

Accessibility Directorate of Ontario

2017 Accessibility compliance report

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	on information						
Organization category *			Number of employees range *		Reporting year		
Designated Public Sector			50+ employees 2017				
Business detai	ls						
Organization legal name * Number of employees in Ontario * Help						f employees in Ontario * <u>Help</u>	
The Corporation of the Township of Centre Wellington				264			
Business number 872567136	(BN9)* <u>Help</u>		x if you have red Directorate of Or	ceived an AODA ide ntario	entifier from the		
	atina/husiness name i	lenal se ames s	name				
 ✓ Check if operating/business name is same as legal name Organization operating/business name Language preference for communications * 						preference for communications *	
	on of the Townshi	o of Centre V	Vellington		English		
•	lescribes your organiz			ty *	Help		
91 - Public adı		, ,		•			
Subsector (if poss	sible)			Industry group (if	possible)		
913 - Local, m	unicipal and regio	nal public ad	ministration				
Mailing address Address where le	tters can be sent to th	e person respo	nsible for coordi	nating the organiza	tion's AODA con	npliance activities.	
_) Canada		USA) International		
Type of address '	Street addre	ss 🔘	Street address	served by route) Other		
Unit number	Street number * 1	Street name * MacDonald	Square				
Street type	Street direction		City *	, , , , , , , , , , , , , , , , , , , ,	***************************************	Province *	
			Elora	•		ON (Ontario)	
Postal code * N0B 1S0							
<u>·</u>				ccountable for the c	organization's co	mpliance with the AODA.)	
Country *) Canada	0	USA	C) International		
Type of address * Street address served by route Other							
Unit number Street number * Street name * 1 MacDonald Square							
Street type Street direction City * Province *							
			Elora			ON (Ontario)	
Postal code * N0B 1S0	***************************************						

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.



Accessibility Directorate of Ontario

2017 Accessibility compliance report

Organization category Designated Public Sector	Number of employees range	∍ 50+			
Filing organization legal name The Corporation of the Township of Centre Wellingt					
Filing organization business number (BN9) 872567136					
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 onta	rio.ca/accessibility				
Additional accessibility requirements apply if you are: • a municipality					
 an education institution (e.g. school board, college, university or school) 					
 a producer of education material (e.g. textbooks) 					
a library board					
C. Accessibility compliance report questions	a characteristic and the control of				
Instructions Please answer each of the following compliance questions. Use the Comments box if you wish to c	omment on any response.				
If you need help with a specific question, click the help links which will open in a new browser window relevant AODA regulations and the link on the right to view relevant accessibility information resour Make your employment practices accessible		the			
Does your organization notify its employees and the public about the availability of accommodati during the recruitment process? *	ons Yes) No			
Read O. Reg. 191/11 s.22 - 24: Recruitment Learn mor	e about your requirements for ques	stion 1			
Comments for question 1					
 Does your organization provide employees with updated information about its policies to support employees with disabilities? * 	Yes) No			
Read O. Reg. 191/11 s.25: Informing employees of supports Learn r	nore about your requirements for q	uestion 2			
Comments for question 2					
3. When requested, does your organization provide employees with disabilities information in an action format or with communication supports? *	ccessible Yes) No			
Read O. Reg. 191/11 s.26: Accessible formats and communication supports for employees Learn I	more about your requirements for q	uestion 3			
Comments for question 3					

 Does your organization prepare individualized workplace emergency response informa employees with disabilities? * 	tion for	(•) Yes	○ No
Read O. Reg. 191/11 s.27: Workplace emergency response information	Learn more about yo	ur requirements	for question 4
Comments for question 4			
Make new or redeveloped public spaces accessible		444.8	
 Since January 1, 2016, has your organization constructed new or redeveloped existing that you intend to maintain? * (if Yes, you will be required to answer additional questions) 		Yes	○ No
Read O, Reg. 191/11 Part IV.1: Design of Public Spaces Standards - Definitions	Learn more about yo	our requirements	for question 5
5.a. Did your organization consult with the public and persons with disabilities prior to or redeveloping existing recreational trails as outlined in the s.80(8) of the Integra Standards Regulation (IASR)? *		Yes	○ No
Read O. Reg. 191/11 s.80(8): Consultation, recreational trails	Learn more about you	r requirements fo	or question 5.a
Comments for question 5.a			
5.b. Does your organization ensure that its new or redeveloped recreational trails med requirements as outlined s.80(9) of the IASR? *	et the technical	Yes	○ No
Read O. Reg. 191/11 s.80(9): Technical requirements for trails	Learn more about you	r requirements fo	or question 5,b
Comments for question 5.b			
6. Since January 1, 2016, has your organization constructed new or redeveloped existing routes that you intend to maintain? * (if Yes, you will be required to answer additional questions) Read O. Reg. 191/11 Part IV.1: Design of Public Spaces Standards - Definitions	beach access Learn more about yo	Yes	No No for guestion 6
6.a. Does your organization ensure that its new or redeveloped beach access routes requirements as outlined in IASR s.80(10)? *	·	○ Yes	O No
Read O. Reg. 191/11 s.80(10): Technical requirements for beach access routes	Learn more about you	r requirements fo	or question 6.a
Comments for question 6.a			
7. Do your new or redeveloped recreational trail and/or beach access routes include boa (if Yes, you will be required to answer additional questions)	rdwalks? *	◯ Yes	○ No
7.a. Where new or redeveloped recreational traits and/or beach access routes have a the boardwalk meet the technical requirements as outlined in s.80(12) of the IAS		○ Yes	○ No
Read O. Reg. 191/11 s.80(12): Boardwalks	Learn more about you	ır requirements f	or question 7.a
Comments for question 7.a			

Do your new or redeveloped recreational trails and/or beach access routes include ramp (if Yes, you will be required to answer additional questions)	·s? *	Yes	○ No
Read O. Reg. 191/11 s.80(13): Ramps	Learn more about you	ır requirements	for question 8
8.a. Where new or redeveloped recreational trails and/or beach access routes have a ramp meet the technical requirements as outlined in s.80(13) of the IASR? *	amp, does the	○ Yes	○ No
Read O. Reg. 191/11 s.80(13): Ramps	earn more about your	requirements fo	r question 8.a
Comments for question 8.a			
 Since January 1, 2016, has your organization constructed new or redeveloped existing of use eating areas that you intend to maintain? * (if Yes, you will be required to answer additional questions) Read O. Reg. 191/11 s.80(17): Outdoor public use eating areas, general requirements 	outdoor public Learn more about you	Yes	No for question 9
9.a. Does your organization ensure that where they construct or redevelop outdoor pub areas that they meet the requirements as outlined in s.80(17) of the IASR?*	·	○ Yes	○ No
Read O. Reg. 191/11 s.80(17): Outdoor public use eating areas, general requirements i	Learn more about your	requirements for	or question 9.a
Comments for question 9.a			
Since January 1, 2016, has your organization constructed new or redeveloped existing spaces that you intend to maintain? * (if Yes, you will be required to answer additional questions)	outdoor play		● No
10.a. When constructing new or redeveloping existing outdoor play spaces, did your or consult with the public and persons with disabilities on the needs of children and consult with the accessibility accessibilit	caregivers, and if	○ Yes	○ No
Read O. Reg. 191/11 s.80(19): Outdoor play spaces, consultation requirements	earn more about your r	equirements for	question 10.a
Comments for question 10.a			
10.b. Did your organization incorporate accessibility features when constructing a new an existing play space as outlined in s.80(20a) of the IASR? *	or redeveloping	○ Yes	○ No
Read O. Reg. 191/11 s.80(20a): Outdoor play spaces, accessibility in design	earn more about your r	equirements for	r question 10.t
Comments for question 10,b			
10.c. Does your organization's new or redeveloped play spaces have a firm ground sur in s.80(20b) of the IASR? *	rface as outlined	○ Yes	○ No
Read O. Reg. 191/11 s.80(20b); Outdoor play spaces, accessibility in design	earn more about your r	equirements fo	r question 10.
Comments for question 10.c			
11. Since January 1, 2016, has your organization constructed new or redeveloped existing travel that you intend to maintain? * (if Yes, you will be required to answer additional questions)	exterior paths of	Yes	No
11.a. Where applicable, do your newly constructed or redeveloped exterior paths of tra technical and general requirements as outlined in s.80(21) – 80(31) of the IASR?			○ No
Read O. Reg. 191/11 s, 80(21) - 80(31): Exterior Paths of Travel	earn more about your r	equirements fo	r question 11.a
Comments for question 11.a			

12. Since January 1, 2016, has your organization constructed new or redeveloped existing off-street parking facilities that you intend to maintain? * (if Yes, you will be required to answer additional questions)	Yes	○ No
12.a. When constructing new or redeveloping off-street parking facilities that you intend to maintain, do you ensure that the off-street parking facilities meet the accessibility requirements as outlined in s.80(32) – 80(37) of the IASR? *	Yes	○ No
Read O. Reg. 191/11 s.80(32) - 80(37): Accessible Parking Learn more about your in	requirements for	question 12.a
Comments for question 12.a		
13. Since January 1, 2016, has your organization constructed a new or replaced an existing service counter? * (if Yes, you will be required to answer additional questions)	Yes	○ No
13.a. Does your organization ensure that new or redeveloped service counters meet the technical requirements as outlined in s.80(41) of the IASR? *	Yes	○ No
Read O. Reg. 191/11 s. 80(41): Service counters Learn more about your	requirements for	question 13.a
Comments for question 13,a		
14. Since January 1, 2016, has your organization constructed new fixed queuing guides? * (if Yes, you will be required to answer additional questions)	○ Yes	No
14.a. Does your organization ensure that new fixed queuing guides for obtaining services meet the technical requirements as outlined in s.80(42) of the IASR? *		O №o
Read O. Reg. 191/11 s.80(42): Fixed queuing guides Learn more about your	requirements for	question 14.a
Comments for question 14.a		
15.Since January 1, 2016, has your organization constructed new or redeveloped existing waiting areas? *	○ Yes	No
(if Yes, you will be required to answer additional questions)		
	○ Yes	○ No
(if Yes, you will be required to answer additional questions) 15.a. Does your organization ensure that new or developed fixed seating waiting areas meet the		
(if Yes, you will be required to answer additional questions) 15.a. Does your organization ensure that new or developed fixed seating waiting areas meet the technical requirements as outlined in s.80(43) of the IASR? *		
(if Yes, you will be required to answer additional questions) 15.a. Does your organization ensure that new or developed fixed seating waiting areas meet the technical requirements as outlined in s.80(43) of the IASR? * Read O. Reg. 191/11 s.80(43): Waiting areas Comments for question 15.a 16. Does your organization's public spaces have accessible elements in place as required under the Design of Public Spaces Standard of the IASR? *		
(if Yes, you will be required to answer additional questions) 15.a. Does your organization ensure that new or developed fixed seating waiting areas meet the technical requirements as outlined in s.80(43) of the IASR? * Read O. Reg. 191/11 s.80(43): Waiting areas Comments for question 15.a 16. Does your organization's public spaces have accessible elements in place as required under the Design	requirements fo	r question 15.a
(if Yes, you will be required to answer additional questions) 15.a. Does your organization ensure that new or developed fixed seating waiting areas meet the technical requirements as outlined in s.80(43) of the IASR? * Read O. Reg. 191/11 s.80(43): Waiting areas Comments for question 15.a 16. Does your organization's public spaces have accessible elements in place as required under the Design of Public Spaces Standard of the IASR? * (if Yes, you will be required to answer additional questions)	requirements fo	r question 15.a
(if Yes, you will be required to answer additional questions) 15.a. Does your organization ensure that new or developed fixed seating waiting areas meet the technical requirements as outlined in s.80(43) of the IASR? * Read O. Reg. 191/11 s.80(43): Waiting areas Comments for question 15.a 16. Does your organization's public spaces have accessible elements in place as required under the Design of Public Spaces Standard of the IASR? * (if Yes, you will be required to answer additional questions) Read O. Reg. 191/11 Part IV. 1: Design of public spaces standards Learn more about your organization's multi-year accessibility plan include procedures for preventative and emergency maintenance of the accessible elements in public spaces, and for dealing with temporary disruptions when accessible elements are not in working order as outlined in s.80(44) of	requirements fo	n question 15.a No No No No No

Provide accessible transportation services			
17. Does your organization provide conventional transportation services? * (if Yes, you will be required to answer additional questions)		○ Yes	No
Read O. Reg. 191/11 Part IV - Transportation Standards: Definitions	Learn more about your re	<u>equirements f</u>	or question 17
17.a. Does your organization have electronic pre-boarding announcements of the redestination or next major stop on its transportation vehicles, and do these annother requirements set out in section 51. O. Reg. 191/11? *		Yes	○ No
Read O. Reg. 191/11 s.51(2): Pre-boarding announcements	Learn more about your req	uirements for	question 17.a
Comments for question 17.a			
17.b. Does your organization ensure that all destination points or available route sto through electronic means and legibly and visually displayed through electronic		○ Yes	○ No
Read O. Reg. 191/11 s.52(2) - 52(3): On-board announcements	Learn more about your rec	uirements for	question 17.b
Comments for question 17.b			
18. Does your organization provide specialized transportation services? * (if Yes, you will be required to answer additional questions)		○ Yes	● No
Read O. Reg. 191/11 Part IV - Transportation Standards: Definitions	Learn more about your re	<u>equirements f</u>	or question 18
18.a. Does your organization follow the eligibility requirements as outlined in section Accessibility Standards Regulation? *	i 63 of the Integrated	O Yes	○ No
Read O. Reg. 191/11 s.63: Categories of eligibility	Learn more about your rec	quirements for	question 18.a
Comments for question 18.a	•		
19. In the jurisdiction where you provide specialized transportation services, does another provide conventional transportation services? * (if Yes, you will be required to answer additional questions)	ner organization	○ Yes	○ No
19.a. Does your organization ensure that it does not charge more than the highest conventional transportation services within the same jurisdiction? *	fare charged for	○ Yes	O No
Read O. Reg. 191/11 s.66: Fare parity	Learn more about your rec	quirements for	question 19.a
Comments for question 19.a			
19.b. Does your organization ensure that it has, at minimum, the same hours and d one of the conventional transportation service providers within the same jurisc		○ Yes	○ No
Read O, Reg. 191/11 s.70; Hours of service	Learn more about your rec	quirements for	r question 19.b
Comments for question 19.b			
20. Other than the requirements cited in the above questions, is your organization com requirements in effect under the Integrated Accessibility Standards Regulation? *	plying with all other	Yes	○ No
Read O. Reg. 191/11: Integrated Accessibility Standards	Learn more about your r	equirements (for question 20
Comments for question 20			

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2017 Accessibility compliance report

Organization category Designated Public Sector			Number of employees range 50+			
Filing organization legal name The Corporation of the Township of Centre Wellingt						
Fields marked with an asterisk (*) are mandatory.					
D. Accessibility complianc	e report summary	,	***************************************	WARRANT L		
Your organization may be audited	d to verify compliance.					
E. Accessibility compliance	*				- Mariant	
Section 15 of the Accessibility for O the required information has been p	ntarians with Disabilities Act, provided and is accurate, sign	2005 re ed by a	equires that accessibility repo person with authority to bind	orts include a st the organization	atement certifying that all on(s).	
Note: It is an offence under the Act	to provide false or misleading	g inform	ation in an accessibility repo	rt filed under th	e AODA.	
The certifier may designate a prima main contact.	ry contact for the Accessibility	y Direct	orate to contact the organiza	tion(s); otherwi	se the certifier will be the	
Certifier: Someone who can legally	bind the organization(s).			•		
Primary Contact: The person who	will be the main contact for ac	ccessib	ility issues.			
Acknowledgement						
I certify that I have the authority	to bind all organizations spec	cified in	Section A of this form, *			
I certify that all the required info	rmation has been included in	this rep	oort, and, *			
I certify that the information in the	nis report is accurate. *					
Certification date (yyyy-mm-dd) *						
Certifier information	White the second					
Last name *			First name *			
Position title *	Business phone number *	Exten	sion Check here if TT	Υ		
Email *			Alternate phone number	Extension	Fax number	
Primary contact for the organizat	ion(s)					
Check if the primary contact is s	same as the certifier					
Last name *			First name *			
Position title *	Business phone number *	Exten	sion	Υ		
Email * Alternate phone number Extension Fax number					Fax number	