## **AODA Customer Feedback**





The Accessibility for Ontarians with Disabilities Act, 2005 (AODA) is provincial legislation that aims to achieve a fully accessible Ontario. The Act makes Ontario the first jurisdiction in Canada to develop, implement and enforce mandatory accessibility standards. It applies to the private, public, and volunteer sectors.

We have reviewed our policies and practices with respect to the delivery of our services to ensure they are accessible by persons with disabilities. If you have a disability and had difficulty accessing our services, or if you have improvements to suggest, kindly complete this questionnaire.

Date / Time of Visit: Purpose of Visit:				
1.	Were you satisfied with the level of service v	ve provided you?	Yes	☐ No
	Comments			
2.	Were our services provided to you in an acce	essible manner?	Yes	☐ No
	Comments			
3.	Did you experience any problems accessing	our services?	Yes	☐ No
	Comments			
Plo	ease add any other comments / suggestions y	ou may have:		

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4. May we contact you to foll of your feedback?	low up and report on any acti	on we have taken as a result  Yes No				
(Any personal information is collected pursuant to Ontario Regulation 429/07, the Accessible Standards for Customer Service and will be used strictly for the purpose of responding to your feedback)						
Name:	Phone Number:					
Address:						
Email:						
How you like to be contacted: Telephone Mail Email						
Thank you for your feedback!						
We welcome other ways of providing feedback:						
Mail	Email	In-Person				
Accessibility Coordinator	info@hmai.ca	Reception desk				
100-5970 16 <sup>th</sup> Avenue	Please include subject "[AODA	Please ask for AODA Customer				
Markham, ON L3P 7R1	Customer Feedback]"	Feedback form				
For Office Use						
Date received: Received by:						
Follow-up required: Yes / No If yes, when was it done:						
Action plan required: Yes / No If yes, please explain what action was taken:						