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 the latest version of Adobe Reader. 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 (Ontario Public Service/Ontario Legislative Assembly, Designated Public Sector, Business or Non-profit)

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 the latest version of Adobe Reader

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 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:

Phone: 416-849-8276 TTY: 416-325-3408

Alternate formats

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



Fields marked with an asterisk (*) are mandatory.

2023 Accessibility Compliance Report

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 Integrated Accessibility Standards Regulation (IASR) 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 IASR, you are to comply with the IASR as a small business/non-profit organization and are exempt from the requirement to submit a report.

A. Organization information Organization category * Number of employees range * Reporting year Designated Public Sector 50+ employees 2023 **Business details** Organization legal name * Number of employees in Ontario Corporation of the Municipality of Kincardine 180 Business number (BN9) * Help Check this box if you have received an AODA identifier from the Ministry for Seniors and Accessibility 878309020 ✓ Check if operating/business name is same as legal name Organization operating/business name Corporation of the Municipality of Kincardine Sector that best describes your organization's principal business activity * Help **Empty** Subsector (if possible) **Empty** Industry group (if possible) **Empty** Mailing address Address where letters can be sent to the person responsible for coordinating the organization's AODA compliance activities. Country * The fields below will change based on your selection. O USA Canada International Type of address * Street address O Street address served by route Other Unit number Street name * Street number * Concession 5. RR #5 1475 City * Street direction Province * Street type ON (Ontario) Kincardine Postal code (e.g. A1A 1A1) * N2Z 2X6 Business address (Address at which letters can be sent to the company director/officer accountable for the organization's compliance with the AODA.) ✓ Check if business address is same as mailing address.

Country *						
The fields belo	w will change based	on your sele	ection.			
Canada	0	USA	○ Interna	ntional		
Type of addres	ss * Street addre	ess (Street address served by route	Other		
Unit number	Street number * 1475	Street nan Concessi	ne * on 5. RR #5			
Street type	Street direction		City * Kincardine		Province * ON (Ontario)	
Postal code (e. N2Z 2X6	.g. A1A 1A1) *					



2023 Accessibility compliance report

Organization category Desig	gnated Public Sector						
Number of employees range	50+						
Filing organization legal name Corporation of the Municipality of Kincardine							
Filing organization business number (BN9) 878309020							
Fields marked with an asterisk (*) are mandatory.							
B. Understand your acce	ssibility requirements						
Before you begin your report, yo	ou can learn about your accessib	lity requirements at ontario.c	ca/accessibility				
Additional accessibility requirem • a library board	ents apply if you are:						
 a producer of edu 	cation material (e.g. textbooks)						
 an education insti 	tution (e.g. school board, college	, university or school)					
 a municipality 							
If you are a municipality submitt	ing this report, and submitting on	behalf of local boards, pleas	se indicate which boards below.				
C. Accessibility complian	nce report certification						
	or Ontarians with Disabilities Act, formation has been provided and						
Note: It is an offence under the	Act to provide false or misleading	g information in an accessibil	ity report filed under the AODA.				
The certifier may designate a protherwise the certifier will be the	imary contact for the Ministry for a main contact.	Seniors and Accessibility to	contact the organization(s);				
Certifier: Someone who can leg	gally bind the organization(s).						
Primary Contact: The person w	who will be the main contact for a	ccessibility issues.					
Acknowledgement							
✓ I certify that all the information is accurate and I have the authority to bind the organization *							
Certification date (yyyy-mm-dd) * 2023-05-30							
Certifier information							
Last name * Lawrie		First name * Jennifer					
Position title * Other	Position title other * Clerk	Business phone number * 519-396-3468	Extension				

Email * jlawrie@kincardine.ca		Alternate phone number 519-389-8620	Extension	Fax numbe 519-396-8			
Primary contact for the organization(s)							
✓ Check if the primary contact is same as the certifier Last name * Lawrie First name * Jennifer							
Position title * Other	Position title * Position title other * Business phone number * Extension						
Email * jlawrie@kincardine.ca		Alternate phone number 519-389-8620	Extension	Fax numbe 519-396-8			
D. Accessibility complian	ce report questions						
Instructions							
Please answer each of the follow	ving compliance questions. Use	the Comments box if you w	ish to comm	ent on any re	esponse.		
If you need help with a specific of view the relevant AODA regulation					n the left to		
General					THE		
Has your organization create accessibility by meeting all a	ed and implemented written polic pplicable accessibility requireme			Yes	○ No		
Read O. Reg. 191/11, s. 3 (1): E	stablishment of accessibility poli	<u>Learn more about</u>	ut your requi	rements for o	question 1		
Comments for question 1 Yes, Policy GG.3.9 Integrated Accessibility Standards includes our Statement of Commitment and we also have Policy GG.3.8 Accessibility Standards for Customer Service and both are available on www.kincardine.ca/en/living-here/accessibility							
Has your organization estable (If Yes, please answer additional estable)		ear accessibility plan? *		Yes	○ No		
Read O. Reg. 191/11, s. 4 (1): A	ccessibility plans	Learn more abou	ut your requi	rements for o	question 2		
2.a. Does your organization (If Yes, please answer				Yes	○ No		
Read O. Reg. 191/11, s. 4 (1): Accessibility plans	Learn more abou	ut your requi	rements for o	question 2.a		
Comments for www.kincal question 2.a	rdine.ca						
2.a.i Is your organization	on's accessibility plan posted on	your organization's website	? *	Yes	○ No		
Read O. Reg. 191/11,	s. 4 (1): Accessibility plans	Learn more about	your require	ments for qu	estion 2.a.i		
Comments for question 2.a.i The Municipality's Multi Year Accessibility Plan is posted on www.kincardine.ca/en/living-here/accessibility							

			uested? *	i an accessible ionnat	o res	O NO
	Read O.	Reg. 1	91/11, s. 4 (1): Accessibility plans	Learn more about your requ	uirements for qu	uestion 2.a.ii
	Commen question		Process outlined in GG.3.9 Integrated A Municipal website at www.kincardine.ca here/accessiblity			
2	.b Does you	r orga	nization update the accessibility plan at least	once every 5 years? *	Yes	○ No
			, s. 4 (1): Accessibility plans	Learn more about your req		
			icipality of Kincardine 2023- 2027 Multi-Y			
	uestion 2.b		plan is available on the Municipal website		le process for	updating
3. D	oes your orga	nizatio	on provide appropriate training on: *			
Read	O. Reg. 191/	11, s.	7 (1): Training	Learn more about your re	quirements for c	question 3
3	.a. The AOD	A Inte	grated Accessibility Standards Regulation? *		Yes	○ No
R	lead O. Reg. 1	91/11	, s. 7 (1): Training	Learn more about your re	quirements for c	question 3.a
	Comments for juestion 3.a		ess outlined in GG.3.9 Integrated Accessite at www.kincardine.ca and is complet			unicipal
3.	.b The Huma	an Rig	hts Code as it pertains to people with disabili	ties? *	Yes	○ No
R	ead O. Reg. 1	91/11	s. 7 (1): Training	Learn more about your req	uirements for qu	uestion 3.b
		web	ess outlined in GG.3.9 Integrated Accessite at www.kincardine.ca and is completerson training is provided to summer stud	ed during orientation process	S.	unicipal
Info	rmation and	com	munications			
th N or	nat is accessib l ote: This requ n your premise	le to p iireme es	on have a process for receiving and respondite eople with disabilities? * In the importance of the im			No
Read	I O. Reg. 191/	11, s.	11 (1): Feedback	Learn more about your re-	quirements for o	question 4
4.	and comm	nunica s requ	nization notify the public about the availability tions supports with respect to the feedback p irement is applicable regardless of whether o	rocess? *	Yes	○ No
R	ead O. Reg. 1	91/11	, s. 11 (2): Feedback	Learn more about your re	quirements for c	question 4.a

				accessibility.aspx				
5.	indire mod	ectly (' ify con	continue of the contract of th	nization have one (or more) website(s) which it corols' means that your organization is able to add, reand functionality of the website)? * answer an additional question)			Yes	No
Re	ead O.	Reg.	191/	11, s. 14: Accessible websites and web content		Learn more about your	requirements for	question 5
	5.a.	Web pre-re name	Confector of the confec	or organization's internet websites conform to World tent Accessibility Guidelines 2.0 Level AA (except to ded audio descriptions)? In the comments box, plead addresses of your publicly available web content dia pages, and apps. *	for liv	ve captions and list the complete	Yes	○ No
	Read	0. R	eg. 1	91/11, s. 14: Accessible websites and web conten	<u>it</u>	Learn more about your	requirements for	question 5.a
		ments stion 5		www.kincardine.ca - compliant and goes thromaintained. Facebook - Municipality of Kincardine Twitter - @Kincardine_ON LinkedIn - Municipality of Kincardine Youtube - @MunicipalityofKincardine	ough	regular checks to ensu	ure compliance i	s
	Does	ons wi	orga th dis	nization provide training about providing goods, se sabilities to the following? *	ervice	es or facilities to	Yes	○No
				lunteers ved in developing accessibility policies				
	• P	eople	provi	iding goods, services or facilities on behalf of the o answer an additional question)	orgar	nization		
Re	-	- 31		11, s. 80.49: Training for staff, etc.		Learn more about your	requirements for o	question 6
	6.a.	Does	the t	training include all of the following: *			Yes	○ No
		• A	revie	ew of the purposes of the AODA?				
				ew of the purposes of the Customer Service Stand				
				o interact and communicate with persons with various				
		th		o interact with persons with disabilities who use an sistance of a guide dog or other service animal or n?				
		pr	rovide	o use equipment or devices available on the provided by the provider that may help with the provision as to a person with a disability?				
				o do if a person with a particular type of disability is sing the provider's goods, services or facilities?	s ha	ving difficulty		
	Read	10. Re	eg. 1	91/11, s. 80.49: Training for staff, etc.		Learn more about your	requirements for o	question 6.a
		ments tion 6.		Process outlined in GG.3.8 Accessibility Starthe Municipal website at www.kincardine.ca				

person training provided for summer students.

Comments for Information regarding Accessible Formats and Communication Supports as well as the

question 4.a

Customer Feedback Form are available at https://www.kincardine.ca/en/living-here/

7.	Does your organization pro (If Yes, please answer add	ovide information in an accessible forma ditional questions)	at? *	Yes	No
Re	ead O. Reg. 191/11, s. 80.5	(1): Format of documents	Learn more about your	requirements for	question 7
		ormation in accessible format done so i e individual's disability? *	in a timely manner that	Yes	○ No
	Read O. Reg. 191/11, s. 8	0.51 (1): Format of documents	Learn more about your	requirements for	question 7.a
		outlined in GG.3.9 Integrated Acces It www.kincardine.ca.	sibility Standards Policy av	vailable on the M	Municipa l
		ormation in accessible format at a cost ged to other persons? *	no more than	Yes	○ No
	Read O. Reg. 191/11, s. 86	0.51 (1): Format of documents	Learn more about your	requirements for	question 7.b
		outlined in GG.3.9 Integrated Acces it www.kincardine.ca.	sibility Standards Policy av	ailable on the M	Municipal (
8.	Does your organization ever support person when on you (If Yes, please answer an a	· ·	e accompanied by a	Yes	○ No
	ad O. Reg. 191/11, s. 80.47 oport persons	(5): Use of service animals and	Learn more about your	requirements for	question 8
	disability to be accom	on do all of the following before requiring apanied by a support person on your properson with a disability?		Yes	○No
		ort person is necessary to protect the lability or others on premises?	nealth or safety of the		
		ere is no other way to protect the health r others on premises?	h or safety of the person		
	191/11, s. 80.47 (5): Use o	f service animals and support persons	Learn more about your	requirements for	question 8.a
		outlined in GG.3.8 Accessibility Star cipal website at www.kincardine.ca.	ndards for Customer Service	e Policy availab	ole on
En	nployment				
9.		ploy any persons with disabilities for winergency response information? * itional questions)	hom you have provided	○Yes	No
	ad O. Reg. 191/11, s. 27 (1) ormation	: Workplace emergency response	Learn more about your	requirements for	question 9

	Does your organization review the individualized workplace information for all of the following? *		○ Yes	○ No
	 When the employee moves to a different location in the 	e organization?		
	 When the employee's overall accommodation needs or 	plans are reviewed?		
	 When your organization reviews its general emergency 	policies?		
	d O. Reg. 191/11, s. 27 (4): Workplace emergency response mation	Learn more about your re	equirements for	question 9.a
Con	ments for			
ques	stion 9.a			
9.b.	Do any of the employees for whom your organization has p workplace emergency response information require assista (If Yes, please answer additional questions)		○Yes	○No
	d O. Reg. 191/11, s. 27 (2): Workplace emergency response mation	Learn more about your re	quirements for o	question 9.b
Com	ments for			
ques	stion 9.b			
	9.b.i Has your organization, with the employee's consent emergency response information to the person design assistance to the employee? *	the company of the confidence and the contract of the contract	○ Yes	○No
	emergency response information to the person designation assistance to the employee? *	gnated to provide		
	emergency response information to the person designation assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency	the company of the confidence and the contract of the contract		
	emergency response information to the person designation assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information	gnated to provide		
	emergency response information to the person designation assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency	gnated to provide		
	emergency response information to the person designation assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information Comments for	gnated to provide		
	emergency response information to the person designation assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information Comments for	gnated to provide		
	emergency response information to the person designation assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information Comments for	gnated to provide		
	emergency response information to the person designation assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information Comments for	gnated to provide Learn more about your required as the control of the control o		
	emergency response information to the person design assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information Comments for question 9.b.i 9.b.ii Was the individualized workplace emergency response soon as practicable after your organization became	gnated to provide Learn more about your required as the control of the control o	uirements for qu	nestion 9.b.i
	emergency response information to the person design assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information Comments for question 9.b.i 9.b.ii Was the individualized workplace emergency response as practicable after your organization became accommodation due to the employee's disability? * Read O. Reg. 191/11, s. 27 (3): Workplace emergency response information Comments for	nse information provided as aware of the need for	uirements for qu	nestion 9.b.i
	emergency response information to the person design assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information Comments for question 9.b.i 9.b.ii Was the individualized workplace emergency response on as practicable after your organization became accommodation due to the employee's disability? * Read O. Reg. 191/11, s. 27 (3): Workplace emergency response information	nse information provided as aware of the need for	uirements for qu	nestion 9.b.i
	emergency response information to the person design assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information Comments for question 9.b.i 9.b.ii Was the individualized workplace emergency response as practicable after your organization became accommodation due to the employee's disability? * Read O. Reg. 191/11, s. 27 (3): Workplace emergency response information Comments for	nse information provided as aware of the need for	uirements for qu	nestion 9.b.i
	emergency response information to the person design assistance to the employee? * Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information Comments for question 9.b.i 9.b.ii Was the individualized workplace emergency response as practicable after your organization became accommodation due to the employee's disability? * Read O. Reg. 191/11, s. 27 (3): Workplace emergency response information Comments for	nse information provided as aware of the need for	uirements for qu	nestion 9.b.i

Design of public spaces			
 10. Since January 1, 2017, has your organization constructed new or redefollowing items? * Outdoor public use eating areas Outdoor play space Off-street parking Service counter Fixed queuing guides Waiting areas (If Yes, please answer additional questions) 	eveloped any of the	Yes	○ No
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards	Learn more about your re	quirements f	or question 10
10.a. Where applicable, do the newly constructed or redeveloped items requirements as outlined in the Design of Public Spaces Standard		Yes	○ No
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards	Learn more about your re	quirements f	or question 10.a
Comments for question 10.a Commitment and Process outlined in the Municipal Accessibility Plan available on the Municipal web			Year
10.b. Does your organization's multi-year accessibility plan include propreventative and emergency maintenance of the accessible elem spaces, and for dealing with temporary disruptions when accessing not in working order? *	ents in public	Yes	○No
Read O. Reg. 191/11, s. 80.44: Maintenance of accessible elements	Learn more about your re	quirements f	or question 10.b
Comments for question 10.b Process outlined in the Municipality of Kincardine available on the Municipal website at www.kincar		ccessibility	Plan
AODA			
11. Is your organization a municipality with population of 10,000 or more? (If Yes, please answer additional questions)	•	Yes	○No
Read Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11, s. 29: Municipal Accessibility Advisory Committees	Learn more about your re	quirements fo	or question 11
11.a. Has your organization established an accessibility advisory comm Section 29 of the AODA? * (If yes, please answer additional questions)	nittee as described in	Yes	○ No
Read Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11, s. 29: Municipal Accessibility Advisory Committees	Learn more about your re	quirements for	or question 11.a
Comments for For more information on the Accessibility Advisor question 11.a www.kincardine.ca.	y Committee visit the the	Municipal v	website at

11.a.l is the majority of members in the committee persons v	vith disabilities? *	Yes	○ No
Read Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11, s. 29: Municipal Accessibility Advisory Committees	Learn more about your requ	i <mark>rements for qu</mark>	estion 11.a.i
Comments for As stated in the Accessibility Advisory Coquestion 11.a.i the Municipal website at www.kincardine		e which is ava	ailable on
11.a.ii Has the committee provided advice to council about si described in Section 41 of the <i>Planning Act</i>) as well as requirements and implementation of accessibility standards.	advice on the	Yes	○ No
Read Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c. 11, s. 29: Municipal Accessibility Advisory Committees	Learn more about your requ	irements for qu	estion 11.a.i
Comments for The Committee provides advice on site p	lans and drawings as neede	d. An overview	w of some



2023 Accessibility Compliance Report

Organization category Designated Public Sector

Number of employees range 50+

Filing organization legal name Corporation of the Municipality of Kincardine

Filing organization business number (BN9) 878309020

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.**