

Accessibility Compliance Evaluation Feedback

Date: [Insert Date]

To: [Recipient's Name]

Address: [Recipient's Address]

Dear [Recipient's Name],

We appreciate your commitment to ensuring ADA compliance in your facility. Following our recent evaluation, we are pleased to provide you with our feedback.

Summary of Findings

- Entrances: [Describe findings regarding entrances]
- Restrooms: [Describe findings regarding restrooms]
- Signage: [Describe findings regarding signage]
- Pathways: [Describe findings regarding pathways]
- Emergency Exits: [Describe findings regarding emergency exits]

Recommendations

Based on our evaluation, we recommend the following actions:

- [Recommendation 1]
- [Recommendation 2]
- [Recommendation 3]

We encourage you to address these areas to enhance accessibility for all individuals. Should you require any further assistance, please do not hesitate to reach out.

Thank you for your dedication to accessibility.

Sincerely,

[Your Name]

[Your Position]

[Your Organization]

[Contact Information]