



Annual Disability Reporting Module

ACERS User Guide for Industry



Annual Disability Reporting Module Summary

What is this module used for?

- Annual report summarizing the disability-related complaints received during the prior calendar year.

What is a disability-related complaint?

- A specific written expression of dissatisfaction received from, or submitted on behalf, of an individual with a disability concerning a difficulty associated with the person's disability, experienced when using or attempting to use the carrier's services.

Which entities are required to report?

- U.S. air carriers and foreign carriers operating to, from, or within the United States with at least one aircraft with a designed seating capacity of more than 60 passenger seats.



1. Log in to the Industry Portal

Role: Industry User

Step 1: Log in to the industry portal as a user with the "Disability Reporting" permission

1 Login

Welcome to the Aviation Industry Portal
Aviation Complaint, Enforcement, and Reporting System (ACERS)

OFFICE OF AVIATION CONSUMER PROTECTION

OACP Contact Information:

U.S. Department of Transportation
Office of Aviation Consumer Protection (OACP)
1200 New Jersey Ave, SE
Washington, DC 20590

Website: <https://www.transportation.gov/airconsumer>
Email: oacp@dot.gov



2. Create a New Annual Disability Report

Role: Industry User

Step 1: Click on the “Reporting” tab

Step 2: Click “Annual Disability Reporting”

Step 3: Click “New Annual Report”





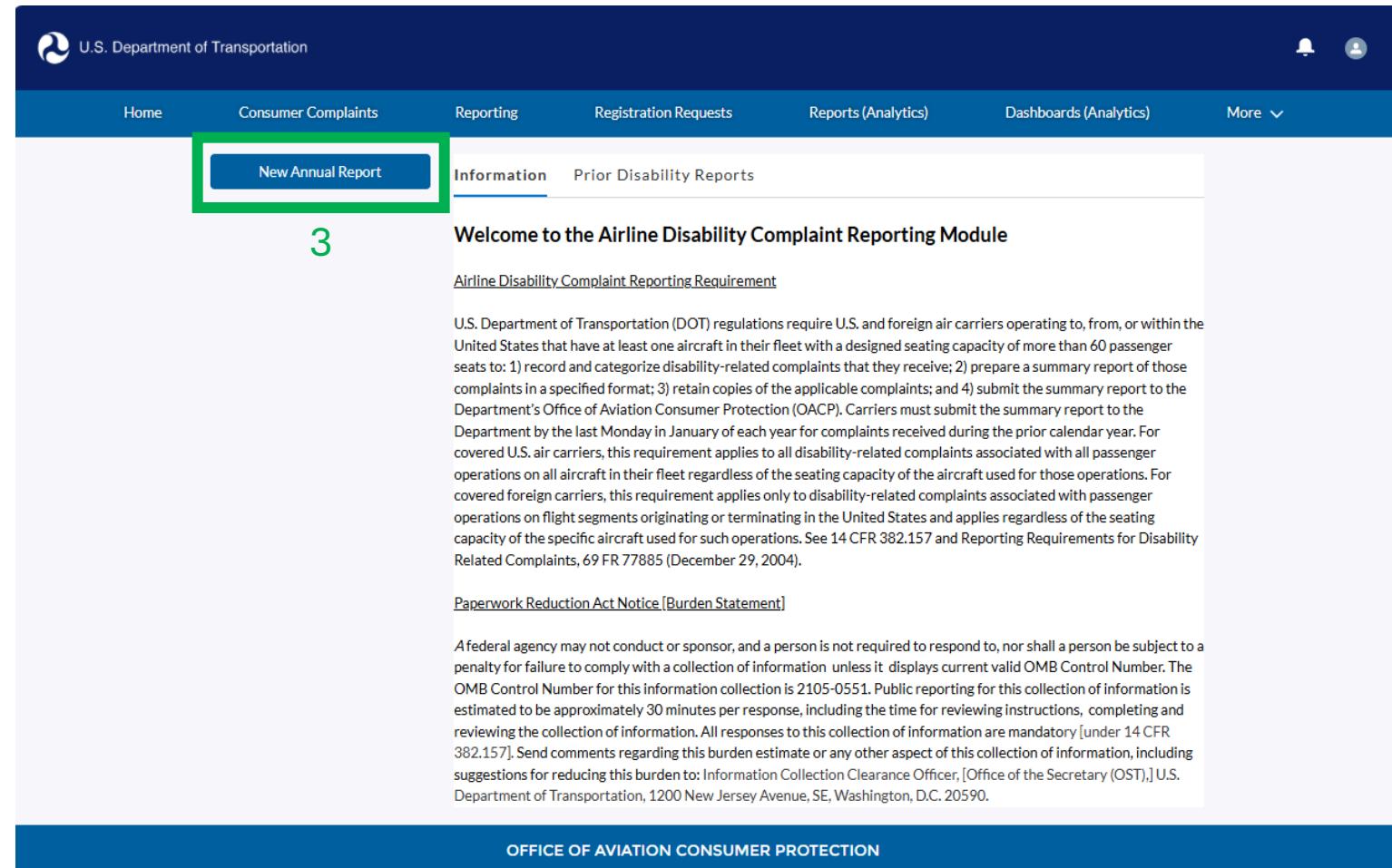
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Step 3: Click “New Annual Report”



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U.S. Department of Transportation

Home Consumer Complaints Reporting Registration Requests Reports (Analytics) Dashboards (Analytics) More ▾

New Annual Report

Information Prior Disability Reports

Welcome to the Airline Disability Complaint Reporting Module

[Airline Disability Complaint Reporting Requirement](#)

U.S. Department of Transportation (DOT) regulations require U.S. and foreign air carriers operating to, from, or within the United States that have at least one aircraft in their fleet with a designed seating capacity of more than 60 passenger seats to: 1) record and categorize disability-related complaints that they receive; 2) prepare a summary report of those complaints in a specified format; 3) retain copies of the applicable complaints; and 4) submit the summary report to the Department's Office of Aviation Consumer Protection (OACP). Carriers must submit the summary report to the Department by the last Monday in January of each year for complaints received during the prior calendar year. For covered U.S. air carriers, this requirement applies to all disability-related complaints associated with all passenger operations on all aircraft in their fleet regardless of the seating capacity of the aircraft used for those operations. For covered foreign carriers, this requirement applies only to disability-related complaints associated with passenger operations on flight segments originating or terminating in the United States and applies regardless of the seating capacity of the specific aircraft used for such operations. See 14 CFR 382.157 and Reporting Requirements for Disability Related Complaints, 69 FR 77885 (December 29, 2004).

[Paperwork Reduction Act Notice \[Burden Statement\]](#)

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information unless it displays current valid OMB Control Number. The OMB Control Number for this information collection is 2105-0551. Public reporting for this collection of information is estimated to be approximately 30 minutes per response, including the time for reviewing instructions, completing and reviewing the collection of information. All responses to this collection of information are mandatory [under 14 CFR 382.157]. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, [Office of the Secretary (OST),] U.S. Department of Transportation, 1200 New Jersey Avenue, SE, Washington, D.C. 20590.

OFFICE OF AVIATION CONSUMER PROTECTION



3. Enter User Contact Information

Role: Industry User

Step 1: Confirm that the correct airline is listed for this report

Step 3: The “Reporting Year” will automatically be set to the previous calendar year relative to the current date

Step 3: Fill in user contact information at the top of the form

Note for foreign airlines: The “State” and “Zip” fields of the report are designated as required fields in ACERS. Should these fields not apply to your airline’s contact because the contact exists outside of the United States, please enter “NA” (for Not Applicable) in the fields.

ANNUAL REPORT OF DISABILITY-RELATED COMPLAINT DATA

AIRLINE: New Airline (NA) 1

Items marked with an * are required.

[Clear Form](#)

[Zero Report](#)

Reporting Year: 2024 2

Total Number of Complaints			
0			
* First Name	* Last Name	* Email Address	* Phone
First	Last	example@newairline.com	1234567890
* Street Address	* City	* State	* Zip
1234 Example Rd	Vienna	VA	12345

3



4. Fill Out the Report

Role: Industry User

Step 1: Enter the number of complaints for each classification cell in the 13x13 grid

Note: Click “Zero Report” to enter all zeros into the grid

ANNUAL REPORT OF DISABILITY-RELATED COMPLAINT DATA
AIRLINE: New Airline (NA)
Items marked with an * are required.

[Clear Form](#) [Zero Report](#)

	Vision Impaired	Hearing Impaired	Hearing and Vision Impaired	Paraplegic	Quadriplegic	Other Wheelchair	Oxygen	Stretcher	Other Disability
Refusal to Board Passenger	1	2	3	4	5	6	7	8	9
Refusal to Board w/o Attendant	1	2	3	4	5	6	7	8	9
Security Issues Regarding Disability	1	2	3	4	5	6	7	8	9
Aircraft Not Accessible	1	2	3	4	5	6	7	8	9
Airport Not Accessible	1	2	3	4	5	6	7	8	9
Advance Notice Dispute	1	2	3	4	5	6	7	8	9
Seating Accommodation	1	2	3	4	5	6	7	8	9
Failure to Provide Assistance	1	2	3	4	5	6	7	8	9
Damage to Assistive Device	1	2	3	4	5	6	7	8	9



5a. Save the Report

Role: Industry User

Note: If the report is incomplete and needs further review, the user can save the report and return later for submission

Step 1: At the bottom, the “Acknowledgment” fields are not required to save a report for later

Step 2: Click “Save”

Step 3: The user will receive a pop-up, notifying them that the report is incomplete and still requires submission

The screenshot shows a report submission interface. At the top, there are two rows of buttons labeled 1 through 9. The first row is labeled 'Information' and the second row is labeled 'Other'. Buttons 1, 2, 3, 4, 5, 6, 7, 8, and 9 are present in the 'Information' row, while buttons 1 through 9 are present in the 'Other' row. Below these rows, a section titled 'Total Number of Complaints' displays the value '751'. Further down, there is an 'Acknowledgement' section with the following text: 'I, the undersigned, do certify that this report has been prepared under my direction in accordance with the regulations in 14 CFR Part 382.' Below this text is a green-outlined box containing a numbered field '1' and an 'Authorized Representative' input field. A note below the box states: 'I affirm that, to the best of my knowledge and belief, this is a true, correct, and complete report.' At the bottom of the page, there is a blue bar with the text 'OFFICE OF AVIATION CONSUMER PROTECTION'. Above this bar, there are two buttons: a white 'Save' button and a blue 'Submit' button. A green number '2' is placed next to the 'Save' button.



5a. Save the Report

Role: Industry User

Note: If the report is incomplete and needs further review, the user can save the report and return later for submission

Step 1: At the bottom, the “Acknowledgment” fields are not required to save a report for later

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ANNUAL REPORT OF DISABILITY-RELATED COMPLAINT DATA
AIRLINE: New Airline (NA)
Items marked with an * are required.

Clear Form Zero Report

Regarding Disability	Vision Impaired	Hearing Impaired	Hearing and Vision Impaired	Paraplegic	Quadriplegic	Other Wheelchair	Oxygen	Stretcher	Other Disability
Aircraft Not Accessible									
Airport Not Accessible									
Advance Notice Dispute									
Seating Accommodation									

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Your report is INCOMPLETE. You must return to the Industry Portal to complete the report and submit it to the DOT.

Ok



5b. Submit the Report

Role: Industry User

Note: If the report is complete, the user can submit directly through the current form

Step 1: At the bottom, fill in the “Authorized Representative” field with the first and last name of the current individual submitting the report

Step 2: Click the “I Affirm” box in the “Certification Statement”

Step 3: Click “Submit”

Step 4: The user will receive a Success pop-up

The screenshot shows a report submission form with the following sections:

- Information:** A grid of 9 boxes labeled 1 through 9.
- Other:** A grid of 9 boxes labeled 1 through 9, with boxes 1, 3, 4, 5, 6, 7, 8, and 9 highlighted in green.
- Total Number of Complaints:** A field containing the value 751.
- Acknowledgement:** A section containing:
 - I, the undersigned, do certify that this report has been prepared under my direction in accordance with the regulations in 14 CFR Part 382.
 - 1** **Authorized Representative:** A field for First Last name.
 - 2** I affirm that, to the best of my knowledge and belief, this is a true, correct, and complete report.
- Save** and **Submit** buttons.
- OFFICE OF AVIATION CONSUMER PROTECTION** header.
- Success** message: Report created successfully.

Green numbers 1, 2, 3, and 4 are overlaid on the screenshot to indicate the steps: 1 points to the 'Authorized Representative' field, 2 points to the 'I affirm' checkbox, 3 points to the 'Submit' button, and 4 points to the success message.



6. Revisit a Saved Report for Submission

Role: Industry User

Step 1: Click on the “Reporting” tab

Step 2: Click “Annual Disability Reporting”

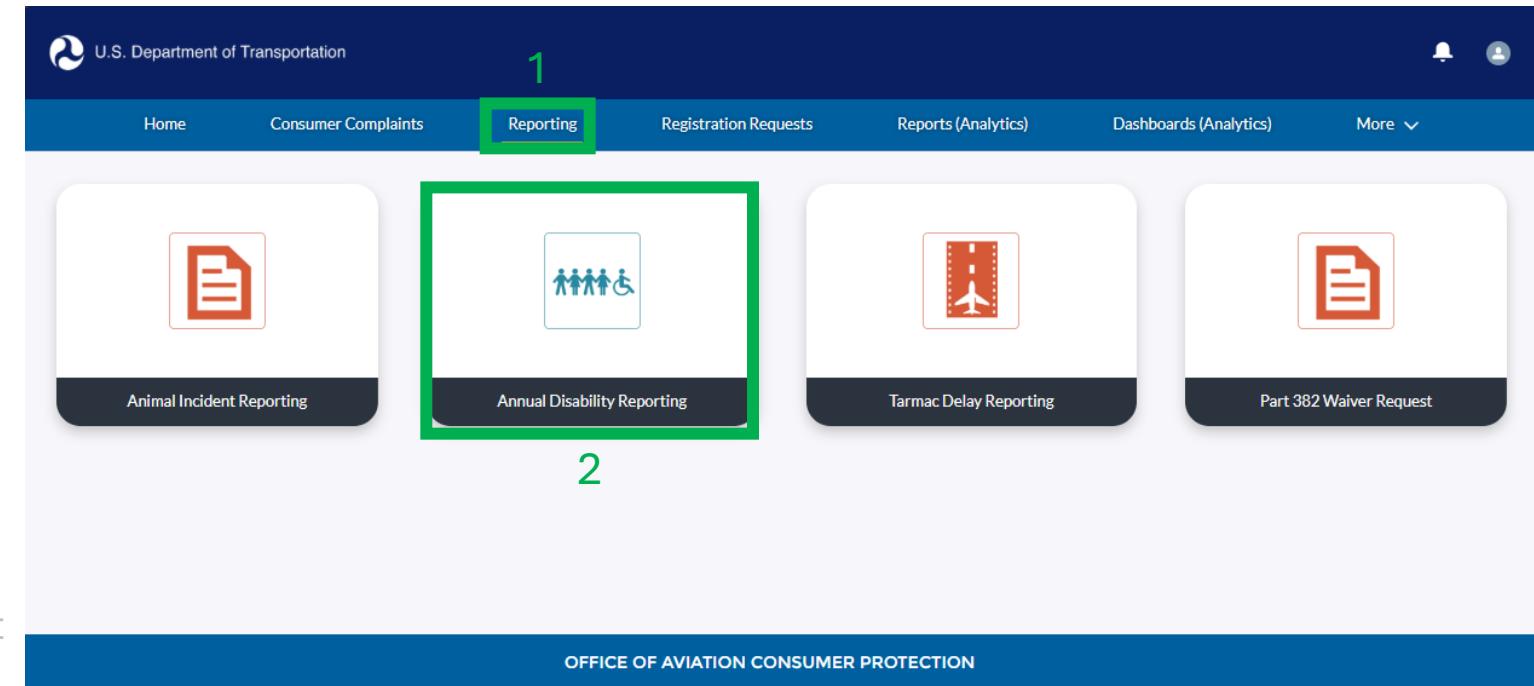
Step 3: Click “Prior Disability Reports”

Step 4: Select your report from the list

Step 5: Update the 13x13 grid as needed at the bottom

Step 6: Fill in the “Authorized Representative” field with the first and last name of the current individual submitting the report and check “I affirm”

Step 7: Click “Submit for Approval”





6. Revisit a Saved Report for Submission

Role: Industry User

Step 1: Click on the “Reporting” tab

Step 2: Click “Annual Disability Reporting”

Step 3: Click “Prior Disability Reports”

Step 4: Select your report from the list

Step 5: Update the 13x13 grid as needed at the bottom

Step 6: Fill in the “Authorized Representative” field with the first and last name of the current individual submitting the report and check “I affirm”

Step 7: Click “Submit for Approval”

Consumer Complaints Reporting Registration Requests Reports (Analytics) Dashboards (Analytics) More ▾

New Annual Report Information **Prior Disability Reports** 3

Prior Disability Reports ▾

1 item • Sorted by Status • Filtered by All reporting modules - Record Type

Year Rep...	Date Reported	Created By	Record N...	Status
1 2024	10/30/2025	Louis Armstrong	AR-378	Saved



6. Revisit a Saved Report for Submission

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Step 5: Update the 13x13 grid as needed at the bottom

Step 6: Fill in the “Authorized Representative” field with the first and last name of the current individual submitting the report and check “I affirm”

Step 7: Click “Submit for Approval”

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U.S. Department of Transportation

Home Consumer Complaints Reporting Registration Requests Reports (Analytics) Dashboards (Analytics) More

Reporting Modules Annual Disability Report

+ Follow Submit for Approval

Airline [New Airline \(NA\)](#) Status Saved Created By [Louis Armstrong](#), 10/30/2025, 2:14 ...

Details

Airline [New Airline \(NA\)](#) Contact [First Last](#) Certification Acknowledgement

Status Saved

Authorized Representative

Report Information

Year 2024 Date Reported 10/30/2025

System Information

Created By [Louis Armstrong](#) 10/30/2025 2:14 PM Last Modified By [Louis Armstrong](#) 10/30/2025 2:14 PM

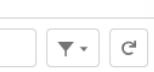
5

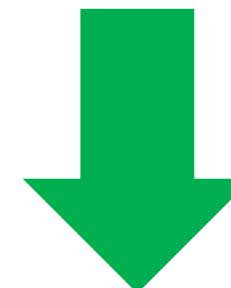
Report Information Grid

	Visual Impaired	Hearing Impaired	Walking and Vision	Paraplegic	Quadriplegic	Other Whechairs	Oxygen	Stretcher	Other Disability
Return to Board	1	2	3	4	5	6	7	8	9
Refusal to Board	1	2	3	4	5	6	7	8	9
Attendant	1	2	3	4	5	6	7	8	9
Security Issues	1	2	3	4	5	6	7	8	9
Requiring Wheelchair	1	2	3	4	5	6	7	8	9
Accessible	1	2	3	4	5	6	7	8	9
Not Accessible	1	2	3	4	5	6	7	8	9
Advance Notice	1	2	3	4	5	6	7	8	9
Dispute	1	2	3	4	5	6	7	8	9
Seating Accommodation	1	2	3	4	5	6	7	8	9
Assistance	1	2	3	4	5	6	7	8	9
Failure to Provide Assistance	1	2	3	4	5	6	7	8	9
Damage to Assistance Device	1	2	3	4	5	6	7	8	9
Storage and Checked	1	2	3	4	5	6	7	8	9

Post

Share an update... Share

Search this feed... 





6. Revisit a Saved Report for Submission

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Step 4: Select your report from the list

Step 5: Update the 13x13 grid as needed at the bottom

Step 6: Fill in the “Authorized Representative” field with the first and last name of the current individual submitting the report and check “I affirm”

Step 7: Click “Submit for Approval”

U.S. Department of Transportation

Home Consumer Complaints Reporting Registration Requests Reports (Analytics) Dashboards (Analytics) More

Reporting Modules
Annual Disability Report

+ Follow Submit for Approval

Airline: New Airline (NA) Status: Saved Created By: Louis Armstrong, 10/30/2025, 2:14 ...

Details

Airline: New Airline (NA) Contact: First Last
Status: Saved Certification Acknowledgement

Authorized Representative

Report Information

Year: 2024 Date Reported: 10/30/2025

System Information

Created By: Louis Armstrong, 10/30/2025, 2:14 PM Last Modified By: Louis Armstrong, 10/30/2025, 2:14 PM

Acknowledgement:

I, the undersigned, do certify that this report has been prepared under my direction in accordance with the regulations in 14 CFR Part 382.

Authorized Representative:

I affirm that, to the best of my knowledge and belief, this is a true, correct, and complete report.

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12/31/2025

14



6. Revisit a Saved Report for Submission

Role: Industry User

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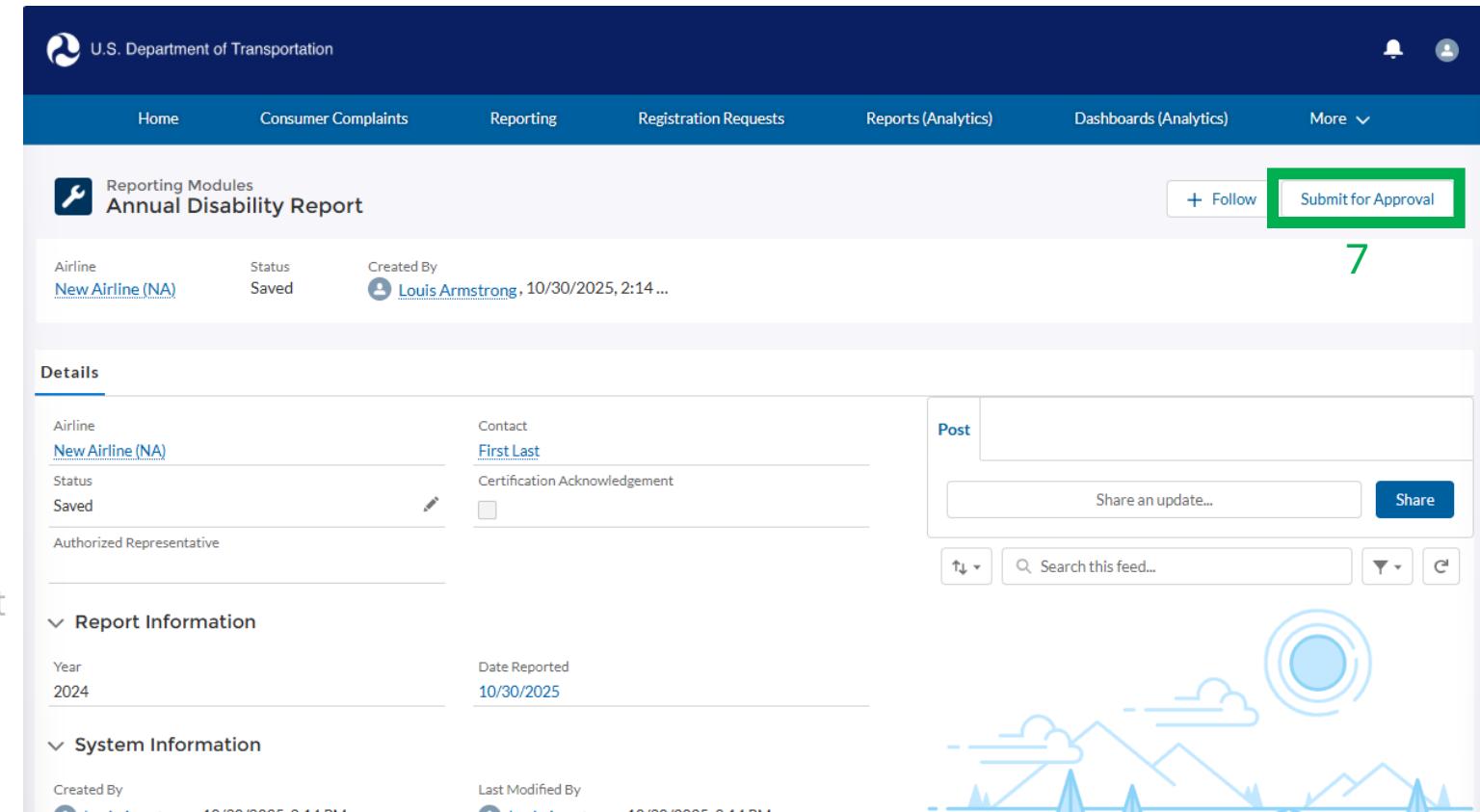
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Step 5: Update the 13x13 grid as needed at the bottom

Step 6: Fill in the “Authorized Representative” field with the first and last name of the current individual submitting the report and check “I affirm”

Step 7: Click “Submit for Approval”



The screenshot shows the U.S. Department of Transportation reporting interface. The top navigation bar includes links for Home, Consumer Complaints, Reporting, Registration Requests, Reports (Analytics), Dashboards (Analytics), and More. The main content area is titled "Reporting Modules" and "Annual Disability Report". It displays a report card for "New Airline (NA)" with a status of "Saved" and created by "Louis Armstrong" on 10/30/2025. The "Details" section includes fields for Airline, Status, Contact, and Certification Acknowledgement. Below this are sections for "Report Information" (Year: 2024, Date Reported: 10/30/2025) and "System Information" (Created By: Louis Armstrong, Last Modified By: Louis Armstrong). A "Post" section on the right includes a "Share an update..." input field and a "Share" button. A green box highlights the "Submit for Approval" button in the top right corner. A green number "7" is overlaid on the right side of the interface.



6. Revisit a Saved Report for Submission

Role: Industry User

NOTE: If the user has not properly filled out the “Acknowledgement” fields before submitting, they will be presented with an error message

Step 8: Return to the “Prior Disability Reports” list view to confirm that the report status has been updated to “Submitted”

Note: Once a report is submitted, the user will be unable to edit the report or resubmit until the next calendar year

U.S. Department of Transportation

Error creating report
Authorized Representative and Affirmation must be provided.

Home Consumer Complaints Reporting Registration Requests Reports (Analytics) Dashboards (Analytics) More

Reporting Modules Annual Disability Report

+ Follow Submit for Approval

Airline: New Airline (NA) Status: Saved Created By: Louis Armstrong, 10/30/2025, 2:14 PM

Details

Airline: New Airline (NA) Contact: First Last
Status: Saved Certification Acknowledgement:

Authorized Representative:

Report Information

Year: 2024 Date Reported: 10/30/2025

System Information

Created By: Louis Armstrong, 10/30/2025, 2:14 PM Last Modified By: Louis Armstrong, 10/30/2025, 2:14 PM

Post Share an update... Share

Search this feed...





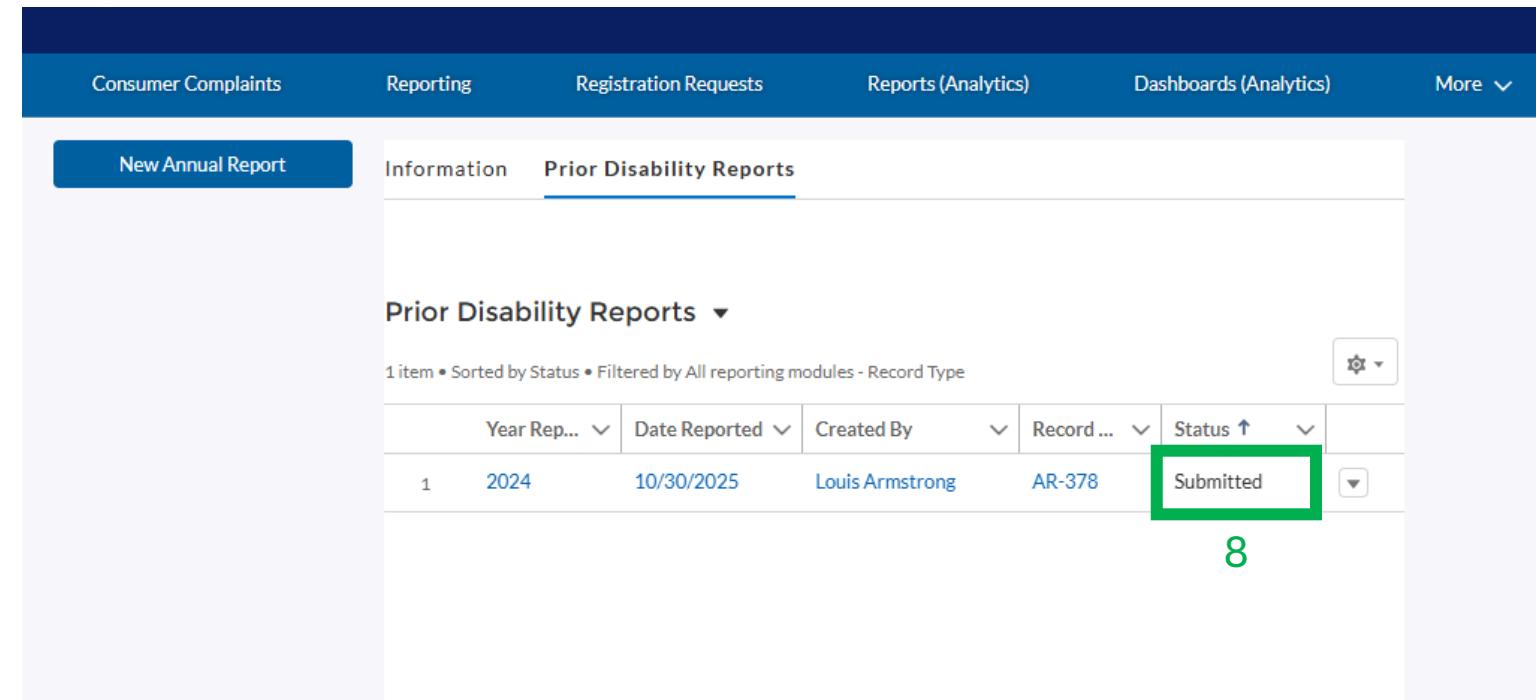
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Step 8: Return to the “Prior Disability Reports” list view to confirm that the report status has been updated to “Submitted”

Note: Once a report is submitted, the user will be unable to edit the report or resubmit until the next calendar year



The screenshot shows a user interface for managing disability reports. At the top, there is a navigation bar with links: Consumer Complaints, Reporting, Registration Requests, Reports (Analytics), Dashboards (Analytics), and More. Below the navigation bar, there are two tabs: 'New Annual Report' and 'Prior Disability Reports', with 'Prior Disability Reports' being the active tab. The main content area is titled 'Prior Disability Reports' and displays a table of reports. The table has columns for Year Rep..., Date Reported, Created By, Record..., and Status. The first row in the table shows the following data: 1, 2024, 10/30/2025, Louis Armstrong, AR-378, and Submitted. The 'Submitted' cell is highlighted with a green box. A green number '8' is positioned to the right of the table.

Year Rep...	Date Reported	Created By	Record...	Status	
1	2024	10/30/2025	Louis Armstrong	AR-378	Submitted