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE**

The TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE operates its programs and services without regard to race, color, or national origin in accordance with Title VI of the Civil Rights Act of 1964. Any person who believes she or he has been aggrieved by any unlawful discriminatory practice under Title VI may file a complaint with the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE.

For more information on the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE's civil rights program, and the procedures to file a complaint, contact TYPE TITLE VI CONTACT PERSON TYPE TITLE VI CONTACT PERSON PHONE NUMBER HERE, (TTY TYPE YOUR TTY NUMBER HERE); email TYPE TITLE VI PERSONS EMAIL HERE; or visit our administrative office at TYPE YOUR ADDRESS HERE. For more information, visit TYPE YOUR WEB ADDRESS HERE

A complainant may file a complaint directly with the City of Phoenix Public Transit Department or the Federal Transit Administration (FTA) by filing a complaint directly with the corresponding offices of Civil Rights: City of Phoenix Public Transit Department: ATTN: Title VI Coordinator, 302 N. 1<sup>st</sup> Ave., Suite 900, Phoenix AZ 85003 FTA: ATTN: Title VI Program Coordinator, East Building, 5<sup>th</sup> Floor-TCR 1200 New Jersey Ave., SE Washington DC 20590

If information is needed in another language, contact TYPE ALTERNATE LANGUAGE PHONE NUMBER HERE. Para información en Español llame: TYPE NAME AND CONTACT INFORMATION HERE

**MAKE SURE THE SENTENCE ABOVE IS ALSO PROVIDED IN ANY LANGUAGE(S) SPOKEN BY LEP POPULATIONS THAT MEET THE SAFE HARBOR THRESHOLD**

# Title VI Notice to the Public -Spanish

---

## **Aviso al Público Sobre los Derechos Bajo el Título VI TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE**

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE *(y sus subcontratistas, si cualquiera)* asegura cumplir con el Título VI de la Ley de los Derechos Civiles de 1964. El nivel y la calidad de servicios de transporte serán provehidos sin consideración a su raza, color, o pais de origen.

Para obtener más información sobre la TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE's programa de derechos civiles, y los procedimientos para presentar una queja, contacte TYPE TITLE VI CONTACT PERSON TYPE TITLE VI CONTACT PERSON PHONE NUMBER HERE, (TTY TYPE YOUR TTY NUMBER HERE); o visite nuestra oficina administrativa en TYPE YOUR ADDRESS HERE. Para obtener más información, visite TYPE YOUR WEB ADDRESS HERE

El puede presentar una queja directamente con City of Phoenix Public Transit Department o Federal Transit Administration (FTA) mediante la presentación de una queja directamente con las oficinas correspondientes de Civil Rights: City of Phoenix Public Transit Department: ATTN Title VI Coordinator 302 N. 1<sup>st</sup> Ave., Suite 900, Phoenix AZ 85003 FTA: ATTN Title VI Program Coordinator, East Building, 5th Floor –TCR 1200 New Jersey Ave., SE Washington DC 20590

*The above notice is posted in the following locations: TYPE HERE WHERE THE NOTICE IS POSTED. At a minimum it must be posted online and in the public areas of the agency's/transit provider's office(s). This notice should also be posted at stations, stops, and on transit vehicles*

*This notice is posted online at TYPE URL HERE*

# Title VI Complaint Procedures

---

**[INSTRUCTIONS]** The City of Phoenix has several templates that your agency may use. Please request the templates through the Title VI Coordinator. Should the agency choose to develop their own procedures the reporting requirements must meet 49 CFR Section 21.9 (b). Procedures must aide in investing and tracking Title VI complaints files against them. Procedures and complaint forms must be made available on the agency's website in both English and Spanish.

# Title VI Complaint Forms

## TITLE VI COMPLAINT FORM

Any person who believes that he or she has been discriminated against by Valley Metro or City of Phoenix or any of its service providers and believes the discrimination was based upon race, color or national origin, may file a formal complaint with Valley Metro Customer Service.

Please provide the following information to process your complaint. Alternative formats and languages are available upon request. You can reach Customer Service at 602.253.5000 (TTY: 602.251.2039) or via email at [csr@valleymetro.org](mailto:csr@valleymetro.org).

### SECTION 1: CUSTOMER INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Preferred method of contact:  Phone  Email

### SECTION 2: INCIDENT INFORMATION

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_  AM  PM City: \_\_\_\_\_  
Incident Location: \_\_\_\_\_ Direction of Travel: \_\_\_\_\_  
Route #: \_\_\_\_\_ Bus/Light Rail/Streetcar #: \_\_\_\_\_  
Service Type:  Local Bus  Express/RAPID  Circulator/Connector  Light Rail  Streetcar  Dial-a-Ride  
Operator Name: \_\_\_\_\_  
Operator Description: \_\_\_\_\_  
What was the discrimination based on (Check all that apply):  Race  Color  National Origin  Other \_\_\_\_\_

Explain as clearly as possible what happened and why you believe you were discriminated against. Describe all persons who were involved. Include the name and contact information of the person(s) who discriminated against you (if known), as well as names and contact information of any witnesses. If more space is needed, please use the back of this form. You may also attach any written materials or other information relevant to your complaint.

Have you filed this complaint with the Federal Transit Administration (FTA)?  Yes  No  
If yes, please provide information about a contact person at the FTA where the complaint was filed:  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you previously filed a Title VI complaint with this agency?  Yes  No  
Signature and date required below:

Signature \_\_\_\_\_  
Date \_\_\_\_\_





## FORMA DE RECLAMACIÓN BAJO EL TÍTULO VI

Cualquier persona que crea que ha sido discriminada por Valley Metro o la Ciudad de Phoenix o por cualquiera de sus proveedores de servicios y cree que la discriminación fue basada en su raza, color u origen nacional, puede registrar una queja formal ante el Servicio al Cliente de Valley Metro.

Por favor provea la siguiente información para procesar su queja. Hay formatos e idiomas alternativos disponibles si se solicitan. Usted se puede comunicar con el Servicio al Cliente llamando al 602.253.5000 (TTY: 602.251.2039) ó por correo electrónico a [csr@valleymetro.org](mailto:csr@valleymetro.org).

### SECCIÓN 1: INFORMACIÓN DEL CLIENTE

Nombre: \_\_\_\_\_ Apellido: \_\_\_\_\_  
Domicilio: \_\_\_\_\_  
Ciudad: \_\_\_\_\_ Estado: \_\_\_\_\_ Código Postal: \_\_\_\_\_  
Teléfono del Hogar: \_\_\_\_\_ Teléfono Celular: \_\_\_\_\_  
Correo Electrónico: \_\_\_\_\_ Método preferido de contacto:  Teléfono  Correo Electrónico

### SECCIÓN 2: INFORMACIÓN SOBRE EL INCIDENTE

Fecha del Incidente: \_\_\_\_\_ Hora del Incidente: \_\_\_\_\_  AM  PM Ciudad: \_\_\_\_\_  
Ubicación del Incidente: \_\_\_\_\_ Dirección del Viaje: \_\_\_\_\_  
Ruta #: \_\_\_\_\_ Autobús/Tren Ligero/Tranvía #: \_\_\_\_\_  
Tipo de Servicio  Autobús Local  Express/RAPID  Circulador/Conector  Tren Ligero  Tranvía  Dial-a-Ride  
Nombre del/la Operador/a: \_\_\_\_\_  
Descripción del/la Operador/a: \_\_\_\_\_  
¿En qué se basó la discriminación? (Marque todo lo que sea aplicable):  
 Raza  Color  Origen Nacional  Otro \_\_\_\_\_

Explique lo más claramente posible lo que sucedió y por qué cree usted que se le discriminó. Describa a todas las personas que estuvieron involucradas. Incluya el nombre y la información de contacto de la/s persona/s que le discriminó/aron (si los conoce), así como los nombres y la información de contacto de cualquier testigo. Si se necesita más espacio, por favor use el reverso de esta forma. Usted también puede adjuntar cualquier material por escrito u otra información relevante a su queja.

¿Ha usted registrado esta queja ante la Administración Federal de Transporte (FTA por sus siglas en inglés)?  Sí  No  
Si contestó Sí, por favor provea información sobre una persona de contacto en la administración FTA donde se registró la queja:

Nombre: \_\_\_\_\_ Título: \_\_\_\_\_  
Domicilio: \_\_\_\_\_ Teléfono: \_\_\_\_\_

¿Ha usted registrado previamente una queja bajo el Título VI ante esta agencia?  Sí  No

Firma y fecha requeridas abajo:

Firma \_\_\_\_\_  
Fecha \_\_\_\_\_



**[INSTRUCTIONS]** Your agency may adopt the City of Phoenix/Valley Metro Title VI Complaint Forms above, or you may use your own agency complaint forms. Should you choose to use your agency's forms, must include the complainant's name, race, ethnicity, national origin, the nature of the complaint, the dates of the complaint, requested action, and contact information.

# Title VI Investigations, Complaints, and Lawsuits

| Description/Name      | Date (Month, Day, Year) | Summary (include basis of complaint: race, color, national origin or disability) | Status | Action(s) Taken (Final findings?) |
|-----------------------|-------------------------|--|--------|-----------------------------------|
| <b>Investigations</b> |                         |  |        |                                   |
| 1)                    |                         |  |        |                                   |
| 2)                    |                         |  |        |                                   |
| <b>Lawsuits</b>       |                         |  |        |                                   |
| 1)                    |                         |  |        |                                   |
| 2)                    |                         |  |        |                                   |
| <b>Complaints</b>     |                         |  |        |                                   |
| 1)                    |                         |  |        |                                   |
| 2)                    |                         |  |        |                                   |

This form will be submitted annually. If no investigations, lawsuits, or complaints were filed, a blank form will be submitted.

TYPE AGENCY NAME HERE has not had any Title VI complaints, investigations, or lawsuits in TYPE YEAR HERE.

*TYPE YOUR  
AGENCY/TRANSIT  
PROVIDER NAME HERE  
Public Participation  
Plan*

---

***[Optional]*** *Insert town/agency  
picture here*

**[INSTRUCTIONS]** A Public Participation Plan or process is a document which explicitly describes proactive strategies, procedures, and desired outcomes that underpin the recipient's participation activities. Your agency has wide latitude to determine how, when, and how often specific public participation activities should take place, and which specific measures are most appropriate. Your agency should make your analysis based on a demographic analysis of the populations affected, the type of plan, program and/or service under consideration, and the resources available. If you have any questions or concerns while building your Public Participation Plan, please contact the City of Phoenix Public Transit Department at 602.262.4507 and ask to speak with the Title VI Coordinator.

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE is engaging the public in its planning and decision-making processes, as well as its marketing and outreach activities. The public will be invited to participate in the process whether through public meetings or surveys. As an agency receiving federal financial assistance, TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE made the following community outreach efforts:

List all public meetings or public hearings that the agency conducts. List all publications, public announcements. Include frequency

In the upcoming year TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE will make the following community outreach efforts:

List all upcoming public meetings or public hearings that the agency will conduct. Include frequency.

#### **Public Meetings:**

- (1) Public meetings are scheduled to increase the opportunity for attendance by stakeholders and the general public. This may require scheduling meetings during non-traditional business hours, holding more than one meeting at different times of the day or on different days, and checking other community activities to avoid conflicts.
- (2) When a public meeting or public hearing is focused on a planning study or program related to a specific geographic area or jurisdiction within the region, the meeting or hearing is held within that geographic area or jurisdiction.
- (3) Public meetings are held in locations accessible to people with disabilities and are located near a transit route when possible.

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE submits to the Arizona Department of Transportation annually an application for funding. Part of the annual application is a public notice, which includes a 30-day public comment period.

TYPE YOUR  
AGENCY/TRANSIT  
PROVIDER NAME HERE

---

*Limited English Proficiency Plan*

---

**[Optional]** *Insert town/agency  
picture here*

**[INSTRUCTIONS]** A Limited English Proficiency Plans (LEP)/ or Language Access Plans is a document which explicitly describes the proactive strategies, procedures, and desired outcomes to ensure meaningful access to benefits, services, information, and other important portions of programs and activities for individuals who are Limited-English Proficient (LEP). Your agency is strongly encouraged to review DOT’s LEP guidance for additional information (70 FR 74087, Dec. 14, 2005) <http://www.gpo.gov/fdsys/pkg/FR-2005-12-14/pdf/05-23972.pdf>. Additionally, your agency is also encouraged to review DOJ’s guidelines on self-assessment, Language Access Assessment and Planning Tool for Federally Conducted and Federally Assisted Programs (May 2011), as well as other materials, available at [www.lep.gov](http://www.lep.gov). After completing the Four Factor Analysis, use the results of the analyses to determine which language assistance services are appropriate. Additionally, the recipient shall develop an assistance plan to address the identified needs of the LEP population(s) it serves. Your agency should make your analysis based on a demographic analysis of the populations affected, the type of plan, program and/or service under consideration, and the resources available. If you have any questions or concerns while building your Limited English Proficiency Plan/Language Access Plan, please contact the City of Phoenix Public Transit Department Title VI Coordinator (602) 262.4507.

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE has developed the following Limited English Proficiency Plan (LEP) to help identify reasonable steps to provide language assistance for LEP persons seeking meaningful access to TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE services as required by Executive Order 13166. A Limited English Proficiency person is one who does not speak English as their primary language and who has a limited ability to read, speak, write, or understand English.

This plan details procedures on how to identify a person who may need language assistance, the ways in which assistance may be provided, training to staff, notification to LEP persons that assistance is available, and information for future plan updates. In developing the plan while determining the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE’s extent of obligation to provide LEP services, the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE undertook a U.S. Department of Transportation four-factor LEP analysis which considers the following:

- 1) The number or proportion of LEP persons eligible in the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE service area who may be served or likely to encounter by TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE program, activities, or services;
- 2) The frequency with which LEP individuals come in contact with an TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE services;
- 3) The nature and importance of the program, activities or services provided by the TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE to the LEP population; and

- 4) The resources available to TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE and overall costs to provide LEP assistance. A brief description of these considerations is provided in the following section.

A statement in *Spanish or specific language per your community make up* will be included in all public outreach notices. Every effort will be made to provide vital information to LEP individuals in the language requested. *List all other efforts to provide services to LEP individuals*

### **Safe Harbor Provision**

TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE complies with the Safe Harbor Provision, as evidenced by the number of documents available in the Spanish language. With respect to Title VI information, the following shall be made available in Spanish:

- (1) Title VI Notice
- (2) Complaint Procedures
- (3) Complaint Form

In addition, we will conduct our marketing (including using translated materials) in a manner that reaches each LEP group. Vital Documents include the following:

- (1) Notices of free language assistance for persons with LEP
- (2) Notice of Non-Discrimination and Reasonable Accommodation
- (3) Outreach Materials
- (4) Bus Schedules
- (5) Route Changes
- (6) Public Hearings

# Non-elected Committees Membership Table

A sub recipient who selects the membership of transit-related, non-elected planning boards, advisory councils, or committees must provide a table depicting the membership of those organizations broken down by race. Subrecipients also must include a description of the efforts made to encourage participation of minorities on these boards, councils, and committees.

Table Depicting Membership of Committees, Councils, Broken Down by Race

| Body                                       | Caucasian       | Latino          | African American | Asian American  | Native American |
|--|-----------------|-----------------|------------------|-----------------|-----------------|
| <b>Population</b>                          | TYPE %<br>HERE% | TYPE %<br>HERE% | TYPE %<br>HERE%  | TYPE %<br>HERE% | TYPE %<br>HERE% |
| <b>TYPE THE NAME OF THE COMMITTEE HERE</b> | TYPE %<br>HERE% | TYPE %<br>HERE% | TYPE %<br>HERE%  | TYPE %<br>HERE% | TYPE %<br>HERE% |
| <b>TYPE THE NAME OF THE COMMITTEE HERE</b> | TYPE %<br>HERE% | TYPE %<br>HERE% | TYPE %<br>HERE%  | TYPE %<br>HERE% | TYPE %<br>HERE% |
| <b>TYPE THE NAME OF THE COMMITTEE HERE</b> | TYPE %<br>HERE% | TYPE %<br>HERE% | TYPE %<br>HERE%  | TYPE %<br>HERE% | TYPE %<br>HERE% |

Describe the process the agency uses to encourage the participation of minorities on such committees should be included

TYPE AGENCY NAME HERE does NOT select the membership of any transit-related committees, planning boards, or advisory councils.



# Monitoring for Subrecipient Title VI Compliance

# Title VI Equity Analysis

---

A sub recipient planning to acquire land to construct certain types of facilities must not discriminate on the basis of race, color, or national origin, against persons who may, as a result of the construction, be displaced from their homes or businesses. “Facilities” in this context does not include transit stations or bus shelters, but instead refers to storage facilities, maintenance facilities, and operation centers.

There are many steps involved in the planning process prior to the actual construction of a facility. It is during these planning phases that attention needs to be paid to equity and non-discrimination through equity analysis. The Title VI Equity Analysis must be done before the selection of the preferred site.

**Note: Even if facility construction is financed with non-FTA funds, if the sub recipient organization receives any FTA dollars, it must comply with this requirement.**

The TYPE AGENCY NAME has no current or anticipated plans to develop new transit facilities covered by these requirements. No facilities covered by these requirements were developed since DATE SINCE LAST FACILITY WAS BUILT. **\*Please delete this section if it does not apply to your agency. If it does, please delete the below text in this section.**

## A. Introduction

Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving Federal financial assistance. Per 49 CFR 21.9(b)(3), recipients may not select the site or location of facilities with the purpose or effect of excluding persons from, denying the benefits of, or subjecting them to discrimination on the basis of race, color, or national origin. Additionally, the location of projects requiring land acquisition and the displacement of persons from their residences and business may not be determined on the basis of race, color, or national origin.

This document is an analysis of TYPE YOUR AGENCY/TRANSIT PROVIDER NAME HERE’s planned TYPE PROPOSED MONTH/YEAR OF AGENCY COMPLETION TYPE AGENCY HERE (Facility Construction Only)

## B. Background

DESCRIBE THE AGENCY(why it was proposed, the projected benefits of the project, etc.)

## C. Analysis

For facilities covered by this provision, recipients are required to:

- 1) Complete a Title VI equity analysis during the planning state with regard to where an agency is located to ensure the location is selected without regard to race, color, or national origin, and engage in outreach to persons potentially impacted by siting of facilities. The Title VI equity analysis must compare the equity impacts of various siting alternatives, and the analysis must occur before the selection of the preferred site.

- 2) Give attention to other facilities with similar impacts in the area to determine if any cumulative adverse impacts might result. Analysis should be done at the Census tract or block group level where appropriate to ensure proper analysis of localized impacts.
- 3) Provide substantial legitimate justification for locating an agency in a location that will result in a disparate impact on the basis of race, color, or national origin, and show that there are no alternative locations that would have a less disparate impact on the basis of race, color, or national origin. In order to show that both tests have been met, the recipient must consider and analyze alternatives to determine whether those alternatives would have less of a disparate impact on the basis of race, color, or national origin, and then implement the least discriminatory alternative.

# Regional System Wide Standards and Policies

# Service and Fare Policy Changes

# Board Approval for the Title VI Program

---

ATTACH A COPY OF THE BOARD MEETING MINUTES HERE