

Plan Summary Preview

Company Details

Company Legal Name:

Warren Industries Ltd.

Company Address:

401 Spinnaker Way, Concord (Ontario)

Report Details

Facility:

Warren Industries Ltd. 220 Spinnaker Way

Facility Address:

220 Spinnaker Way, Concord (Ontario)

Update Comments:

Activities

Select the Facility Contacts

Contacts

Public Contact:*

Danny Garcia

Highest Ranking Employee:

Vince Aldorasi

Person responsible for Toxic Substance Reduction Plan preparation:

Danny Garcia

Organization Validation

Company and Parent Company Information

Company Details

Company Legal Name:*

Warren Industries Ltd.

Company Trade Name:*

Warren Industries Ltd.

Business Number:*

Mailing Address

Delivery Mode:

PO Box or 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

Facility Validation

Facility Information

Facility:*

NAICS Id.*

NPRI Id.*

ON Reg 127/01 Id:

Mailing Address

Delivery Mode:

PO Box or Rural Route Number:

Address Line 1:

City:

Province/Territory:

Postal Code:

Physical Address

Address Line 1:

City:

Province/Territory:

Postal Code:

UTM Zone:

UTM Easting:

UTM Northing:

Latitude:

Longitude:

Additional Information:

Land Survey Description:

National Topographical Description:

Contact Validation

Contacts

Public Contact:

First Name:*

Last Name:*

Position:*

Telephone:* 9056691260
Ext: 303
Fax: 9056691707
Email:* dgarcia@warren-grp.com

Mailing Address

Delivery Mode: General Delivery
PO Box or Rural Route Number:
Address Line 1: 401 Spinnaker Way
City: Concord
Province/Territory: Ontario
Postal Code: L4K4N4

Highest Ranking Employee:

First Name:* Vince
Last Name:* Aldorasi
Position:* VP Operations
Telephone:* 9056691260
Ext:
Fax: 9056691707
Email:* valdorasi@warren-grp.com

Mailing Address

Delivery Mode: General Delivery
PO Box or Rural Route Number:
Address Line 1: 401 Spinnaker Way
City: Concord

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 or Rural Route Number:

Address Line 1:

City:

Province/Territory:

Postal Code:

Employees

Employees

Number of Full-time Employees:*

Substances

NA - 09, Manganese (and its compounds)

NA - 09, Manganese (and its compounds)

Substances Section Data

Statement of Intent

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?:*

No

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:**

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

there are no technically feasible options to reduce the usage of manganese

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:**

The facility does not create manganese

Objectives, Targets and Description

Objectives

Objectives in plan:*

none

Use Targets

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

	Quantity	Unit
<input checked="" type="checkbox"/>	No quantity target	or
	<input type="text"/>	<input type="text"/>

What is the targeted timeframe for this reduction?*

No timeline target or years

Description of targets:

Creation Targets

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

	Quantity	Unit
<input checked="" type="checkbox"/> No quantity target	or <input type="text"/>	<input type="text"/>

What is the targeted timeframe for this reduction?*

No timeline target or years

Description of targets:

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 provide an explanation below why your facility is not implementing an option.

Explanation of the reasons why no option will be implemented:**

There are no technically feasible options available

Materials or feedstock substitution

Product design or reformulation

Equipment or process modifications

Spill or leak prevention

On-site reuse, recycling or recovery

Improved inventory management or purchasing techniques

Good operator practice or training

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):*

TSRP0092

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

TSRP0092

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

New Plan

NA - 04, Chromium (and its compounds)

NA - 04, Chromium (and its compounds)

Substances Section Data

Statement of Intent

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?:*

No

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:**

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

There are no technically feasible options identified

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:**

Chromium is not created in the facility

Objectives, Targets and Description

Objectives

Objectives in plan:*

none

Use Targets

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

		Quantity	Unit
<input checked="" type="checkbox"/>	No quantity target	or	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 100px; height: 20px;"></div> <div style="border: 1px solid black; width: 100px; height: 20px;"></div> </div>

What is the targeted timeframe for this reduction?*

<input checked="" type="checkbox"/>	No timeline target	or	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>	years
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Description of targets:

Creation Targets

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

		Quantity	Unit
<input checked="" type="checkbox"/>	No quantity target	or	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 100px; height: 20px;"></div> <div style="border: 1px solid black; width: 100px; height: 20px;"></div> </div>

What is the targeted timeframe for this reduction?*

No timeline target or years

Description of targets:

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 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

Product design or reformulation

Equipment or process modifications

Spill or leak prevention

On-site reuse, recycling or recovery

Improved inventory management or purchasing techniques

Good operator practice or training

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?:*

NA - 11, Nickel (and its compounds)

NA - 11, Nickel (and its compounds)

Substances Section Data

Statement of Intent

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?:*

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:**

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?:*

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:**

Nickel is not created in the facility

Objectives, Targets and Description

Objectives

Objectives in plan:*

none

Use Targets

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

	Quantity	Unit		
<input checked="" type="checkbox"/>	No quantity target	or	<input type="text"/>	<input type="text"/>

What is the targeted timeframe for this reduction?*

No timeline target or years

Description of targets:

Creation Targets

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

	Quantity	Unit		
<input checked="" type="checkbox"/>	No quantity target	or	<input type="text"/>	<input type="text"/>

What is the targeted timeframe for this reduction?*

No timeline target or years

Description of targets:

Reasons for Use

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

As a formulation component

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

Nickel is an essential element in the steel used

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:**

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?:*

Yes

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:**

No technically feasible options were identified

Materials or feedstock substitution

Product design or reformulation

Equipment or process modifications

Spill or leak prevention

On-site reuse, recycling or recovery

Improved inventory management or purchasing techniques

Good operator practice or training

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):*

TSRP0092

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

TSRP0092

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

New Plan