



**SOUTHEAST AREA TRANSIT DISTRICT:  
REASONABLE MODIFICATIONS REQUEST FORM**

Please complete this form to request a reasonable modification of Southeast Area Transit District bus services. Submit the completed form by:

- Form can fax the request to 860-886-6097 Attn: Reasonable Modifications Coordinator
- Send via email to our Reasonable Modifications Request Coordinator at [csimpson@seatransit.org](mailto:csimpson@seatransit.org)
- Mail a request to: SEAT Reasonable Modifications  
21 Route 12  
Preston, CT 06365

Date: \_\_\_\_\_ Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Description of Request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Location & Routes Used: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you able to ride without this modification? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Comments regarding a reasonable modification request can be sent to [csimpson@seatransit.org](mailto:csimpson@seatransit.org) or call 860-886-2631 ext. 106. (rev 062422)