2014 Reporting Year Annual Toxic Reduction Public Report

Reporting Under Toxics Reduction Act, 2009 and O. Reg. 455/09



lectrical Contacts Limited

Introduction

Electrical Contacts, Limited is a manufacturer of discrete electrical contacts, contact assemblies, and tape and button contacts. At our facility, ammonia is used as a manufacturing aid to create a reducing atmosphere in furnaces used for part production. In order to manage the impacts of ammonia, Electrical Contacts, Limited has developed a Toxic Reduction Plan as required by Ontario's Toxics Reduction Act and regulation O.Reg 455/09.

This annual toxic reduction substance accounting report has been prepared to meet the regulatory obligations specified in section 10 of the *Act*. This document summarizes the relevant reporting requirements and shall be updated as required by the *Act*, and O.Reg 455/09. This Public Report covers the year 2014. There have been no changes to the plan summary — it is accurate and up to date as of Dec. 31, 2014.

Substance and Facility Information

TOXIC SUBSTANCES REQUIRING A PLAN				
SUBSTANCE NAME	Ammonia			
OTHER SUBSTANCES FOR WHICH A TOXIC	N/A			
REDUCTION PLAN HAS BEEN PREPARED				
CHEMICAL ABSTRACTS SERVICE REGISTRY	(RN 7664-41-7)			
NUMBER				
FACILITY	NFORMATION			
LEGAL COMPANY NAME	Electrical Contacts, Ltd.			
FACILITY NAME	Electrical Contacts, Ltd.			
FACILITY ADDRESS	519 22 nd Avenue, Hanover, Ontario N4N 3T6			
PHONE	519-364-1878			
FAX	519-364-4626			
WEB SITE ADDRESS	www.e-c-l.com			
UTM COORDINATES, X AND Y DATUM	X 44.1581 Y 81.003			
NUMBER OF FULL TIME EMPLOYEES	130			
NPRI ID#	000004560			
PRIMARY NORTH-AMERICAN INDUSTRIAL CLASSIFICATION SYSTEM CODE (NAICS)				
2 DIGIT NAICS CODE	33			
4 DIGIT NAICS CODE	3399			
6 DIGIT NAICS CODE	339990			
PUBLICICONTACT				
NAME & TITLE	Zach Berthelot, Plant Manager			
PHONE	519-364-1878			

On a facility-wide basis:

Amount that entered the facility as the substance itself or as a constituent of another substance:

The amount of substance that was created:

The amount of substance that was contained in product:

Tonne	Units
133	
0	
0	

On-site releases from the facility to air, water and land, as well as on and off-site disposal and off-site recycling can be viewed by searching for this facility at: http://www.ec.gc.ca/inrp-npri/default.asp?lang=en

Facility-Wide Accounting Information

FORM OF INVOLVEMENT	
ENTERS THE FACILITY (USE)	133,000 Kg
CREATED AT THE FACILITY	0Kg
RELEASED (AIR) FROM FACILITY	ОК
RELEASED (LAND) FROM FACILITY	0Kg
RELEASED (WATER) FROM FACILITY	0Kg
DISPOSED OF BY FACILITY	0Kg
TRANSFERRED FROM FACILITY	0Kg
CONTAINED IN PRODUCT THAT LEAVES FACILITY	OKg

Toxic Reduction Objectives and Targets

In using ammonia as a manufacturing aid within our facility we are committed to continuing to research and monitor advancements to implement options that are both technologically and economically feasible to reduce ammonia usage.

While we are and remain committed to this reduction, no technical and economically feasible options have been identified at this time.

ECL has reviewed its plan. Increases in use occurred due to increases in manufacturing volume. At this time, no economically feasible option has been identified.

As of May 23, 2015, I certify that I have read the [report(s)] on the toxic substance reduction [plan(s)] for Ammonia (Anhydrous) and am familiar with its contents and to my knowledge the information contained in the report(s) is factual accurate and the report complies with the Toxics Reduction Act, 2009 and Ontario Regulation 455/09 (General) made under the Act.

The original version of this report is signed off by:	
Highest Ranking Employee:	Peter Allen
Title:	President

519-364-1878

Phone Number:

Report Submission and Electronic Certification NPRI - Electronic Statement of Certification Specify the language of correspondence English Comments (optional) I hereby certify that I have exercised due diligence to ensure that the submitted information is true and complete. The amounts and values for the facility(ies) identified below are accurate, based on reasonable estimates using available data. The data for the facility(ies) that I represent are hereby submitted to the programs identified below using the Single Window Reporting Application. I also acknowledge that the data will be made public. Note: Only the person identified as the Certifying Official or the authorized delegate should submit the report(s) identified below. Company Name Electrical Contacts Ltd. Certifying Official (or authorized delegate) Peter Allen Report Submitted by Zach Berthelot I, the Certifying Official or authorized delegate, agree with the statements above and acknowledge that by pressing the "Submit Report(s)" button, I am electronically certifying and submitting the facility report(s) for the identified company to its affiliated programs. ON MOE TRA - Electronic Certification Statement **Annual Report Certification Statement** TRA Substance List **CAS RN** Substance Name NA - 16 Ammonia (total) Company Name

Highest Ranking Employee

Electrical Contacts Ltd.

Mt

Peter Allen	7
Report Submitted by	
Zach Berthelot	

I, the highest ranking employee, agree with the certification statement(s) above and acknowledge that by checking the box I am electronically signing the statement(s). I also acknowledge that by pressing the 'Submit Report(s)' button I am submitting the facility record(s)/report(s) for the identified facility to the Director under the Toxics Reduction Act, 2009. I also acknowledge that the Toxics Reduction Act, 2009 and Ontario Regulation 455/09 provide the authority to the Director under the Act to make certain information as specified in subsection 27(5) of Ontario Regulation 455/09 available to the public.

Submitted Report

Period	Submission Date	Facility Name	Province	City	Programs
2014	12/05/2015	ECL	Ontario	Hanover	NPRI,ON MOE TRA

Note: If there is a change in the contact information for the facility, a change in the owner or operator of the facility, if operations at the facility are terminated, or if information submitted for any previous year was mistaken or inaccurate, please update this information through SWIM or by contacting the National Pollutant Release Inventory directly.

:55:82 PM

Canada.gc.ca (http://www.canada.gc.ca/home.html)

Services (http://www.servicecanada.gc.ca/eng/home.shtml)

Departments (http://www.canada.gc.ca/aboutgov-ausujetgouv/depts/menu-eng.html)

Single Window (/)

Home (https://ec.ss.ec.gc.ca/auth/en/Services) Submission Management -My Profile:Zach Berthelot Logout (/V003/Logout_Deconnexion) Ec.gc.ca (http://ec.gc.ca/default.asp?lang=En&n=FD9B0E51-1)

SWIM (https://ec.ss.ec.gc.ca/auth/en/Services) 2014 (/) Electrical Contacts Ltd. (/) ECL (/) Report Preview

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

Report Preview

Company Details

Name

Electrical Contacts Ltd.

Address

519 22nd Avenue, Hanover (Ontario)

Report Details

Report Status

Submitted

2014

Report Type

Inventory

Facility Name

ECL

Facility Address

519 22nd Avenue, Hanover (Ontario)

Report Preview	- Single Window Page 2 of
Update Con	ments
Activity E	etails
Applicab	e Programs
Please se	ect all that apply.
Environ	nent Canada Programs
☑ NPRI	National Pollutant Release Inventory
Partneri	g Programs
☑ ON M	E TRA - Ontario Ministry of the Environment for the Toxic Reductions Act
	E Reg. 127/01 - Ontario Ministry of the Environment for the Airborne Contaminant ge Monitoring and Reporting Regulation
□ NERM survey	Chemistry Industry Association of Canada for the National Emission Reduction Masterplan
☐ NFPRE	R - National Framework for Petroleum Refinery Emission Reductions
Contacts	
	appropriate person from the drop-down menu for each contact.
Facility (ontacts
-	ne appropriate person from the drop-down menu for each contact.
	al Contact: *
(erthelot
Certify	g Official (or authorized delegate): *
Peter	
Highes	Ranking Employee: *
(Allen

Zacn B	erthelot
Compan	y Coordinator (optional)
(erthelot
Public Co	ontact (optional)
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	erthelot
Contract	or Contact (optional)
If you ar	e an independent contractor or consultant, please enter your company name in the fi
ployee	s and Activities
nployee	es
Number	of Employees *
(
130	
<u> </u>	
ctivities	
ctivities If your for otherwis	acility was engaged in any of the following activities, check the relevant box(es), e click "None of the Above". For the second "Activities" list, if you select one of these then you must report dioxins, furans and hexachlorobenzene.
ctivities If your factorities activities	e click "None of the Above". For the second "Activities" list, if you select one of these then you must report dioxins, furans and hexachlorobenzene. It is for Which the 20,000-Hour Employee Threshold Does Not Apply: (check all
ctivities If your footherwise activities Activities	e click "None of the Above". For the second "Activities" list, if you select one of these then you must report dioxins, furans and hexachlorobenzene. It is for Which the 20,000-Hour Employee Threshold Does Not Apply: (check all
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ctivities If your far otherwis activities Activities None o Activities None o ctivities	e click "None of the Above". For the second "Activities" list, if you select one of these then you must report dioxins, furans and hexachlorobenzene. es for Which the 20,000-Hour Employee Threshold Does Not Apply: (check all ply) * f the above es Relevant to Reporting Dioxins, Furans and Hexacholorobenzene: (check all ply) * f the above Relevant to Reporting of Polycyclic Aromatic Hydrocarbons (PAHs)

General Facility Information

NPRI

his the first time the facility is reporting to the NPRI (under current or past ownership)? *			
0			
Is the facility controlled by another Canadian company or companies? * No			
Did the facility report under other environmental regulations or permits? * No Is the facility required to report one or more NPRI Part 4 substances (Criteria Air Contaminants)? * No			
erating Schedule - Days of the Week **			
Mon Tue Wed Thu Fri Sat Sun			
erating Schedule - Hours **			
sual Number of perating Hours per day sual Daily Start Time 24h) (hh:mm)			
o report a shutdown period, click the "+" sign to the right side of the screen. Empty			

	1 Comments for Facility
Comm	ents
erify Fa	acility Information
Compa	ny Information
Comp	pany Details
Con	npany Legal Name
Ele	ectrical Contacts Ltd.
Bus	iness Number
10	01601532
\	
Mailin	ng Address
(very Mode
Ge	eneral Delivery
PO I	3ox
Rura	al Route Number
Add	ress Line 1
51	9 22nd Avenue
City	*
	nover
Prov	rince/Territory **
	itario
Post	ral Code: **
(N3T6
(
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Ca	
acility	Information
Facility	, *
ECL	

NAICS Code *
339990
VPRI ID *
4560 (Assigned by Environment Canada)
English Physical Address
Facility Physical Address
Address Line 1 519 22nd Avenue
City Hanover
Province/Territory
Ontario
Postal Code
N4N3T6
Country
Canada
Additional Information
Land Survey Description
National Topographical Description
Geographical Address
Latitude ** 44.15810
Longitude ** -81.00990
UTM Zone **
17
UTM Easting **
499760
UTM Northing **
4889432

Facility Contacts

Contact Types

uo() y p o o	
chnical Contact	
First Name: *	
Zach	
_ast Name: *	
Berthelot	
Position: *	
Plant Manager	
Telephone: *	
5193641878	
Ext	
ax	
5193644626	
Email: *	
Zach.Berthelot@e-c-l.com	
Mailing Address	
Delivery Mode	
General Delivery	
PO Box	
Rural Route Number	
Address Line 1	
519 22nd Avenue	
City *	
Hanover	
Province/Territory **	
Ontario	

Postal Code: **

N4N3T6
Country *
Canada
7ie /: Occ-:-1
Certifying Official
First Name: * Peter
Last Name: *
Allen
Position: *
President
Telephone: *
5193641878
Ext
228
Fax
5193644626
Email: *
peter.allen@e-c-l.com
Mailing Address
Delivery Mode
General Delivery
РО Вох
Rural Route Number
Address Line 1
519 22nd Avenue
City *
Hanover
Province/Territory **
Ontario

Postal Code: **	
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mpany Coordinator	
irst Name: * Zach	Achieved to a sharing A Transfer Color And As As As As Color As As As As Color And As
.ast Name: *	
Berthelot	
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Position: * Plant Manager	
elephone: *	
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xt	
ax	
5193644626	
mail: *	
Zach.Berthelot@e-c-l.com	
Mailing Address	
Delivery Mode	
General Delivery	
PO Box	
Rural Route Number	
Address Line 1	
519 22nd Avenue	
City *	
Hanover	
Province/Territory **	
Ontario	

Postal Code: **	
N4N3T6	
Country *	
Canada	
Highest Rand ing Employee	
First Name: *	
Peter	
Last Name: *	
Allen	
Position: *	A department of the contract o
President	
Telephone: *	
5193641878	
Ext	
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Fax	
5193644626	
Email: *	
peter.allen@e-c-l.com	
Mailing Address	
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Address Line 1	
519 22nd Avenue	
City *	
Hanover	
Province/Territory **	
Ontario	

Postal Code: **	
N4N3T6	
Country *	
Canada	
_	
erson who prepared	the report
First Name: *	
Zach	
Last Name: *	
Berthelot	
Position: *	
Plant Manager	
Telephone: *	
5193641878	
Ext	
Fax 5193644626	
The second and the second and the second sec	
Email: *	
Zach.Berthelot@e-c-l	com
Mailing Address	
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Address Line 1	
519 22nd Avenue	
City *	
Hanover	
Province/Territory **	*
Ontario	

Postal Code: **	
N4N3T6	
Country *	
Canada	
rson who coordinated th First Name: * Zach	ne preparation of the Toxics Reduction Plan
ast Name: * Berthelot	
Position: * Plant Manager	
Telephone: * 5193641878	
3193041878	
Ext	
ax	
5193644626	
mail: *	
Zach.Berthelot@e-c-l.com	
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Delivery Mode	
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A delica and United 4	
Address Line 1 519 22nd Avenue	
City * Hanover	
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Province/Territory **	
Ontario	

Postal Code: **	
N4N3T6	
Country *	
Canada	
Public Contact	
First Name: *	
Zach	
Last Name: *	*****
Berthelot	
Position: *	
Plant Manager	
Telephone: *	
5193641878	
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	and the second
Fax	
5193644626	
Email: *	
Zach.Berthelot@e-c-l.com	
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PO Box	re reservate.
Rural Route Number	
Address Line 1	
519 22nd Avenue	
City *	
Hanover	
Province/Territory **	
Ontario	

Postal Code: **	
N4N3T6	
Country *	
Canada	
Pollution Prevention	
Pollution Prevention Plans	
Does the facility have a documented pollution prevention plan? *	
No	
If 'Yes'	
a) Please check all that apply	
b) Did the facility update their plan in the current reporting year?	
c) Does the plan address substances, energy conservation, or water conservation?	
Please summarize your pollution prevention plan and/or your pollution prevention activities (this information will be publicly available) **	
Pollution Prevention Activities	
Did the facility complete any pollution prevention activities in the current NPRI reporting year? *	
No	
Selecting "Yes" will initiate the reporting of the specific pollution prevention activities that were completed in the current reporting year on the following screen.	
Substance Details	
NA - 16, Ammonia (total)	
NA - 16, Ammonia (total)	
Substance Reporting Status	
Applicable Programs	
NPRI - Does this substance meet the criteria specified in the Canada Gazette notice?	
Selecting "No" indicates voluntary reporting of this substance to the NPRI. *	

Yes
ON MOE TRA - Does this substance meet the criteria specified in the Ontario Regulation 455/09 under the TRA? Selecting "No" indicates voluntary reporting of this substance to the ON MOE. *
Yes
Is this considered the first report for this substance to the ON MOE TRA? (Please select "He for further clarification) \ast
No
Would you like to create an exit record for this ON MOE TRA substance? *
No
Comments
Releases and Transfers of the Substance Releases and Transfers of the Substance Was the substance released on-site? *
No
If the substance was released on-site and the total quantity released was less than one tonne, select the check-box below
The substance will be reported as the sum of releases to all media (total of 1 tonne or less).
Disposals and Off-site Transfers for Recycling
Was the substance disposed of (on-site or off-site), or transferred for treatment prior to final disposal? *
No
Is the facility required to report on disposals of tailings and waste rock for the selected reporting period? *
No
Was the substance transferred off-site for recycling? *
No

Nature of Activities *

Ма	nufacture the Substance
Pro	ocess the Substance
[nerwise Use of the Substance
A	s a manufacturing aid
A Q	uantifications
nte	s the facility (Use), Creation, Contained in Product for ON MOE TRA
En	ters the facility (Use)
	The amount of substance that enters a process as the substance itself or part of anothe substance, rolled up at the facility level.
Ç	Quantity (Tonnes) **
	Quantity (Tonnes) ** 133.864
	133.864
	133.864 Oo you want to use ranges for public reporting? If "No" is selected you are indicating the ny report to the public may contain the exact quantity provided. *
Ea	133.864 Oo you want to use ranges for public reporting? If "No" is selected you are indicating the ny report to the public may contain the exact quantity provided. *
Cre	133.864 Do you want to use ranges for public reporting? If "No" is selected you are indicating the my report to the public may contain the exact quantity provided. * No
Cre	133.864 To you want to use ranges for public reporting? If "No" is selected you are indicating the export to the public may contain the exact quantity provided. * No Pation
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Cre	20 you want to use ranges for public reporting? If "No" is selected you are indicating the my report to the public may contain the exact quantity provided. * No Pation the amount of substance that is created quantity (Tonnes) ** 0 Or you want to use ranges for public reporting? If "No" is selected you are indicating the my report to the public may contain the exact quantity provided. *