



**ORANGE COUNTY FIRE AUTHORITY**  
**REQUEST FORM**  
**ADA REASONABLE ACCOMMODATION FOR**  
**PUBLICLY NOTICED MEETINGS,**  
**PROGRAMS, ACTIVITIES AND SERVICES**

This form is to be completed by individuals who have a need to request a reasonable accommodation for a disability to access or participate in any open publicly noticed Agency meeting or meetings, programs, activities, or services open to the public at the Orange County Fire Authority (OCFA)

Requests for accommodations should be received at least 48 hours before event so that the Agency can make reasonable accommodations. Individuals must submit their request orally or in writing. To submit orally, please call the Clerk of the Authority at (714) 573-6040 during regular business hours. To submit in writing, please complete the form posted on the Agency's website and email to [COA@ocfa.org](mailto:COA@ocfa.org) or by mail to: Clerk of the Authority, Orange County Fire Authority, 1 Fire Authority Road, Irvine, CA 92602.

Upon receipt, the Clerk's Office will review the request and provide a timely response to the requester as soon as practicable.

**COMPLETE FORM**

**Name:**

**Email Address:**

**Address:**

**Phone Number:**

**Date of event you are requesting accommodation for:**

**Description of need for accommodation**

Describe the type of accommodation being requested to include how the accommodation will allow you to access or participate. *Please do not disclose your disability, a general statement or explanation of need will suffice. A letter from your physician demonstrating that requested accommodation is required for you to access or participate may be requested.*

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**OCFA Use Only**

Date Request Received:

Accommodation Requested:  Yes or  No

Type of Request: Access  / Participation

Accommodation Approved:  Yes or  No

If yes, provide a brief description of the accommodation provided:

If no, reason accommodation was denied:

Approved or Denied by: