

The Automated External Defibrillators for Construction Projects Reimbursement Program supports safer work environments by reimbursing eligible businesses the cost (up to \$2,500) of one automated external defibrillator (AED) for every qualifying construction project site.

You must complete a separate reimbursement request form for every qualifying project site.

Please keep your proof of purchase as we may require it for verification.

All questions are mandatory.

Eligibility

Please confirm your business meets these requirements to qualify for reimbursement:

- you're the constructor of the project site, as defined under the Occupational Health and Safety Act (the constructor is the party with the greatest degree of control over health and safety on the project site and responsible for the health and safety of people working on the project site)
- your business is registered with the WSIB and has an active account
- you expect the construction project to run for three (3) or more months
- you expect to have twenty (20) or more people (including subcontractors) regularly working on site
- you have a person trained in first aid on site when work is underway

Contact information

Name	Job title
Telephone	Email address

Business information

Business name	Seven-digit WSIB account number
Address	City/town
Province	Postal code

Project site information

Project name	Notice of Project number (if applicable)
Project site street address	Project site city/town
Approximate number of employees regularly on site	Expected project duration (in months)

Email accessibility@wsib.on.ca if you need a different format or accommodation. Disponible en français.

wsib.ca | Mail: 200 Front Street West, Toronto, Ontario, M5V 3J1 | Toll free: 1-800-387-0750 | TTY: Use 711
10864A (10/25)

Automated external defibrillators purchase information

Name of company where you purchased the AED

Make (brand/manufacturer) of the AED	Model (product name) of the AED
Date of purchase	Purchase price

Declaration and submission

I declare the information provided in this application is true and accurate to the best of my knowledge.

I understand providing false information may result in the denial of this application and/or further action by the WSIB.

I understand this program reimburses for one (1) AED (up to a maximum reimbursement of \$2,500 per eligible construction project site).

I agree to provide proof of purchase (e.g., receipt, invoice) for the AED if requested by the WSIB.

I understand the WSIB's decisions about AED reimbursements are final and are not appealable.

Name	Date
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How to submit your reimbursement request form

1. Download and complete this reimbursement request form.
2. Sign into your [online services account](#) and follow the prompts to upload the form to your account. Learn more about [how to submit account documents](#) in online services.
3. You'll receive an email within two to four (2-4) weeks letting you know if your reimbursement request is approved or requesting more information.
4. You'll see a credit on your WSIB account in approximately three (3) weeks after your reimbursement request is approved.

AEDs must be purchased between July 1, 2025, and June 30, 2027, to be eligible for reimbursement. The last day to submit reimbursement request forms is July 31, 2027.

Share your feedback

Please provide your feedback about the Automated External Defibrillators for Construction Projects Reimbursement Program by [completing a short survey](#). Your feedback will help us improve the reimbursement program.

You can contact AED_Reimbursements@wsib.on.ca if you have questions.