



iAccess - Accessibility Information Standard

Beach or Swimming Area This Location:

Please check the answer that best represents your facilities, and provide more detail if required.

(Please indicate distances or dimensions in feet/in or km/metres)

- 1) Is there public transport to the beach area? Yes No

If Yes, how far is it from the nearest stop to the beach or swimming area? _____ meters/ft

- 2) How close can a private vehicle get to the beach? _____ meters/ft or miles/km

- 3) Is there any parking reserved for handicapped? Yes No

- 4) Can the beach be viewed without leaving a vehicle? Yes No

- 5) How long is the access path from the parking area to the beach or swimming area?

_____ meters/ft

- 6) Are there any stairs on the access, path or trail? Yes No

If Yes, how many stairs are there? _____

What is the surface of the stairs? _____ Are there any handrails? Yes No

How high is the highest step? _____ cm/inches What is the maximum slope? _____ %

Approximately, what percentage of the path is level? _____ %

What percentage of the path is sloped? _____ %

What is the surface of the path (eg paved, soil, sand etc)? _____

How wide is the narrowest point on the path? _____ ft/metres

- 7) Are there any other barriers or conditions which may affect access (e.g. sand dunes, stream crossing, narrow bridge, slippery sections etc.)? Yes No

If Yes, please describe the barriers or conditions in more detail:



9) Is there a hardened walkway that can be used by wheelchairs, strollers or walkers which provides access right to the water? Yes No

If Yes, please describe the walkway in more detail:

10) Are there any facilities (e.g. lifts, sand chairs, sedan chairs etc) available for the use of challenged visitors to enter the water? Yes No

If Yes, please describe the facilities in more detail:

11) Are there places to sit or rest (e.g. benches, huts etc)? Yes No

If Yes, please specify locations: _____

12) Are there any services available at the site (e.g. washrooms, places to purchase food, umbrellas, lounge rentals, boat or float rentals)? Yes No

If Yes, please describe the services: _____

Are there any bathrooms on-site? Yes No

If Yes, please also complete the add-on bathroom template

Are there any other factors which may be of interest to the traveler regarding access?

Contact name for further information if needed: _____

Bookings: Telephone _____ Website: _____

Questionnaire completed date ___/___/___