

Cityof **Kalamunda**

Please return to:

City of Kalamunda PO Box 42, Kalamunda WA 6926 **T** 08 9257 9999

E enquiries@kalamunda.wa.gov.au

kalamunda.wa.gov.au/disability

Improving Access Please Have Your Say

Your feedback is essential to informing the City of Kalamunda about current access and inclusion difficulties.

If you would like to comment on how you think the City could improve access to buildings, facilities or services for everyone, including people with a disability, please complete the form attached and return to the City of Kalamunda.

> If you require assistance filling in this form please contact us on 9257 9958.





Creating Accessible Communities

Good access benefits everyone in the community including people with a disability and their families, friends and carers, people pushing prams and seniors. The City of Kalamunda seeks to create an environment where people can access services and facilities equally.

The WA Disability Services Act 1993
(amended 2004) requires State
Government agencies and Local
Governments to ensure that services,
information and facilities are accessible
to all community members by
implementing a Disability Access
and Inclusion Plan (DAIP).

The City has developed a Social Inclusion Plan which incorporates and expands upon the standard requirement of DAIP.

Feedback on access and inclusion is essential to the development and progress of the Plan.

Providing Feedback

It is important that people who experience access difficulties let their concerns be heard. By speaking up you can also benefit others who may be experiencing a similar barrier.

To provide feedback complete the form attached (also available online), or telephone, email or write to the City of Kalamunda.

Describe the access issue clearly, including dates, times, location and names of staff, if relevant.

Follow Up

The City will respond to your feedback within ten working days.

If you would like to pursue your issue at any time, please phone or email the Community Development Officer - Inclusive Communities at the City of Kalamunda.

Thank you, we appreciate your feedback.

Access Feedback Form

I am a:

Person with a disability

Parent of a child with a disability

Business owner

Service provider

Family member or carer Other

Concerned resident

The access difficulty relates to:

Services and events Signage

Buildings Customer service counters

Car parking bays Change rooms
Footpaths/ramps Parks/reserves

Handrails Information

Doorways Staff awareness

Toilets Other

Details: The location and/or experience of the access issue is:

Name:

Address: Postcode:

Phone: Mobile:

Email:

Signed: Date:

Yes, I would like to discuss this issue further please contact me via: Phone Email

Cityof

Kalamunda

