

REQUEST FOR ALTERNATE FORMAT

Wolf Steel Ltd. is committed to improving accessibility for persons with disabilities in align with the Accessibility for Ontarians with Disabilities Act, (AODA). Please complete the following form when requesting company information or documentation in an alternate format. This form is also available electronically on www.napoleon.com/accessibility

Eirst Name:			
First Name:			
Last Name:			
☐ General Public	☐ Associate	☐ Vendor/Contractor	
Preferred Method o	of Contact:		
☐ Telephone	☐ Email	□ Text	☐ Regular Mail
Contact Informatio	n (phone number,	email, cell pho	ne, mailing address):
Preferred File Form	nat:		
Choose an item.			
If you selected oth	er, please provide	details below:	

CONTACT US





