

Plan Summary Preview

Company Details

Company Legal Name

Chemtura Canada Co. Cie.

Company Address

25 Erb Street, Elmira (Ontario)

Report Details

NPRI ID

3553

Facility Name

West Hill

Facility Address

10 Chemical Court, Scarborough (Ontario)

Update Comments

Activities

Contacts

Select the Facility Contacts

Facility Contacts

Please assign the appropriate contact under each category below.

Public Contact: *

Jeannette Waples

Highest Ranking Employee

Helder Botelho

Person responsible for Toxic Substance Reduction Plan preparation

Lloyd Hipel

Organization Validation

Company and Parent Company Information

Company Details

Company Legal Name: *

Company Trade Name: *

Business Number: *

Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

City *

Province/Territory **

Postal Code: **

Physical Address

Address Line 1

City

Province/Territory **

Postal Code **

Additional Information

Land Survey Description

National Topographical Description

Parent Companies

Chemtura Chemicals

Company Legal Name: *

Percentage owned: *

Business Number: **

Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

City *

Province/Territory **

Postal Code: **

Country *

Physical Address

Address Line 1

City

Province/Territory **

Postal Code **

Country

Additional Information

Land Survey Description

National Topographical Description

Chemtura Corp.

Company Legal Name: *

Percentage owned: *

Business Number: **

123456789

Mailing Address

Delivery Mode

General Delivery

PO Box

Rural Route Number

Address Line 1

3700 - 1818 Market Street

City *

Philadelphia

Province/Territory **

Pennsylvania

Postal Code: **

19103

Country *

United States

Physical Address

Address Line 1

3700 - 1818 Market Street

City

Philadelphia

Province/Territory **

Pennsylvania

Postal Code **

19103

Country

United States

Additional Information

Land Survey Description

National Topographical Description

Chemtura Corporation

Company Legal Name: *

Chemtura Corporation

Percentage owned: *

100.00

Business Number: **

123456789

Mailing Address

Delivery Mode	General Delivery
PO Box	
Rural Route Number	
Address Line 1	3700 - 1818 market Street
City *	Philadelphia
Province/Territory **	Pennsylvania
Postal Code: **	19103
Country *	United States

Physical Address

Address Line 1	3700 - 1818 Market Street
City	Philadelphia
Province/Territory **	Pennsylvania
Postal Code **	19103
Country	United States
Additional Information	
Land Survey Description	
National Topographical Description	

Facility Validation

The information in this section was copied from the Single Window Information Manager (SWIM) at the time the plan summary was created. Please verify the information and update it where required. Please note that any changes made here will only be reflected in this plan summary. To ensure updates reflected in future reports, please ensure the information is updated in SWIM. After making updates in SWIM, return here and click the "Refresh" button to trigger a reload of the SWIM information. Please note all previously entered data will be modified.

Facility Information

Facility Name: *

NAICS Code: *

NPRI Id: *

ON Reg 127/01 Id

Facility Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

City *

Province/Territory **

Postal Code: **

Physical Address

Address Line 1

City

Province/Territory **

Postal Code **

Additional Information

Land Survey Description

National Topographical Description

Geographical Address

Latitude **

Longitude **

UTM Zone **

UTM Easting **

UTM Northing **

Contact Validation

The information in this section was copied from the Single Window Information Manager (SWIM) at the time the plan summary was created. Please verify the information and update it where required. Please note that any changes made here will only be reflected in this plan summary. To ensure updates reflected in future reports, please ensure the information is updated in SWIM. After making updates in SWIM, return here and click the "Refresh" button to trigger a reload of the SWIM information. Please note all previously entered data will be modified.

Contacts

Public Contact

First Name: * Last Name: * Position: * Telephone: * Ext Fax Email: *

Mailing Address

Delivery Mode PO Box Rural Route Number Address Line 1 City *

Province/Territory **

Postal Code: **

Highest Ranking Employee

First Name: *

Last Name: *

Position: *

Telephone: *

Ext

Fax

Email: *

Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

City *

Province/Territory **

Postal Code: **

Person responsible for the Toxic Substance Reduction Plan preparation

First Name: *

Last Name: *

Position: *

Telephone: *

Ext

Fax

Email: *

Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

City *

Province/Territory **

Postal Code: **

Employees

Employees

Number of Full-time Employees: *

Copy of Certifications of Plan

Copy of Certifications of Plan

Upload Document

A copy of the certification statement(s) from the Highest Ranking Employee and the Licensed Planner(s), for the Toxic Substance Reduction Plan for which the Plan Summary is being submitted are required. Please upload a single document containing all certifications.

Do not upload any certification statements that are dated after December 31. If this applies, click "?" (Help) for more information.

Comments

Website address where the Plan Summary is posted for the public

File Name	Date
-----------	------

Signed certification statement_IPA_FINAL.pdf

22/12/2016 11:04:23 AM

Plan Summary Submission

Electronic Submission

Company Name

Chemtura Canada Co. Cie.

Facility Name

West Hill

Report Submitted By (authorized delegate)

Jeannette Waples

I, the authorized delegate, acknowledge that by pressing the "Continue" button, I am electronically submitting the facility TRA Plan Summary for the identified facility.

Substances

67-63-0, Isopropyl alcohol

67-63-0, Isopropyl alcohol

Substances Section Data

Statement of Intent

Are the following included in the Facility's TRA Plan?

Use

Is there a statement that the owner or operator of the facility intends to reduce the use of the toxic substance at the facility?: *

Yes

If 'yes', exact statement of the intent that is included in the facility's TRA Plan to reduce the use of the toxic substance at the facility: **

Chemtura intends to reduce its use of isopropyl alcohol through equipment modification, leak prevention, on-site reuse, improved inventory techniques, and improved operating practices.

If 'no', reason in the facility's TRA Plan for no intent to reduce the use of the toxic substance at the facility: **

Creation

Is there a statement that the owner or operator of the facility intends to reduce the creation of the toxic substance at the facility?: *

No

If 'yes', exact statement of the intent that is included in the facility's TRA Plan to reduce the creation of the toxic substance at the facility: **

If 'no', reason in the facility's TRA Plan for no intent to reduce the creation of the toxic substance at the facility: **

Objectives, Targets and Description

Objectives

Objectives in plan: *

Use Targets

What is the targeted reduction in use of the toxic substance at the facility? *

No quantity target

Quantity

Unit

<input checked="" type="checkbox"/>	or	<input type="text"/>	<input type="text"/>
-------------------------------------	----	----------------------	----------------------

What is the targeted timeframe for this reduction? *

No timeline target

years

<input checked="" type="checkbox"/>	or	<input type="text"/>
-------------------------------------	----	----------------------

Description of targets

Creation Targets

What is the targeted reduction in creation of the toxic substance at the facility? *

No quantity target

Quantity

Unit

<input checked="" type="checkbox"/>	or	<input type="text"/>	<input type="text"/>
-------------------------------------	----	----------------------	----------------------

What is the targeted timeframe for this reduction? *

No timeline target

years



or

Description of Target

Reasons for Use

Why is the toxic substance used at the facility?: *

As a physical or chemical processing aid

Summarize why the toxic substance is used at the facility: **

as a solvent thinner

Reasons for Creation

Why is the toxic substance created at the facility?: *

This substance is not created at the facility

Summarize why the toxic substance is created at the facility: **

not created

Toxic Reduction Options for Implementation

Description of the toxic reduction option(s) to be implemented

Is there a statement that no option will be implemented?: *

No, we are implementing

If you answered "No" to this question, please add the option(s) under the appropriate Toxic Substance Reduction Categories (e.g. Materials or feedstock substitution, Product design or reformulation, etc.). If you answered "Yes" please provide an explanation below why your facility is not implementing an option.
Explanation of the reasons why no option will be implemented: **

Materials or feedstock substitution

Empty

Product design or reformulation

Empty

Equipment or process modifications

Modified equipment, layout or piping

Which activities will be undertaken to implement these reduction options?

Which activities will be undertaken to implement these reduction options?: *

Modified equipment, layout or piping

Describe the option: *

Insulate Petronate HL tank to minimize IPA losses (assumes 75% reduction in tank losses)

Estimates

N/A	tonnes	%
-----	--------	---

Estimate of the amount by which the **use** of the toxic substance at the facility will be reduced as a result of implementing the option:

<input checked="" type="checkbox"/>		
-------------------------------------	--	--

Estimate of the amount by which the **creation** of the toxic substance at the facility will be reduced as a result of implementing the option:

<input checked="" type="checkbox"/>		
-------------------------------------	--	--

Estimate of the amount by which the toxic substance **contained in the product** leaving the facility will be reduced as a result of implementing the option:

<input type="checkbox"/>	128	0.13
--------------------------	-----	------

Estimate of the amount by which the total **releases to air** of the toxic substance at the facility will be reduced as a result of implementing the option:

<input checked="" type="checkbox"/>		
-------------------------------------	--	--

Estimate of the amount by which the total **releases to water** of the toxic substance at the facility will be reduced as a result of implementing the option:

<input checked="" type="checkbox"/>		
-------------------------------------	--	--

Estimate of the amount by which the total **releases to land** of the toxic substance at the facility will be reduced as a result of implementing the option:

<input checked="" type="checkbox"/>		
-------------------------------------	--	--

Estimate of the amount by which the **disposals on-site** (including tailing and waste rock) of the toxic substance at the facility will be reduced as a result on implementing this option:

<input checked="" type="checkbox"/>		
-------------------------------------	--	--

Estimate of the amount by which the disposals off-site of the toxic substance at the facility will be reduced as a result on implementing this option:

Estimate of the amount by which total recycling off-site of the toxic substance at the facility will be reduced as a result on implementing this option:

Timelines

N/A **years**

Anticipated timelines for achieving the estimated reduction of the use of the toxic substance:

Anticipated timelines for achieving the estimated reduction of the creation of the toxic substance:

Spill or leak prevention

Other

Which activities will be undertaken to implement these reduction options?

Which activities will be undertaken to implement these reduction options?: *

Other

Describe the option: *

Mechanical integrity program (assume 0.5% reduction in IPA losses by identifying and repairing leaks), Tie T610 into SVR for sludge process

Estimates

N/A **tonnes** **%**

Estimate of the amount by which the use of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the creation of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the toxic substance contained in the product leaving the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the total releases to air of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the total releases to water of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the total releases to land of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the disposals on-site (including tailing and waste rock) of the toxic substance at the facility will be reduced as a result on implementing this option:

Estimate of the amount by which the disposals off-site of the toxic substance at the facility will be reduced as a result on implementing this option:

Estimate of the amount by which total recycling off-site of the toxic substance at the facility will be reduced as a result on implementing this option:

Timelines

N/A **years**

Anticipated timelines for achieving the estimated reduction of the use of the toxic substance:

Anticipated timelines for achieving the estimated reduction of the creation of the toxic substance:

On-site reuse, recycling or recovery

Instituted recirculation within a process

Which activities will be undertaken to implement these reduction options?

Which activities will be undertaken to implement these reduction options?: *

Instituted recirculation within a process

Describe the option: *

Reuse drip pails of IPA back into Petronate HL process, Reuse drip pails of product back into Petronate HL process

Estimates

N/A **tonnes** **%**

Estimate of the amount by which the **use** of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the **creation** of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the toxic substance **contained in the product** leaving the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the total **releases to air** of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the total **releases to water** of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the total **releases to land** of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the **disposals on-site** (including tailing and waste rock) of the toxic substance at the facility will be reduced as a result on implementing this option:

Estimate of the amount by which the **disposals off-site** of the toxic substance at the facility will be reduced as a result on implementing this option:

Estimate of the amount by which total **recycling off-site** of the toxic substance at the facility will be reduced as a result on implementing this option:

Timelines

N/A **years**

Anticipated timelines for achieving the estimated reduction of the **use** of the toxic substance:

Anticipated timelines for achieving the estimated reduction of the **creation** of the toxic substance:

Improved inventory management or purchasing techniques

Other

Which activities will be undertaken to implement these reduction options?

Which activities will be undertaken to implement these reduction options?: *

Describe the option: *

Estimates

N/A **tonnes** **%**

Estimate of the amount by which the **use** of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the **creation** of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the toxic substance **contained in the product** leaving the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the total **releases to air** of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the total **releases to water** of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the total **releases to land** of the toxic substance at the facility will be reduced as a result of implementing the option:

Estimate of the amount by which the **disposals on-site** (including tailing and waste rock) of the toxic substance at the facility will be reduced as a result on implementing this option:

Estimate of the amount by which the **disposals off-site** of the toxic substance at the facility will be reduced as a result on implementing this option:

Estimate of the amount by which total **recycling off-site** of the toxic substance at the facility will be reduced as a result on implementing this option:

Timelines

N/A years

Anticipated timelines for achieving the estimated reduction of the **use** of the toxic substance:

Anticipated timelines for achieving the estimated reduction of the creation of the toxic substance:



Good operator practice or training

Empty

Rationale for why the listed options were chosen for implementation

General description of any actions undertaken by the owner and operator of the facility to reduce the use and creation of the toxic substance at the facility that are outside of the plan

License Number of the toxic substance reduction planner who made recommendations in the toxic substance reduction plan for this substance (format TSRPXXXX): *

License Number of the toxic substance reduction planner who has certified the toxic substance reduction plan for this substance (format TSRPXXXX): *

What version of the plan is this summary based on?: *