

## Statement of Acknowledgement O. Reg. 191/11 Customer Service Standard Pursuant to the AODA, 2005

|   | (co   | (position<br>(organizentract number and under | ation name) umber & project name erstand the City of |
|---|---|---|--|
| I am a:   |   |   |  |
| (a) volunteer   | (b) agent   | (c)   | contractor   |
| (d) consultant  | (e) third party   | (f)   | vendor   |
| for the City of Hamilton. V<br>I will comply with the requaccessibility laws, regulating<br>[The following sentence of for the City of Hamilton, I<br>Handbook. | uirements of the Handons and by-laws.  Toes not apply to volu | dbook and<br>nteers.] P                       | I all applicable                                     |
| I understand that if I have<br>to me, I may contact the<br>applicable contract or the<br>905 546-2424, Ext. 8080  | City of Hamilton Proje<br>Human Rights, Diver                 | ect Manag                                     | er assigned for this                                 |
| Signature   | Date  | <b>2</b>                                      |  |
| Please return this signe  | ed form by mail, em   | nail or in                                    | person to:   |

Human Rights, Diversity and Inclusion 100 King Street West, 10th Floor Hamilton, ON L8L 5W2

Email: aoda@hamilton.ca