

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, Business/Non-profit)
 - if you are a business or a non-profit, your Organization category is Business/Non-profit
 - if you are a municipality, or a hospital, college, university, school board, public transportation provider (under [Schedule 1 of Ontario Regulation 191/11](#)), or an agency, board or commission (under [Column 1 of Table 1 of Ontario Regulation 146/10](#)), your Organization category is 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, click on 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. Answer the questions

- The questions on the form are based on the requirements that apply to your:
 - organization category
 - number of employees range
- Click **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, click **Save form** at the bottom of the page before clicking **Next**
- Review the accessibility compliance report summary.

5. Certify and submit your report

- Complete the Certifier Information section
- The certifier must:
 - make sure all information on the form is complete and accurate
 - check all three boxes to show they have authority to certify your organization
 - select the certification date by clicking on the arrow to open the 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.
- You may save the form at any time by clicking the **Save** form button. When you are ready to submit your report, click the **Save and submit** button. You will be prompted to save the form on your computer first and then it will be submitted.
- A message will confirm that the report was successfully submitted or tell you why the report was not submitted.
- 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

Accessible alternate formats

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

Questions?

Contact us at:

Toll Free Phone: 1-866-515-2025

Phone: 416-849-8276

Email: accessibility@ontario.ca

TTY Toll free: 1-800-268-7095

TTY: 416-325-3408

Instructions

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

Fields marked with an asterisk (*) are mandatory.

A. Organization information

Organization category * Ontario Public Service / Ontario Legislative Assembly	Number of employees range * 50+ employees	Reporting year 2018
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Business details

Organization legal name * Office of the Ontario Ombudsman/Bureau de l'Ombudsman de l'Ontario	Number of employees in Ontario * Help 106
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Business number (BN9) * Help <input checked="" type="checkbox"/> Check this box if you have received an AODA identifier from the Accessibility Directorate of Ontario	AODA identifier * AD100008
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<input checked="" type="checkbox"/> Check if operating/business name is same as legal name	Language preference for communications * English
Organization operating/business name Office of the Ontario Ombudsman/Bureau de l'Ombudsman de l'Ontario	

Sector that best describes your organization's principal business activity * 91 - Public administration	Help
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Subsector (if possible) 912 - Provincial and territorial public administration	Industry group (if possible) 9129 - Other provincial and territorial public administration
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Mailing address

Address where letters can be sent to the person responsible for coordinating the organization's AODA compliance activities.

Country * <input checked="" type="radio"/> Canada <input type="radio"/> USA <input type="radio"/> International
Type of address * <input checked="" type="radio"/> Street address <input type="radio"/> Street address served by route <input type="radio"/> Other

Unit number	Street number * 483	Street name * Bay	
Street type Street	Street direction	City * Toronto	Province * ON (Ontario)
Postal code * M5G 2C9			

Business address

(Address at which letters can be sent to the company director/officer accountable for the organization's compliance with the AODA.)

<input checked="" type="checkbox"/> Check if business address is same as mailing address
Country * <input checked="" type="radio"/> Canada <input type="radio"/> USA <input type="radio"/> International
Type of address * <input checked="" type="radio"/> Street address <input type="radio"/> Street address served by route <input type="radio"/> Other

Unit number	Street number * 483	Street name * Bay	
Street type Street	Street direction	City * Toronto	Province * ON (Ontario)
Postal code * M5G 2C9			

Use the "Add new organization" button to add additional organizations to which this accessibility report is to be applied (maximum 20).
 Note: All organizations must have the same organization category, number of employees range, compliance answers and certifier, and have different business numbers, in order to file under the same form.

Organization category [Ontario Public Service / Ontario Legislative Assembly](#) | Number of employees range [50+](#)
Filing organization legal name [Office of the Ontario Ombudsman/Bureau de l'Ombuds](#)
Filing organization AODA identifier [AD100008](#)

Fields marked with an asterisk (*) are mandatory.

B. Understand your accessibility requirements

For enquiries related to the AODA obligations of the Ontario Public Service (**OPS**) or offices appointed under the Ontario Legislative Assembly (**OLA**), please contact AODA Contact Centre (ServiceOntario) at:

Phone: 416-849-8276 or **Toll-free:** 1-866-515-2025

TTY: 416-325-3408 or **Toll-free:** 1-800-268-7095

Email: aoda.assistance@ontario.ca

C. 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.

1. Is your organization complying with the requirements of the Customer Service Standards? * Yes No

[Customer Service Standards](#)

[Learn more about your requirements for question 1](#)

Comments for
question 1

2. Is your organization complying with the requirements in effect under the Information and Communications Standards? * Yes No

[Information and Communications Standards](#)

[Learn more about your requirements for question 2](#)

Comments for
question 2

3. Is your organization complying with the requirements in effect under the Employment Standards? * Yes No

[Employment Standards](#)

[Learn more about your requirements for question 3](#)

Comments for
question 3

4. Is your organization complying with the requirements in effect under the Design of Public Spaces Standards? * Yes No

[Design of Public Spaces Standards](#)

[Learn more about your requirements for question 4](#)

Comments for
question 4

5. Is your organization complying with the General requirements under Part 1 of the Integrated Accessibility Standards Regulation? *

Yes

No

[Part 1 of the Integrated Accessibility Standards](#)

Comments for
question 5

Organization category [Ontario Public Service / Ontario Legislative Assembly](#) | Number of employees range [50+](#)

Filing organization legal name [Office of the Ontario Ombudsman/Bureau de l'Ombuds](#)

Filing organization AODA identifier [AD100008](#)

Fields marked with an asterisk (*) are mandatory.

D. 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.

E. 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 Accessibility Directorate 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 I have the authority to bind all organizations specified in Section A of this form, *

I certify that all the required information has been included in this report, and, *

I certify that the information in this report is accurate. *

Certification date (yyyy-mm-dd) * [2018-12-07](#)

Certifier information

Last name *		First name *	
Ray		Wendy	
Position title *	Business phone number *	Extension <input type="checkbox"/> Check here if TTY	
Other	416 586-3513		
Email *		Alternate phone number	Fax number
wray@ombudsman.on.ca			

Primary contact for the organization(s)

Check if the primary contact is same as the certifier

Last name *		First name *	
Fournier		Cheryl	
Position title *	Business phone number *	Extension <input type="checkbox"/> Check here if TTY	
Director	416 586-3371		
Email *		Alternate phone number	Fax number
cfournier@ombudsman.on.ca			