Nassau County Florida Title VI/Nondiscrimination Policy and Plan for Sub-Recipients in the Local Agency Program (LAP)

Policy Statement:

The Nassau County Board of County Commissioners (County) values diversity and welcomes input from all interested parties, regardless of cultural identity, background or income level. Moreover, the County believes that the best programs and services result from careful consideration of the needs of all its communities and when those communities are involved in the transportation decision making process. Thus, the County does not tolerate discrimination in any of its programs, services or activities. Pursuant to Title VI of the Civil Rights Act of 1964 and other federal and state authorities, the County will not exclude from participation in, deny the benefits of, or subject to discrimination anyone on the grounds of race, color, national origin, sex, age, disability, religion, income or family status.

Complaint Procedures:

The County has established a discrimination complaint procedure and will take prompt and reasonable action to investigate and eliminate discrimination when found. Any person who believes that he or she has been subjected to discrimination based upon race, color, national origin, sex, religion, age, disability, family or income status in any of the County's programs, services or activities may file a complaint with the County Title VI/Nondiscrimination Coordinator:

Name: Ashley Metz, HR Director Nondiscrimination Coordinator

Address: 96135 Nassau Place, Suite 5 Address: Yulee, Florida 32097-8635 Email: ametz@nassaucountyfl.com

Phone: 904-530-6075 Fax: 904-321-5797

Hearing Impaired: 7-1-1 or 1-888-447-5620

If possible, the complaint should be submitted in writing and contain the identity of the complainant; the basis for the allegations (i.e., race, color, national origin, sex, religion, age, disability or family status); and a description of the alleged discrimination with the date of occurrence. If the complaint cannot be submitted in writing, the complainant should contact the Title VI/Nondiscrimination Coordinator for assistance.

The Title VI/Nondiscrimination Coordinator will respond to the complaint within thirty (30) calendar days and will take reasonable steps to resolve the matter. Should the County be unable to satisfactorily resolve a complaint, the County will forward the complaint, along with a record of its disposition to the appropriate District of the Florida Department of Transportation (FDOT).

The County's Title VI Coordinator has 'easy access' to the County Manager and is not required to obtain management or other approval to discuss discrimination issues with the County Manager. However, should the complainant be unable or unwilling to complain to the County, the written complaint may be submitted directly to Florida Department of Transportation (FDOT). FDOT will serve as a clearing house, forwarding the complaint to the appropriate state or federal agency:

Florida Department of Transportation Equal Opportunity Office ATTN: Title VI Complaint Processing 605 Suwannee Street MS 65 Tallahassee, FL 32399

ADA/504 Statement:

Section 504 of the Rehabilitation Act of 1973 (Section 504), the Americans with Disabilities Act of 1990 (ADA) and related federal and state laws and regulations forbid discrimination against those who have disabilities. Furthermore, these laws require federal aid recipients and other government entities to take affirmative steps to reasonably accommodate the disabled and ensure that their needs are equitably represented in transportation programs, services and activities.

The County will make every effort to ensure that its facilities, programs, services, and activities are accessible to those with disabilities. The County will make every effort to ensure that its advisory committees, public involvement activities and all other programs, services and activities include representation by the disabled community and disability service groups.

The County encourages the public to report any facility, program, service or activity that appears inaccessible to those who are disabled. Furthermore, the County will provide reasonable accommodation to disabled individuals who wish to participate in public involvement events or who require special assistance to access facilities, programs, services or activities. Because providing reasonable accommodation may require outside assistance, organization or resources, the County asks that requests be made at least ten (10) calendar days prior to the need for accommodation.

Questions, concerns, comments or requests for accommodation should be made to the county's ADA Officer:

Name: Nassau County ADA Advisory

Committee

ADA Coordinator: c/o William Stonebreaker Address: 45195 Musselwhite Road, Callahan, Fl

32011

Email: williams@nassucountyfl.com

Phone: 904-530-6120 Fax: 904-548-4687

Hearing Impaired: 7-1-1 or 1-888-447-5620

Public Involvement:

In order to plan for efficient, effective, safe, equitable and reliable transportation systems, the County must have the input of its public. The County holds transportation meetings, workshops and other events designed to gather public input on project planning and construction and strongly encourages the participation of the entire community. Further, the County attends and participates in other community events to promote its services to the public. Finally, the County is constantly seeking ways of measuring the effectiveness of its public involvement.

Persons wishing to request special presentations by the County; volunteer in any of its activities or offer suggestions for improvement of County public involvement may contact:

Name: Ashley Metz, HR Director

Title VI Coordinator

Address: 96135 Nassau Place, Suite 5 Address: Yulee, Florida 32097-8635 Email: ametz@nassaucountyfl.com

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Data Collection:

Federal Highway Administration regulations require federal-aid recipients to collect racial, ethnic and other similar demographic data on beneficiaries of or those affected by transportation programs, services and activities. The County accomplishes this using census data and American Community Survey reports. From time to time, the County may find it necessary to request voluntary identification of certain racial, ethnic or other data from those who participate in its public involvement events. This information assists the County with improving its targeted outreach and measures of effectiveness. Self-identification of personal data to the County will always be voluntary and anonymous. Moreover, the County will not release or otherwise use this data in any manner inconsistent with the federal regulations.

Assurances:

Every three years, or commensurate with a change in County executive leadership year, the County must certify to FHWA and FDOT that its programs, services and activities are being conducted in a nondiscriminatory manner. These certifications are termed 'assurances' and serve two important purposes. First, they document the County's commitment to nondiscrimination and equitable service to its community. Second, they serve as a legally enforceable agreement by which the County may be held liable for breach. The public may view the annual assurance on the County's website or by visiting the County's offices.

Revised: June 19, 2019

Nassau County Board of County Commissioners

Title VI / Nondiscrimination Program Complaint of Discrimination

Complainant(s) Name:				Complainant(s) Address:		
Complainant(s) Phone Number:						
Complainant's Representative's Name, Address, Phone Number and Relationship (e.g. friend, attorney, parent, etc):						
Name and Address of Agency, Institution, or Department Whom You Allege Discriminated Against You:						
Names of the Individual(s) Whom You Allege Discriminated Against You (If Known):						
Discrimination Because Of:	O Race	O Color	O National	Origin		
	O Sex	O Age	O Handicap/Disability		Date of Alleged Discrimination:	
	O Income Status	O Retaliation	O Other		2 and of American Discrimination.	
Please list the name(s) and phone number(s) of any person, if known, that the Nassau County Board of County Commissioners could contact for additional information to support or clarify your allegation(s).						
Please explain as clearly as possible how , why , when and where you believe you were discriminated against. Include as much background information as possible about the alleged acts of discrimination. Additional pages may be attached if needed.						
Complainant(s) or Complainant(s) Representatives Signature:				Date of Signature:		

Mail or Fax Completed Form to:

Name: Ashley Metz, HR Director Title VI/Nondiscrimination Coordinator 96135 Nassau Place, Yulee, FL 32097 (904) 530-6075 Fax #: (904) 321-5797

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