



FASTTRAC! Suspension of Service Appeal

Section I

Name					
Street Address					
City		State		Zip Code	
Telephone (Home)		Client ID#			
Email Address					
Accessible Format Requirements (check all that apply)	Large Print	Audio Tape	TDD		
	Other (please detail)				

Section II

Are you filing this appeal on your own behalf? Yes* No

* If you answered "yes" to this question, please proceed to Section III.

If not, please supply the name and relationship of the person for whom you are appealing:

Please explain why you have filed for a third party:

Please confirm that you have obtained the permission of the appealing party if you are filing on behalf of a third party: Yes No

Section III

Please describe your appeal. You should include specific details such as reservation dates and times, reasons for the missed trips (either no shows or late cancelations), and any other information that would assist us in the investigation of your appeal. Please also provide any other documentation that is relevant to this appeal. You may attach additional sheets as necessary.

Section IV

Have you previously filed a suspension of service appeal with this agency? Yes No

Please submit this form in person, or mail to the address below:

FASTTRAC!
Attn: Paratransit Operations Manager
455 Grove Street
Fayetteville, NC 28301

If you require assistance in completing this form, you may call us at (910) 433-1232 (Option 3) to request an appointment.