Accessibility Compliance Report

You can use one form to file an accessibility compliance 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: While business and non-profit organizations with 1-19 employees are not required to submit an accessibility compliance report, they must still comply with the AODA.

Organization information

Table 1: Organization category, number of employee range and reporting year

Organization Category (required)	Number of employee range (required)	Reporting year (required)
Business or Non-profit	20-49 employees	2026 BNP

Business details

How to count your employees?

In your employee count, include all:

- full-time employees
- part-time employees
- seasonal employees
- contract workers

Do not count:

- employees outside Ontario
- volunteers
- independent contractors

How can I find my CRA business number or AODA Identifier?

You can find your BN9 number by:

- Logging into the CRA My Business Account
- Checking your GST/HST or Corporation Notice of Assessment under Notice Details
- Checking your GST/HST credit notice
- To learn more, visit Business number - Canada.ca (https://www.canada.ca/en/services/taxes/business-number.html?utm_campaign=not-applicable&utm_medium=vanity-url&utm_source=canada-ca_business-number ↗)

If you do not have a BN9, please contact aoda.assistance@ontario.ca to receive an AODA identifier.

How to find your industry?

You can search for North American Industry Classification (NAICS) codes using the Statistics Canada website (https://www23.statcan.gc.ca/imdb/p3VD.pl?Function=getVD&TVD=1369825 ↗).

Table 2: Organization business details (maximum up to 20)

Item Number	Organization legal name (required)	Number of employees in Ontario (required)	Business number (BN9) or AODA identifier (required)	Operating / business name	Organization Sector (required)	Subsector (required)	Industry Group (required)
Item # 1	Brock Community Health Centre	29	844733618	Brock Community Health Centre	62 - Health Care and Social Assistance	621 - Ambulatory Health Care Services	6214 - Out-Patient Care Centres

Business address

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

Table 3: Organization business address (maximum up to 20)

Item Number	Organization legal Name (required)	Address line 1 (required)	Address line 2	City (required)	Province or State (required)	Postal code or Zip code (required)	Country (required)
Item # 1	Brock Community Health Centre	39 Cameron Street W (West)	N/A	Cannington	ON (Ontario)	L0E 1E0	Canada

Mailing address

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

Table 4: Organization mailing address (maximum up to 20)

Item Number	Organization legal name (required)	Address line 1 (required)	Address line 2	City (required)	Province or State (required)	Postal code or Zip code (required)	Country (required)
Item # 1	Brock Community Health Centre	PO BOX 69	N/A	Cannington	ON (Ontario)	L0E 1E0	Canada

Certification statement

Section 15 of the Accessibility for Ontarians with Disabilities Act, 2005 (AODA) 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 Ministry for Seniors and Accessibility 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 all the information is accurate, and I have the authority to bind the organization (required)

Certification date (yyyy-mm-dd) (required) 2026-11-09

Certifier information

Table 5: Certifier information

Last name (required)	First name (required)	Position title (required)	Business phone number (required)	Business phone number extension	Email (required)	Alternate phone number	Alternate phone number extension	Fax number
McPherson	Janet	Executive Director	705-432-3322	110	jmcpherson@brockchc.ca	N/A	N/A	705-426-4215

Primary contact for the organization(s)

☑ Check if the primary contact is same as the certifier

Table 6: Primary contact information

Last name (required)	First name (required)	Position title (required)	Business phone number (required)	Business phone number extension	Email (required)	Alternate phone number	Alternate phone number extension	Fax number
McPherson	Janet	Executive Director	705-432-3322	110	jmcpherson@brockchc.ca	N/A	N/A	705-426-4215

Compliance questions

Customer Service Standards

Question 1. Is your organization in compliance with all applicable requirements of the Customer Service Standards?

☑ Yes ☐ No

Resources for Question 1

- Read Ontario Regulation 191/11, Part IV.2: Customer Service Standards (https://www.ontario.ca/laws/regulation/110191#BK148 ↗)
- Learn more about your requirements for question 1 (https://www.ontario.ca/page/accessibility-rules-public-sector-organizations#section-7 ↗)
- The Accessibility Standards Checklist (https://forms.mgcs.gov.on.ca/dataset/on00125 ↗)

Comments for Question (Please provide additional details to support your answer)

N/A