



National Pollutant Release Inventory (NPRI) and Partners



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* indicates a required field, ** indicates a conditionally required field

Plan Summary Preview

Company Details

Company Legal Name

Alcot Plastics Ltd.

Company Address

31 Malcolm Road, Guelph (Ontario)

Report Details

NPRI ID

2473

Facility Name

Alcot Plastics Ltd. - Guelph

Facility Address

31 Malcolm Road, Guelph (Ontario)

Update Comments

Activities

Contacts

Select the Facility Contacts

Facility Contacts

Please assign the appropriate contact under each category below.

Public Contact: *

John Alac

Highest Ranking Employee

John Alac

Person responsible for Toxic Substance Reduction Plan preparation

Michael Laplante

Organization Validation

Company and Parent Company Information

Company Details

Company Legal Name: *

Alcot Plastics Ltd.

Company Trade Name: *

Alcot Plastics Ltd.

Business Number: *

100120740

Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

31 Malcolm Road

City *

Guelph

Province/Territory **

Ontario

Postal Code: **

N1K 1A7

Physical Address

Address Line 1

31 Malcolm Road

City

Guelph

Province/Territory **

Ontario

Postal Code **

N1K 1A7

Additional Information

Land Survey Description

National Topographical Description

Parent Companies

Empty

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: *

Alcot Plastics Ltd. - Guelph

NAICS Code: *

326150

NPRI Id: *

2473

ON Reg 127/01 Id

Facility Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

31 Malcolm Road

City *

Guelph

Province/Territory **

Ontario

Postal Code: **

N1K 1A9

Physical Address

Address Line 1

31 Malcolm Road

City

Guelph

Province/Territory **

Ontario

Postal Code **

N1K 1A9

Additional Information

Land Survey Description

National Topographical Description

NPRI Facility Location

Latitude (decimal degrees) *

43.53838

Longitude (decimal degrees) *

-80.32057

UTM Zone

17

UTM Easting

554893

UTM Northing

4820828

Contact Validation

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Contacts

Public Contact

First Name: *

John

Last Name: *

Alac

Position: *

General Manager

Telephone: *

5197672899

Ext

Fax

Email: *

john.alac@alcotplastics.com

Highest Ranking Employee

First Name: *

John

Last Name: *

Alac

Position: *

General Manager

Telephone: *

5197672899

Ext

Fax

Email: *

john.alac@alcotplastics.com

Person responsible for the Toxic Substance Reduction Plan preparation

First Name: *

Michael

Last Name: *

Laplante

Position: *

Senior Project Engineer

Telephone: *

4164675555

Ext

231

Fax

4164679824

Email: *

mlaplante@altech-group.com

Employees

Employees

Number of Full-time Employees: *

15

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

Id: 18009, Name: Michael Laplante

Website address where the Plan Summary is posted for the public

alcotplastics.com

File Name *

6214 Alcot Plan Sig page.pdf

Date *

07/08/2018 11:21:08 AM

Plan Summary Submission

Electronic Submission

Company Name

Alcot Plastics Ltd.

Facility Name

Alcot Plastics Ltd. - Guelph

Report Submitted By (authorized delegate)

Michael Laplante



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

NA - 24, Butane (all isomers)

NA - 24, Butane (all isomers)

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: **

Alcot intends to investigate methods to reduce the unit amount of butane used to produce foam consistent with product quality.

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: **

Substance is not created at the facility.

Objectives, Targets and Description

Objectives

Objectives in plan: *

This Toxic Reduction Plan will guide Alcot in investigating methods to reduce the unit amount of butane used to produce foam in the production process. As this compound is presently a key component of the production process, its elimination is not a viable option. Alcot intends on increasing product yields and minimizing by-product scrap from their production operations, where practical.

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	

What is the targeted timeframe for this reduction? *

No timeline target	years
<input checked="" type="checkbox"/>	or

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	

What is the targeted timeframe for this reduction? *

No timeline target	years
<input checked="" type="checkbox"/>	or

Description of Target

Reasons for Use

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

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

Reasons for Creation

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

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

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?: *

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 select the appropriate reason(s) in the picklist below for why no option was implemented for this substance at your facility. You may choose to provide an explanation in the text box that is beneath the picklist.

Materials or feedstock substitution

Empty

Product design or reformulation

Empty

Equipment or process modifications

Empty

Spill or leak prevention

Empty

On-site reuse, recycling or recovery

Empty

Improved inventory management or purchasing techniques

Empty

Good operator practice or training

Training related to toxics substance reduction

Which activities will be undertaken to implement these reduction options?

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

Training related to toxics substance reduction

Describe the option: *

Provide routine Best Operating Practice and Pollution Prevention training / updates for employees

Estimates

N/A	tonnes	%
<input type="checkbox"/>	1.3	5
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>		

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:



Identify at least one reason why no option to reduce the use or creation of this substance was implemented at your facility:

Select the applicable reason or reasons **

Explanation of the reasons why no option will be implemented

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): *

Name of the toxic substance reduction planner who made recommendations in the toxic substance reduction plan for this substance (First Name Last Name)

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

Name of the toxic substance reduction planner who has certified the toxic substance reduction plan for this substance (First Name Last Name)

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

Version: 3.14.0



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