SAUNDERS COUNTY – Request for reasonable accommodations

Use this form to request an accommodation for department projects or meetings.

Meetings or Hearings ☐ Wheelchair-accessible meeting room ☐ Meeting room close to elevator or lobby				
Do you need a certified sign language interpreter?				
☐ Special assistance in evacuating facilities or notification in case of emergency (please explain):				
Other (please specify):				
OTHER ACCOMMODATIONS REQUESTED (please describe):				
equestor's Name (Area Code) Tel		(Area Code) Teleph	phone Number	
Street Address or P.O. Box	City		State	ZIP Code
mail Address		Date and Time Needed		
Office Use Only				
Request received by: Date:	Accommoda	ntion provided by:	Date:	

Submit your request by mail, fax, phone or email to:

Saunders County Attorney, Title VI and ADA Coordinator 387 N. Chestnut, Suite 1

Wahoo, NE 68066

Telephone: (402) 443-8151

Fax: (402) 443-4527