



Accessibility Standards Customer Feedback and Request for Alternative Accessible Formats Form

Empire Communities is committed to providing a barrier-free environment for all stakeholders including our clients/customers, employees, job applicants, suppliers, and any visitors who may enter our premises, access our information, or use our services. As an organization, we respect and uphold the requirements set forth under the *Accessibility for Ontarians with Disabilities Act* (2005), and its associated standards and regulations.

Empire Communities understands that we have a responsibility for ensuring a safe, dignified, and welcoming environment for everyone. We are committed to ensuring our organization's compliance by incorporating accessibility legislation into our policies, procedures, equipment requirements, training, and best practices. We will review these policies and practices annually, as organizational changes occur, or in anticipation of compliance deadlines. In addition, we will strive to meet the needs of individuals with disabilities in a timely and effective manner.

Providing an accessible and barrier-free environment is a shared effort, and as an organization, Empire Communities is committed to working with the necessary parties to make accessibility for all a reality.

Should you have any feedback on our services and our ability to accommodate accessibility needs please complete this form or direct your comments in person, by email or telephone to the contact below. You may also use this form and contact information for accommodation requests for documents in alternative/accessible formats. Where the accommodation cannot be readily provided or whether the appropriate accommodation is uncertain, advanced notice may be required.

Please submit your request, feedback, questions or concerns to:

Our Human Capital Team

Phone: (905) 307-8102 ext. 1127, OR

Email: accessibility@empirecommunities.com, OR

Mail: Human Capital Department
EMPIRE COMMUNITIES
125 Villarboit Crescent
Vaughan, Ontario, Canada L4K 4K2

Please indicate the date and location of your visit:

Date:		Location	
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1. Were you satisfied with the customer service we provided you? (Please indicate your response(s) checking the box(es) and/or providing feedback in the comments section)

		COMMENTS
YES	<input type="checkbox"/>	
NO	<input type="checkbox"/>	
SOMEWHAT	<input type="checkbox"/>	

2. Was our customer service provided to you in an accessible manner?

		COMMENTS
YES	<input type="checkbox"/>	
NO	<input type="checkbox"/>	
SOMEWHAT	<input type="checkbox"/>	

3. Did you experience any difficulty accessing our goods and services?

		COMMENTS
YES	<input type="checkbox"/>	
NO	<input type="checkbox"/>	
SOMEWHAT	<input type="checkbox"/>	

Please let us know of any specific material or communication we provide that you would like to receive in an alternative/accessible format, we will contact you to review the options we have available. Please provide below any additional feedback comments or concerns:

How do you prefer to be contacted? (optional)

EMAIL		PHONE NUMBER	
MAIL		OTHER	

Thank you,
EMPIRE COMMUNITIES

Customer Name

Customer Signature

Date

Company Rep Name

Company Rep Signature

Date