

### Completing your accessibility compliance report

You must complete the mandatory fields on each page before you can move to the next page. Mandatory fields are marked with an asterisk (\*).

To start, save the form on your computer. Be sure to open the form with Adobe Reader 10 or higher. You can save the form at any point in the process and return to it later. You may distribute the form within your organization for input before submitting.

### You need the following to file your accessibility compliance report:

- organization legal name
- 9-digit business number (BN9). This is the number that Canada Revenue Agency uses to identify your
  organization. You can find it on your federal or provincial tax return. If your organization does not have a business
  number (BN9), contact us to receive an AODA identifier to be used in place of a business number (BN9).
- organization category (OPS/OLA, Designated Public Sector)

**Note:** If you select the wrong organization category, you may see questions that do not apply to you. You will need to correct the category and enter your data again to successfully submit your report.

- number of employees in your organization in Ontario
- name and contact information of your certifier (a director or senior officer with legal authority to say that the report is complete and accurate)

### File for up to 20 organizations at once

You can use one form to file a report for up to 20 organizations. To do so, you need each organization's:

- legal name
- business number (BN9) or AODA identifier
- number of employees in Ontario
- address

Each organization must have the same:

- organization category
- number of employees range (e.g. 20-49, 50+)
- certifier
- · answers to all of the accessibility compliance questions

If not, you will need to complete a separate form for each organization.

**Note:** Users of assistive technology should pull up a list of buttons to get a list of the links on the form.

# Begin your report

Follow these steps to complete your form:

## 1. Download and save the form

- Download and save the form on your computer
- Open the form with Adobe Reader 10 or higher

# 2. Enter your organization's information

• Enter your organization's information then select Next

# 3. Understand your requirements

 If you need information about the requirements, select the website link in section B: Understand your accessibility requirements. This will bring you to our website where you can see your past, current and future requirements.

# 4. Certify your report

- Complete the Certifier Information section
- The certifier must:
  - make sure all information on the form is complete and accurate
  - check the box to show they have authority to certify your organization
  - enter the certification date or select it from the drop down calendar
- Enter your organization's primary contact. This is the person to be contacted if more information is needed. This person may be the certifier or a different person.

### 5. Answer the questions

- The questions on the form are based on the requirements that apply to your:
  - organization category
  - number of employees range
- Select **Yes** (if you are in compliance) or **No** (if you are not in compliance) for each question. You may add comments in the comment box below each question.
- Each report question has links to:
  - the regulation section that is related to that question
  - helpful resources to help you understand and comply with the requirements
- Once you have answered all of the questions, select Save form at the bottom of the page before selecting Next
- Review the accessibility compliance report summary.

### 6. Submit your report

- You may save the form at any time by selecting the **Save** form button. When you are ready to submit your report, select the **Save and Submit button**. You will be prompted to save the form on your computer first and then it will be submitted.
- Wait for a confirmation prompt with a confirmation number that either confirms submission or indicates any problems.
- Once the report is received, an email will be sent to the Certifier and the Primary Contact. This email will include:
  - a confirmation number
  - an accessible PDF copy of your report

**If you have not received a confirmation number** upon successfully submitting the form or have any questions please contact the AODA Contact Centre (ServiceOntario) at:

Toll free phone: 1-866-515-2025

TTY Toll free: 1-800-268-7095 Phone: 416-849-8276

TTY: 416-325-3408

# Accessible alternate formats

If you need the accessibility compliance report in an accessible format, please email accessibility@ontario.ca.



# Instructions

All information you provide is subject to the Freedom of Information and Protection of Privacy Act.

If you are a public sector organization with **20 or more employees** that is not designated under the <u>Integrated Accessibility Standards Regulation (IASR)</u> you are to comply with the IASR as a private/not-for-profit organization and complete the appropriate Accessibility Compliance Report. If you are a public sector organization with **fewer than 20 employees** that is not designated under the <u>IASR</u>, you are to comply with the IASR as a small business/non-profit organization and are exempt from the requirement to submit a report.

Fields marked with an asterisk (\*) are mandatory.

A. Organization	n information		-			
Organization cate	• •			Number of employees	s range *	Reporting year
Designated Pub				1-49 employees		2021
Business detai	-				1	
Organization lega		opitouwod	<b>a</b> 0		Number of 32	employees in Ontario * <u>Help</u>
Business number	he Township of M		·	e received an AODA		
	(BN9) * <u>Help</u>			ors and Accessibility	Identinei	
Check if operat	ting/business name	is same as	legal name			
•	rating/business nan he Township of M		ge			
Sector that best d	lescribes your orga	nization's pr	incipal business	activity *	<u>Help</u>	
Empty						
Subsector (if pose Empty	sible)			Industry group (if po	ssible)	
Mailing addres	S			L		
Address where let	tters can be sent to	the person	responsible for c	coordinating the organ	nization's A	ODA compliance activities.
Country *						
The fields below v	will change based o	n your sele	ction.			
🜔 Canada	$\bigcirc$ L	JSA		◯ Internatio	nal	
Type of address *	<ul> <li>Street addres</li> </ul>	ss C	) Street address	served by route	$\bigcirc$ Other	
Unit number	Street number *	Street nam	ie *			
Box910	1	Mississau	-			
Street type Drive	Street direction		City * Manitouwadge	<b>`</b>		Province * ON (Ontario)
Postal code (e.g.	A1A 1A1) *		Mannouwauge	·		
P0T 2C0						
Business addr						
(Address at which	letters can be sent	to the comp	any director/office	er accountable for the	organization	's compliance with the AODA.)
	ess address is sam	e as mailing	address			
Country *						
The fields below v	will change based c	n your sele	ction.			
🜔 Canada	$\bigcirc$ L	JSA		◯ Internatio	nal	
Type of address *	Street addres	ss C	) Street address	served by route	Other	

Unit number Box910	Street number *	Street name * Mississauga		Street type Drive		Street direction
City * Manitouwadge	1		Province * ON (Ontario)		Posta P0T	al code (e.g. A1A 1A1) * 2C0



Organization category Designated Public Sector	Number of employees range 1-49
Filing organization legal name Corporation of the Township of Manitouwadge	·
Filing organization business number (BN9)	
Fields marked with an asterisk (*) are mandatory.	

### B. Understand your accessibility requirements

Before you begin your report, you can learn about your accessibility requirements at ontario.ca/accessibility

Additional accessibility requirements apply if you are:

- <u>a library board</u>
- a producer of education material (e.g. textbooks)
- an education institution (e.g. school board, college, university or school)
- a municipality

If you are a municipality submitting this report, and submitting on behalf of local boards, please indicate which boards below.

### C. Accessibility compliance report certification

Section 15 of the *Accessibility for Ontarians with Disabilities Act, 2005* requires that accessibility reports include a statement certifying that all the required information has been provided and is accurate, signed by a person with authority to bind the organization(s).

Note: It is an offence under the Act to provide false or misleading information in an accessibility report filed under the AODA.

The certifier may designate a primary contact for the Ministry for Seniors and Accessibility to contact the organization(s); otherwise the certifier will be the main contact.

Certifier: Someone who can legally bind the organization(s).

Primary Contact: The person who will be the main contact for accessibility issues.

#### Acknowledgement

I certify that all the information is accurate and I have the authority to bind the organization \*

Certification date (yyyy-mm-dd) \* 2021-12-02

### **Certifier information**

Last name * Keough		First name * Joleen		
Position title * Other	Ext 223	ension Check he 3 if TTY	re	
Email * clerk@manitouwadge.ca 009-0236E(2021/01)[V5.0]		Alternate phone number		Fax number 807-826-4592 Page 5 of 11

Primary	contact	for	the	organization(s)	
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			First name * Joleen				
Position title * Other	Business phone number * 807-826-3227	Ext 223	ension 3	Check here if TTY	e		
Email * clerk@manitouwadge.ca			Alternate ph	one number		Fax number 807-826-4592	

# D. Accessibility compliance report questions

# Instructions

Please answer each of the following compliance questions. Use the Comments box if you wish to comment on any response.

If you need help with a specific question, click the help links which will open in a new browser window. Use the link on the left to view the relevant AODA regulations and the link on the right to view relevant accessibility information resources.

Municipal Accessibility Advisory Committees			
1. Is your organization a municipality with a population of 10,000 or more' (If Yes, you will be required to answer additional questions.)	? *	⊖Yes	) No
Read Accessibility for Ontarians with Disabilities Act, 2005, S.O.	Learn more about your requi	rements for o	uestion 1
2005, c. 11, s. 29: Municipal Accessibility Advisory Committees			
<ol> <li>Has your organization established an accessibility advisory commoutlined in section 29 of the AODA? *         (If Yes, you will be required to answer additional questions.)</li> </ol>	littee as	⊖ Yes	⊖ No
Read Accessibility for Ontarians with Disabilities Act, 2005, S.O.	Learn more about your requi	rements for a	uestion 1.a
2005, c. 11, s. 29: Municipal Accessibility Advisory Committees			
Comments for question 1.a			
2. Are the majority of the members of the committee persons with disabilitie	es?*	⊖ Yes	⊖ No
Read Accessibility for Ontarians with Disabilities Act, 2005, S.O.	Learn more about your requir	rements for o	uestion 2
2005, c. 11, s. 29 (3): Municipal Accessibility Advisory Committees			
Comments for question 2			
3. Has the committee provided advice to council about site plans and drav (as described in S.41 of the <i>Planning Act</i> ) as well as advice on the requirements and implementation of accessibility standards? *	vings	⊖ Yes	⊖ No
Read Accessibility for Ontarians with Disabilities Act, 2005, S.O.	Learn more about your requir	rements for o	uestion 3
2005, c. 11, s. 29 (4): Municipal Accessibility Advisory Committees			. <u> </u>
Comments for question 3			
Foundational requirements			
4. Does your organization have written accessibility policies that include a commitment? *	statement of	• Yes	⊖ No
Read O.Reg. 191/11 s. 3: Establishment of accessibility policies	Learn more about your requi	rements for o	uestion 4
Comments for question 4			

5. Does your organization have a document or documents of your access available and, on request, provide them in an accessible format? *	sibility policies publicly	• Yes	⊖ No
Read O. Reg. 191/11 s. 3 (3): Establishment of accessibility policies	Learn more about your re	<u>quirements for</u>	question 5
Comments for question 5			
<ol> <li>Has your organization established, implemented, maintained and post accessibility plan on your organization's website? *</li> </ol>	ed a multi-year	• Yes	⊖ No
Read O. Reg. 191/11 s. 4: Accessibility plans	<u>Learn more about your re</u>	quirements for	question 6
Comments for question 6			
7. Has your organization completed a review of its progress implementing in its accessibility plan and documented the results in an annual status organization's website? *		) Yes	⊖ No
Read O. Reg. 191/11 s. 4 (1), 4(3): Accessibility plans	Learn more about your re	quirements for	question 7
Comments for question 7			
8. Did your organization consult with people with disabilities when establi updating its multi-year accessibility plan? *	shing, reviewing and	• Yes	◯ No
Read O. Reg. 191/11 s. 4 (2): Accessibility plans	Learn more about your re	quirements for	question 8
Comments for question 8			
<ol> <li>Does your organization provide the appropriate training on the Integra Standards Regulation and the Human Rights Code as it pertains to per disabilities? *</li> </ol>		Yes	⊖ No
Read O. Reg. 191/11 s. 7: Training	Learn more about your re	quirements for	question 9
Comments for question 9			
10. Were all persons that require training trained as soon as practicable? the Integrated Accessibility Standards Regulation, the following person all persons who are an employee of, or a volunteer with, the organizat who participate in developing the organization's policies; and (c) all oth provide goods, services or facilities on behalf of the organization. *	ns require training: (a) tion; (b) all persons	Yes	⊖ No
<u>Read O. Reg. 191/11 s. 7 (3): Training</u>	<u>Learn more about your re</u>	quirements for	question 10
Comments for question 10			
11. Does your organization provide training in respect of any changes to y policies on an ongoing basis? *	our accessibility	• Yes	⊖ No
<u>Read O. Reg. 191/11 s. 7 (4): Training</u>	Learn more about your re	quirements for	question 11
Comments for question 11			

12. Does your organization keep a record of the training provided, includi the training is provided and the number of individuals to whom it is provided and the number of individuals to whom	•	• Yes	⊖ No
Read O. Reg. 191/11 s. 7 (5): Training	Learn more about your r	equirements for	question 12
Comments for question 12			
13. Does your organization ensure that its public feedback processes are persons with disabilities by providing or arranging accessible formats supports, upon request, and do you notify the public of this accessibl Note: "public" can include customers, clients, third parties, or business	or communication e feedback policy?	Yes	⊖ No
Read O. Reg. 191/11 s. 11: Feedback	<u>Learn more about your r</u>	equirements for	question 13
Comments for question 13			
Information and communications			
14. As of January 1, 2021, do all your organization's internet websites co Web Consortium Web Content Accessibility Guidelines 2.0 Level AA and pre-recorded audio descriptions)? Please indicate in the comme complete names and addresses of your publicly available web content social media pages, and apps *	(except for live captions nt box provided the	Yes	() No
Read O. Reg. 191/11 s. 14 (4): Accessible websites and web content	<u>Learn more about your r</u>	equirements for	question 14
Publicly       www.manitouwadge.ca         available web       http://mymanitouwadge.ca         content and       comments for         question 14       Employment			
<ul> <li>15. Does your organization notify successful applicants of its policies for a employees with disabilities during offers of employment? *</li> </ul>	accommodating	Yes	◯ No
Read O. Reg. 191/11 s. 24: Notice to successful applicants	Learn more about your r	equirements for	question 15
Comments for question 15			
16. Does your organization develop and have in place a written process f documented individual accommodation plans for employees with disa		• Yes	◯ No
Read O. Reg. 191/11 s. 28: Documented individual accommodation plans	<u>Learn more about your r</u>	equirements for	question 16
Comments for question 16			
Transportation			
17. Does your organization provide transportation services? * (If Yes, you will be required to answer an additional question.)		• Yes	⊖ No
Read O. Reg. 191/11 Part IV: Transportation standards	<u>Learn more about your r</u>	equirements for	question 17
17.a. Does your organization conduct employee and volunteer acces safe use of accessibility equipment and features of your transp	ortation vehicles? *	• Yes	⊖ No
Read O. Reg. 191/11 s. 36: Accessibility training	<u>Learn more about your r</u>	equirements for	question 17.a
Comments for question 17.a			

Design of public spaces			
18. Since your organization last reported on its accessibility compliance, ha constructed new or redeveloped existing off-street parking facilities tha maintain? * (If Yes, you will be required to answer an additional question.)		⊖ Yes	) No
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards	Learn more about your r	equirements for	auestion 18
18.a. When constructing new or redeveloping off-street parking facilitie organization intends to maintain, does it ensure that the off-stree the accessibility requirements as outlined in the Design of Public	es that your t parking facilities meet	⊖ Yes	⊖ No
Read O. Reg. 80.32-37: Accessible parking	Learn more about your r	equirements for	question 18.a
Comments for question 18.a			
19. Since your organization last reported on accessibility compliance, has constructed new or redeveloped existing outdoor play spaces that it in (If Yes, you will be required to answer an additional question.)		⊖ Yes	) No
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards	Learn more about your r	equirements for	question 19
19.a. When constructing new or redeveloping existing outdoor play spa organization consult with the public and persons with disabilities children and caregivers, and if you represent a municipality did y consult with the municipal advisory committee where one was es in s. 80.19 of the Integrated Accessibility Standards Regulation?	on the needs of our organization stablished as outlined	⊖ Yes	⊖ No
Read O. Reg. 191/11 s. 80.19: Outdoor play spaces	Learn more about your r	equirements for	question 19.a
Comments for question 19.a			
20. Does your organization's multi-year accessibility plan include procedur and emergency maintenance of the accessible elements in public spac with temporary disruptions when accessible elements required under t Accessibility Standards Regulations Part IV are not in working order? *	es, and for dealing he Integrated	) Yes	⊖ No
Read O. Reg. 191/11 s. 80.44: Maintenance of accessible elements	Learn more about your r	equirements for	question 20
Comments for question 20			
Confirmation questions			
21. Other than the requirements cited in the above questions, is your orga complying with all other requirements for the <b>Information and Communication</b> Standards under the Integrated Accessibility Standards Regulation? *	unications	• Yes	⊖ No
Read O. Reg. 191/11 Part II: Information and communications standards	<u>Learn more about your r</u>	equirements for	question 21
Comments for question 21			
22. Other than the requirements cited in the above questions, is your orga complying with all other requirements for the <b>Employment Standards</b> Integrated Accessibility Standards Regulation? *		Yes	⊖ No
Read O. Reg. 191/11 Part III: Employment standards	<u>Learn more about your r</u>	equirements for	question 22
Comments for question 22			

23. Other than the requirements cited in the above questions, is your organization complying with all other requirements for <b>Transportation Standards</b> under the Integrated Accessibility Standards Regulation? *			⊖ No	
Read O. Reg. 191/11 Part IV: Transportation standards	Learn more about your rec	uirements for	question 23	
Comments for question 23				
24. Other than the requirements cited in the above questions, is your organ complying with all other requirements for the <b>Customer Service Stand</b> the Integrated Accessibility Standards Regulation? *		• Yes	⊖ No	
Read O. Reg. 191/11 Part IV.2: Customer service standards	Learn more about your rec	uirements for	question 24	
Comments for question 24				
25. Other than the requirements cited in the above questions, is your organ complying with all other requirements for the <b>Design of Public Spaces</b> under the Integrated Accessibility Standards Regulation? *		• Yes	() No	
Read O. Reg. 101/11 Part IV.1: Design of Public Spaces standards	Learn more about your rec	uirements for	question 25	
Comments for question 25				



Organization category Designated Public Sector	Number of employees range 1-49
Filing organization legal name Corporation of the Township of Manitouwadge	
Filing organization business number (BN9)	
Fields marked with an asterisk (*) are mandatory.	

# E. Accessibility compliance report summary

Your responses to the questions on your accessibility report indicate that your organization is in compliance with AODA standards.

Your organization may be audited to verify compliance.