

ACCESSIBILITY FEEDBACK FORM

ACL Steel Ltd. strives for excellence in providing accessible customer service and upholding the values of dignity, independence, integration, and equal opportunity for all of our customers. We welcome your feedback to help us improve our services. Please complete the following form to give ACL your input.

Time and date of visit:	
Purpose of your visit:	
Who/ which department	
were you visiting?	
Was the service provided in an accessible manner/ format?	
Were there any barriers to your access of services?	
Were your customer service needs responded to swiftly and appropriately?	
Would you like to speak to someone about your	
customer service experience	
Please provide any details abou	ıt your experience:



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If you wish to be contacted, please provide your information:

Name:	
Phone number:	
Email address:	
Mailing Address:	
How would you like to be contacted:	

This form can be mailed, faxed, or hand-delivered to the following: Human Resource, Health and Safety Coordinator, 2255 Shirley Drive, Kitchener, Ontario, N2B 3X4. This form can be emailed to aclayton@gmail.com or Faxed to 519-568-8643. ACL Steel Ltd. will respond to your feedback within ten business days outlining action(s) to be taken. Personal information contained in this form is collected according to Ontario Regulation 429/07, the Accessibility Standards for Customer Service, and will be used to respond to your comments or request.