

Reasonable Modifications Request Form

Submit the completed form to Cherriots via email to: <i>ben.sawyer@cherriots.org</i> via fax at : 503-588-5119 , or via mail to: <i>Ben Sawyer</i> – ADA Coordinator Cherriots 555 Court Street NE, Suite 5230 Salem, OR 97301	
Name:	Date:
Email Address:	Phone Number:
Street Address:	
City:	Zip Code:
Description of Request:	
Location (if applicable):	
Are you able to ride without this modi	fication?
*Response to modification requests n	nay take up to ten days. To ensure a response,
please provide a phone number, ema	il, and/or mailing address.