



## TOWNSHIP OF EAST LUTHER GRAND VALLEY

### Request for Information in an Alternative Format

(Form also available in large print)

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Date of Request \_\_\_\_\_

Document Required \_\_\_\_\_

Date Required \_\_\_\_\_

Format (Please indicate with ✓)	Large Print*	Audio	E-Text	Other (Please specify)

\*Indicate font size

### Request for American Sign Language Interpreter

Date Required \_\_\_\_\_

Time Required \_\_\_\_\_ Duration of Service \_\_\_\_\_

Location \_\_\_\_\_

Complete form and return it to Department Manager. Forward a copy of form to the Clerk.

For Office Use only - Outcome of Request



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### Request for Information in an Alternative Format

(Large print version)

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Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Date of Request \_\_\_\_\_

Document Required \_\_\_\_\_

Date Required \_\_\_\_\_

Format (Please indicate with √)	Large Print*	Audio	E-Text	Other (Please specify)

\*Indicate font size

### Request for American Sign Language Interpreter

Date Required \_\_\_\_\_

Time Required \_\_\_\_\_ Duration of Service \_\_\_\_\_

Location \_\_\_\_\_

Complete form and return it to Department Manager. Forward a copy of form to the Clerk.

Information collected in accordance with the Customer Service Accessibility Policy