



LANTA Reasonable Modification Request Form

ALL INFORMATION IS KEPT CONFIDENTIAL.

Date: _____

Request applies to: _____ fixed route service or _____ paratransit service

Requested by: _____

Full address: _____

Phone number: _____ Email: _____

Modification is for: _____ self or _____ (Name of rider)

Timeframe modification is needed for: _____

What is the modification needed? _____

Without the modification, LANTA services could not be used because _____

Signature: _____

Print name: _____

Please send the completed form by one of the following methods.

Via US mail to:

OR

Via email to:

LANTA Rider Resources Department
1060 Lehigh Street Allentown, PA 18103

lantavaninfo@lantabus-pa.gov