



Accessibility for Ontarians with Disabilities Act (AODA) Feedback Form

Thank you for visiting Venture Metal Works Inc. We value everyone and strive to meet their needs. We recognize that receiving feedback provides a valuable opportunity to learn and improve.

1. Date of Visit: _____ Time of Visit: _____

2. Did we respond to your needs? Yes No

If No, please explain:

3. Was our service provided to you in an accessible manner? Yes No

If No, please explain:

4. Optional information - complete only if you wish to be contacted.

Preferred contact method:

Telephone: _____ ext. _____

Email:

Mailing Address:

Name: _____

Address: _____

City: _____

Postal Code: _____

Please complete the Customer Feedback Form and email the form to amonaco@venturemetalworks.ca. If you have questions, call our office at 416-614-9004. Responses will follow within ten business days.