ARCHITECTURAL ACCESSIBILITY COMPLAINT FORM
Office of the Kansas Attorney General
attn.: LOGiC Division
120 S.W. 10th Ave., 2nd Floor
Topeka, KS 66612-1597

1. Date: _______________

2. Name of Complainant: _______________________

3. Address of Complainant: ______________________
   City, State, and Zip Code: __________________________________________

4. Name of Facility* that you contend does not comply with Title II or III of the
   Americans with Disabilities Act: __________________________

5. Facility Address: __________________________ City: ______________

6. Check if the facility is: (1) __ a school district facility; (2) __ a state government
   facility; (3) __ a local government facility; (4) __ a privately-owned facility open to
   the public (restaurant, hotel, theatre, retail store); or __ (5) a privately owned
   commercial facility (office building, factory, etc.).

   [The State cannot enforce accessibility standards in privately funded facilities built
   before 1992 that have never been remodeled or altered since 1992.]

7. Was the facility built or last renovated before 1992? __yes __no __don’t know.

8. State why you believe that the facility does not comply with Title II or III of the

   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________
   ____________________________________________________________________

Mail this form to the Attorney General’s office at the address at the top of the
page.

* “Facility” is defined as “all or any portion of buildings, structures, sites, complexes,
equipment, rolling stock or other conveyances, roads, walks, passageways, parking lots
or other real or personal property, including the site where the building, property, structure
or equipment is located.”