



Reasonable Modifications Request Form

Submit the completed form to Cherriots via **email** to: sueann.coffin@cherriots.org
via **fax** at: **503-588-5119**, or via **mail** to:
SueAnn Coffin – 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 modification? _____

*Response to modification requests may take up to ten days. To ensure a response, please provide a phone number, email, and/or mailing address.