# 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:

Toll free phone: 1-866-515-2025 TTY Toll free: 1-800-268-7095

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.



# 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.

Fields marked with an asterisk (\*) are mandatory. A. Organization information Organization category \* Number of employees range \* Reporting year **Business or Non-profit** 50+ employees 2023 **Business details** Organization legal name \* Number of employees in Ontario \* Help Watts Water Technologies (Canada) Inc. Technologies de l'eauWatts 62 (Canada) inc. Business number (BN9) \* 105596118 Check if operating/business name is same as legal name Organization operating/business name Watts Water Technologies (Canada) Inc. Sector that best describes your organization's principal business activity \* **Help** 31-33 - Manufacturing Subsector (if possible) Industry group (if possible) 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. Canada O USA International Type of address \* Street address Street address served by route Other Unit number Street number \* Street name \* 5435 North Service Road Street direction Province \* Street type City \* ON (Ontario) Burlington Postal code (e.g. A1A 1A1) \* L7L 5H7 **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 below	will change based o	n your seled	ction.		
● Canada USA		◯ International			
Type of address	Street addres	ss C	Street address served by route	Other	
Unit number	Street number * 5435	Street nam North Ser	· <del>-</del>		
Street type	Street direction		City * Burlington		Province * ON (Ontario)
Postal code (e.g. L7L 5H7	A1A 1A1) *				

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.



Last name \*
Bergeron

# 2023 Accessibility compliance report

Organization category Busin					
Number of employees range					
		(Canada) Inc. Technologi	es de l'eauWatts (Canada) inc.		
Filing organization business r	number (BN9) 105596118				
Fields marked with an asteris	k (*) are mandatory.				
B. Understand your acce	ssibility requirements				
Before you begin your report, yo	u can learn about your accessib	ility requirements at <u>ontario.</u>	ca/accessibility		
Additional accessibility requirem  • a library board	ents apply if you are:				
• a producer of edu	cation material (e.g. textbooks)				
an education institution	tution (e.g. school board, college	e, university or school)			
• <u>a municipality</u>					
C. Accessibility complian	nce report certification				
Section 15 of the <i>Accessibility for Ontarians with Disabilities Act, 2005</i> 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	g information in an accessib	ility 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 leg	gally 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 *					
Certification date (yyyy-mm-dd)	* 2024-01-24				
Certifier information					
Last name * Bergeron		First name * Kate			
Position title * Other	Position title other * Associate General Counsel	Business phone number * 978-837-1043	Extension Check here if TTY		
Email * kate.bergeron@wattswater.c	om	Alternate phone number	Extension Fax number		
Primary contact for the org	Primary contact for the organization(s)				

First name \*

Kate

Position title * Other	Position title other * Associate General Counsel	Business phone number * 978-837-1043	Extension		eck here TY
Email * kate.bergeron@wattswater.c	om	Alternate phone number	Extension	Fax numbe	r
D. Accessibility complian	ice report questions				
nstructions					
Please answer each of the follow	ving compliance questions. Use	the Comments box if you wi	sh to comm	ent on any re	esponse.
	question, click the help links whic ons and the link on the right to vi				n the left to
General					
	l and implemented written policie plicable accessibility requiremen			<ul><li>Yes</li></ul>	○ No
Read O. Reg. 191/11, s. 3 (1): E	stablishment of accessibility poli	cies Learn more abou	<u>ıt your requi</u>	rements for	question 1
Comments for question 1					
2. Has your organization establ (If Yes, please answer additi	lished and implemented a multi-y	/ear accessibility plan? *		<ul><li>Yes</li></ul>	○ No
Read O. Reg. 191/11, s. 4 (1): A	• • •	Learn more abou	<u>ıt your requi</u>	rements for	question 2
2.a. Does your organization (If Yes, please answer				<ul><li>Yes</li></ul>	○ No
Read O. Reg. 191/11, s. 4 (1	• • • • • • • • • • • • • • • • • • • •	Learn more abou	ut your requi	rements for	question 2.a
Comments for question 2.a					
2.a.i Is your organizati	on's accessibility plan posted on	your organization's website	·? *	<ul><li>Yes</li></ul>	○ No
Read O. Reg. 191/11,	s. 4 (1): Accessibility plans	Learn more about	your require	ments for qu	uestion 2.a.i
Comments for question 2.a.i					
2.a.ii Does your organi when requested?	zation provide the accessibility p	olan in an accessible format		Yes	○ No
Read O. Reg. 191/11,	s. 4 (1): Accessibility plans	Learn more about	your require	ments for qu	uestion 2.a.ii
Comments for question 2.a.ii					

	2.b Does your organization update the accessibility plan at least on	ce every 5 years?    No
	Read O. Reg. 191/11, s. 4 (1): Accessibility plans	Learn more about your requirements for question 2.b
	Comments for question 2.b	
3.	Does your organization provide appropriate training on: *	
Re	ead O. Reg. 191/11, s. 7 (1): Training	Learn more about your requirements for question 3
	3.a. The AODA Integrated Accessibility Standards Regulation? *	
	Read O. Reg. 191/11, s. 7 (1): Training	Learn more about your requirements for question 3.a
	Comments for Updated training is currently being rolled out to a question 3.a	Il Ontario based employees.
	3.b The Human Rights Code as it pertains to people with disabilities	s? *
	Read O. Reg. 191/11, s. 7 (1): Training	Learn more about your requirements for question 3.b
	Comments for question 3.b	
In	formation and communications	
4.	Does your organization have a process for receiving and responding that is accessible to people with disabilities? *	
	<b>Note:</b> This requirement is applicable regardless of whether customers on your premises.	s are permitted
Da	(If Yes, please answer an additional question) ead O. Reg. 191/11, s. 11 (1): Feedback	Learn more about your requirements for question 4
N.E		
	4.a. Does your organization notify the public about the availability of and communications supports with respect to the feedback prod Note: This requirement is applicable regardless of whether cust on your premises. *	cess?
	Read O. Reg. 191/11, s. 11(2): Feedback	Learn more about your requirements for question 4.a
	Comments for question 4.a	

ο.	indirectly modify o	our organization have one (or more) website(s) which it controlly ('controls' means that your organization is able to add, remocontent and functionality of the website)? * please answer an additional question)	•	• Yes	No
Re	ad O. Re	eg. 191/11, s. 14: Accessible websites and web content	Learn more about your re	equirements for	question 5
	We red an	o all your organization's internet websites conform to World Web Content Accessibility Guidelines 2.0 Level AA (except for licorded audio descriptions)? In the comments box, please list to address of your publicly available web content, including we toges, and apps. *	ve captions and pre- he complete names	Yes	○ No
	Read O.	. Reg. 191/11, s. 14: Accessible websites and web content	Learn more about your re	equirements for	question 5.a
	Comme question				
Cı	ıstomeı	r Service			
6.	<ul><li>Staff</li><li>Peop</li><li>Peop</li></ul>	our organization provide training about providing goods, service with disabilities to the following? *  and volunteers  ble involved in developing accessibility policies  ble providing goods, services or facilities on behalf of the organizations analyses on additional question)		Yes	○ No
Re	` .	please answer an additional question) eg. 191/11, s. 80.49: Training for staff, etc.	Learn more about your re	equirements for	auestion 6
· ·			<u>Learn more about your re</u>	•	<del>question o</del>
	6.a. Do	pes the training include all of the following: *		Yes	○ No
	•	A review of the purposes of the AODA?			
	•	A review of the purposes of the Customer Service Standards			
	•	How to interact and communicate with persons with various	• • • • • • • • • • • • • • • • • • • •		
	•	How to interact with persons with disabilities who use an ass the assistance of a guide dog or other service animal or the person?	•		
	•	How to use equipment or devices available on the provider's provided by the provider that may help with the provision of facilities to a person with a disability?	•		
	•	What to do if a person with a particular type of disability is had accessing the provider's goods, services or facilities?	aving difficulty		
	Read O.	. Reg. 191/11, s. 80.49: Training for staff, etc.	Learn more about your re	equirements for	question 6.a
	Comme question	ents for Updated training is currently being rolled out to a n 6.a	all Ontario based employ	ees.	

<ol> <li>If there is a temporary disruption of goods, services or facilities used by persons with disabilities, does your organization give a notice of the disruption to the public? * (If Yes, please answer an additional question)</li> </ol>	Yes	) No
Read O. Reg. 191/11, s. 80.48 (1): Notice of temporary disruptions  Learn more about y	our requirements fo	r question 7
7.a. Does the notice of the disruption include all of the following? *	<ul><li>Yes</li></ul>	○No
The reason for the disruption?		
Its anticipated duration?		
<ul> <li>A description of available alternative facilities or services (if any)?</li> </ul>		
Read O. Reg. 191/11, s. 80.48 (2): Notice of temporary disruptions  Learn more about y	our requirements fo	r question 7.a
Comments for question 7.a		
8. Does your organization ever require a person with a disability to be accompanied by a support person when on your premises? *  (If Yes, please answer an additional question)	○ Yes	<ul><li>No</li></ul>
Read O. Reg. 191/11, s. 80.47 (5): Use of service animals and support persons	our requirements fo	r question 8
<ul> <li>8.a. Does your organization do all of the following before requiring a person with a disabilit to be accompanied by a support person on your premises: *</li> <li>Consult with the person with a disability?</li> </ul>	ty Yes	○ No
<ul> <li>Determine a support person is necessary to protect the health or safety of the person with a disability or others on premises?</li> </ul>		
<ul> <li>Determine that there is no other way to protect the health or safety of the person with a disability or others on premises?</li> </ul>		
	our requirements fo	r question 8.a
support persons  Comments for question 8.a		
Employment		
<ol> <li>Does your organization employ any persons with disabilities for whom you have provided individualized workplace emergency response information? * (If Yes, please answer additional questions)</li> </ol>	○ Yes	<ul><li>No</li></ul>
Read O. Reg. 191/11, s. 27 (1): Workplace emergency response Learn more about y information	our requirements fo	r question 9

9.a.	Does your organization review the individualized workplace er information for all of the following? *	○ Yes	○ No	
	• When the employee moves to a different location in the or	ganization?		
	• When the employee's overall accommodation needs or pla	ans are reviewed?		
	When your organization reviews its general emergency po	licies?		
	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			
que	stion 9.a			
9.b.	Do any of the employees for whom your organization has proviously workplace emergency response information require assistance (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	equirements for o	question 9.b
Con	ments for stion 9.b			
	9.b.i Has your organization, with the employee's consent, present emergency response information to the person designates assistance to the employee? *	·	○Yes	○ No
	Read O. Reg. 191/11, s. 27 (2): Workplace emergency response information	Learn more about your rec	լuirements for զւ	uestion 9.b.i
	Comments for question 9.b.i			
	9.b.ii Was the individualized workplace emergency response i soon as practicable after your organization became aw accommodation due to the employee's disability? *		○ Yes	○No
	Read O. Reg. 191/11, s. 27 (3): Workplace emergency response information  Comments for question 9.b.ii	Learn more about your rec	uirements for qu	uestion 9.b.ii

Design of public spaces			
<ul> <li>10. Since January 1, 2017, has your organization constructed new or redefollowing items? * <ul> <li>Outdoor public use eating areas</li> <li>Outdoor play space</li> <li>Off-street parking</li> <li>Service counter</li> <li>Fixed queuing guides</li> <li>Waiting areas</li> <li>(If Yes, please answer additional questions)</li> </ul> </li> </ul>	eveloped any of the	○ Yes	<b>●</b> No
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards	Learn more about your re	quirements fo	or question 10
10.a. Where applicable, do the newly constructed or redeveloped item requirements as outlined in the Design of Public Spaces Standa		○ Yes ○	
Read O. Reg. 191/11 Part IV.1: Design of public spaces standards	Learn more about your re	quirements fo	or question 10.a
Comments for question 10.a			
10.b. Does your organization's multi-year accessibility plan include proprehending and emergency maintenance of the accessible eler spaces, and for dealing with temporary disruptions when access not in working order? *	ments in public	○ Yes	○ No
Read O. Reg. 191/11, s. 80.44: Maintenance of accessible elements	Learn more about your re	quirements fo	or question 10.b
Comments for question 10.b			

# 2023 Accessibility Compliance Report

Organization category Business or Non-profit

Number of employees range 50+

Filing organization legal name Watts Water Technologies (Canada) Inc. Technologies de l'eauWatts (Canada) inc.

Filing organization business number (BN9) 105596118

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.**