

# **CBB WATER SYSTEM, INC.**

## **REASONABLE ACCOMMODATION POLICY (CUSTOMER SERVICE)**

### **1. Purpose**

CBB Water System, Inc. is committed to providing equal access to all water system services. We will provide reasonable accommodations to members, customers, and applicants with disabilities to ensure they can access, use, and pay for our services on an equal basis.

### **2. Scope**

This policy applies to all public interactions with CBB Water System, Inc. This includes applying for water service, paying bills, receiving system notices, and participating in public board meetings.

### **3. What is a Reasonable Accommodation?**

A reasonable accommodation is a change or modification to our standard rules, policies, practices, or services. Examples include, but are not limited to:

- Allowing a designated third party to receive copy notices regarding service or billing.
- Modifying communication methods for individuals with language barriers.
- Ensuring public meetings are held in physically accessible locations.

### **4. How to Request an Accommodation**

- **The Request:** Customers can request an accommodation at any time in any format. Requests can be made verbally at the office or by phone (318) 965-0015 or in writing to any system representative or board member (CBB Water System, Inc., PO Box 91, Benton, LA 71006 or via mail [cbbwsadm@gmail.com](mailto:cbbwsadm@gmail.com). Main contact is: System Administrator.
- **No Formal Terms:** You do not need to use legal language or formal terms to make a request. Simply explain what change you need and how it relates to your disability.

### **5. Review and Response**

- **Review:** The CBB Water System, Inc. management or board will review each request promptly.
- **Dialogue:** We may contact you to discuss your request and find the most effective solution.
- **Limitations:** We are not required to provide accommodations that cause an undue financial or administrative burden, or those that compromise the safety and regulatory compliance of the water supply system.

### **6. Confidentiality**

All personal and medical information shared during the accommodation process will be kept strictly confidential. It will only be used to implement the requested accommodation.

### **7. Grievance Policy and Procedure**

CBB has a grievance procedure to assist anyone who feels they have been subjected to discrimination on the basis of a disability. A form is available on request to facilitate the filing of such a grievance.

## SECTION 504 GRIEVANCE PROCEDURE

It is the policy of **CBB Water System, Inc.** not to discriminate on the basis of disability. **CBB Water System, Inc.** has adopted an internal grievance procedure providing for prompt and equitable resolution of complaints alleging any action prohibited by Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794) of the U.S. Department of Health and Human Services regulations implementing the Act. Section 504 prohibits discrimination on the basis of disability in any program or activity receiving Federal financial assistance. The Law and Regulations may be examined in the offices of **CBB Water System, Inc.** **Please contact Carl Mayer, System Administrator at (318-965-0015), Section 504 Coordinator**, who has been designated to coordinate the efforts of **CBB Water System, Inc.** to comply with Section 504.

Any person who believes she or he has been subjected to discrimination on the basis of disability may file a grievance under this procedure. It is against the law for **CBB Water System, Inc.** to retaliate against anyone who files a grievance or cooperates in the investigation of a grievance.

### Procedure:

- Grievances must be submitted to the Section 504 Coordinator within **fifteen calendar days** of the date the person filing the grievance becomes aware of the alleged discriminatory action.
- A complaint must be in writing, containing the name and address of the person filing it. The complaint must state the problem or action alleged to be discriminatory and the remedy\*or relief sought.
- The Section 504 Coordinator (or his designee) shall conduct an investigation of the complaint. This investigation may be informal, but it must be thorough, affording all interested persons an opportunity to submit evidence relevant to the complaint. The Section 504 Coordinator will maintain the files and records of (**CBB Water System, Inc.** relating to such grievances.
- The Section 504 Coordinator will issue a written decision on the grievance no later than 30 days after its filing.
  - The person filing the grievance may appeal the decision of the Section 504 Coordinator by writing to the **President of CBB Water System, Inc.** within 15 days of receiving the Section 504 Coordinator's decision. The **CBB Water System, Inc.** shall issue a written decision in response to the appeal no later than 30 days after its filing.
- The availability and use of this grievance procedure does not prevent a person from filing a complaint of discrimination on the basis of disability with the U. S. Department of Health and Human Services, Office for Civil Rights.

**CBB Water System, Inc.** will make appropriate arrangements to ensure that disabled persons are provided other accommodations, if needed, to participate in this grievance process. Such arrangements may include, but are not limited to, providing interpreters for the deaf, providing taped cassettes of material for the blind, or assuring a barrier-free location for the proceedings. The Section 504 Coordinator will be responsible for such arrangements.

## Section 504 Grievance Form

You have the right to file a grievance if you believe that you are being discriminated against on the basis of a disability. You may file a grievance of complaint with **(Insert System or Town name)** Section 504 Coordinator (or designee), who will investigate the allegations to the extent warranted by the nature of the complaint in an effort to reach a prompt and equitable resolution. The Section 504 Coordinator for Village of Chataignier:

**CBB Water System, Inc.**  
Attention: Section 504 Coordinator  
PO Box 91  
Benton, LA 71006  
318-965-0011

Name: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_

Address: \_\_\_\_\_

1. Summary of Grievance – What is the problem? What are the facts?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. How can the problem be solved?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Please describe any corrective action you wish to see taken with regard to this grievance.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please attach any additional information or documentation you wish the **CBB Water System, Inc.** to consider.

Received by: \_\_\_\_\_ Date: \_\_\_\_\_