

Report Preview

Company Details

Name

Transcontinental Inc

Address

1 Place Ville Marie, Suite 3315 Place Northeast, Montreal (Quebec)

Report Details

Report Status

Submitted

2014

Report Type

Inventory

Facility Name

RBW Graphics

Facility Address

2049 20th Avenue East, Owen Sound (Ontario)

Update Comments

Activity Details

Applicable Programs

Please select all that apply.

Environment Canada Programs

NPRI - National Pollutant Release Inventory

Partnering Programs

ON MOE TRA - Ontario Ministry of the Environment for the Toxic Reductions Act

ON MOE Reg. 127/01 - Ontario Ministry of the Environment for the Airborne Contaminant Discharge Monitoring and Reporting Regulation

- NERM - Chemistry Industry Association of Canada for the National Emission Reduction Masterplan survey
- NFPRER - National Framework for Petroleum Refinery Emission Reductions

Contacts

Select the appropriate person from the drop-down menu for each contact.

Facility Contacts

Select the appropriate person from the drop-down menu for each contact.

Technical Contact: *

Charles David Mathieu-Poulin

Certifying Official (or authorized delegate): *

Derek Smith

Highest Ranking Employee: *

Derek Smith

Person who prepared the report: *

Charles David Mathieu-Poulin

Person who coordinated the preparation of the Toxics Reduction Plan (required after a plan summary has been submitted)

Wendy Nadan

Company Coordinator (optional)

Charles David Mathieu-Poulin

Public Contact (optional)

Contractor Contact (optional)

If you are an independent contractor or consultant, please enter your company name in the field below

Employees and Activities

Employees

Number of Employees *

516

Activities

If your facility was engaged in any of the following activities, check the relevant box(es), otherwise click "None of the Above". For the second "Activities" list, if you select one of these activities then you must report dioxins, furans and hexachlorobenzene.

Activities for Which the 20,000-Hour Employee Threshold Does Not Apply: (check all that apply) *

None of the above

Activities Relevant to Reporting Dioxins, Furans and Hexachlorobenzene: (check all that apply) *

None of the above

Activities Relevant to Reporting of Polycyclic Aromatic Hydrocarbons (PAHs)

Did the following activity take place at the facility?

Wood preservation using creosote: *

No

General Facility Information

NPRI

Is this the first time the facility is reporting to the NPRI (under current or past ownership)? *

No

Is the facility controlled by another Canadian company or companies? *

Yes

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)? *

Yes

If 'Yes' to reporting for one or more Part 4 substances: Was the facility shut down for more than one week during the year? **

No

Operating Schedule - Days of the Week **

Mon	Tue	Wed	Thu	Fri	Sat	Sun
<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"/>

Operating Schedule - Hours **

Usual Number of Operating Hours per day

Usual Daily Start Time (24h) (hh:mm)

24	07:00
----	-------

Shutdown Periods **

To report a shutdown period, click the "+" sign to the right side of the screen.

Empty

General Comments for Facility

Comments

Verify Facility Information

Company Information

Company Details

Company Legal Name

Business Number

Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

City *

Province/Territory **

Postal Code: **

Country *

Parent Companies

Transcontinental Inc.

Parent Company Name

Business Number

DUNS Number

Percentage owned

Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

City *

Province/Territory **

Postal Code: **

Country *

Transcontinental Printing 2005 G.P.

Parent Company Name

Business Number

DUNS Number

Percentage owned

Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

City *

Province/Territory **

Postal Code: **

Country *

Facility Information

Facility *

NAICS Code *

NPRI ID *

Facility Physical Address

Address Line 1

City

Province/Territory

Postal Code

Country

Additional Information

Land Survey Description

National Topographical Description

Geographical Address

Latitude **

Longitude **

UTM Zone **

UTM Easting **

UTM Northing **

Facility Contacts

Contact Types

Technical Contact

First Name: *	<input type="text" value="Charles David"/>
Last Name: *	<input type="text" value="Mathieu-Poulin"/>
Position: *	<input type="text" value="Coordonnateur corporatif en environnement"/>
Telephone: *	<input type="text" value="5142980586"/>
Ext	<input type="text"/>
Fax	<input type="text"/>
Email: *	<input type="text" value="charlesdavid.mathieu-poulin@tc.tc"/>

Mailing Address

Delivery Mode	<input type="text"/>
PO Box	<input type="text"/>
Rural Route Number	<input type="text"/>
Address Line 1	<input type="text" value="400 Sainte-Croix Avenue"/>
City *	<input type="text" value="Saint-Laurent"/>
Province/Territory **	<input type="text" value="Quebec"/>
Postal Code: **	<input type="text" value="H4N 3L4"/>
Country *	<input type="text" value="Canada"/>

Certifying Official

First Name: *	<input type="text" value="Derek"/>
Last Name: *	<input type="text" value="Smith"/>
Position: *	<input type="text" value="General Manager"/>
Telephone: *	<input type="text" value="5193715171"/>
Ext	<input type="text"/>

Fax

Email: *

Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

City *

Province/Territory **

Postal Code: **

Country *

Company Coordinator

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: **

Country *

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: **

Country *

Person who prepared the report

First Name: *	<input type="text" value="Charles David"/>
Last Name: *	<input type="text" value="Mathieu-Poulin"/>
Position: *	<input type="text" value="Coordonnateur corporatif en environnement"/>
Telephone: *	<input type="text" value="5142980586"/>
Ext	<input type="text"/>
Fax	<input type="text"/>
Email: *	<input type="text" value="charlesdavid.mathieu-poulin@tc.tc"/>

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Province/Territory **	<input type="text" value="Quebec"/>
Postal Code: **	<input type="text" value="H4N 3L4"/>
Country *	<input type="text" value="Canada"/>

Person who coordinated the preparation of the Toxics Reduction Plan

First Name: *	<input type="text" value="Wendy"/>
Last Name: *	<input type="text" value="Nadan"/>
Position: *	<input type="text" value="Principal"/>
Telephone: *	<input type="text" value="5199404724"/>
Ext	<input type="text"/>

Fax

Email: *

Mailing Address

Delivery Mode

PO Box

Rural Route Number

Address Line 1

City *

Province/Territory **

Postal Code: **

Country *

Pollution Prevention

Pollution Prevention Plans

Does the facility have a documented pollution prevention plan? *

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 - M16, Volatile Organic Compounds (VOCs)

NA - M16, Volatile Organic Compounds (VOCs)

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 "Help" for further clarification) *

No

Would you like to create VOC exit record(s) for this ON MOE TRA substance? *

No

Comments

General Information about the Substance

Releases and Transfers of the Substance

Releases and Transfers of the Substance

Select the check box if 1 tonne or more of a Part 5 Substance (Speciated VOC) was released to air

TRA Quantifications

Enters the facility (Use), Creation, Contained in Product for ON MOE TRA

Enters the facility (Use)

The amount of substance that enters a process as the substance itself or part of another substance, rolled up at the facility level.

Quantity (Tonnes) **

603.62

Volatile Organic Compound (VOC) Breakdown

Details

Enter breakdown values for

Enters the facility (Use)

Total Speciated VOCs

37.33

VOC Substance list *

CAS Number	Substance Name	Quantity (tonnes)
64742-47-8	Hydrotreated light distillate	37.33

Total VOCs Reported

603.62

Total Speciated VOCs

37.33

Do you want to use ranges for public reporting? If "No" is selected you are indicating that any report to the public may contain the exact quantity provided. *

Yes

Creation

The amount of substance that is created

Quantity (Tonnes) **

0

Volatile Organic Compound (VOC) Breakdown

Details

Enter breakdown values for

Creation

Total Speciated VOCs

0

VOC Substance list *

CAS Number	Substance Name	Quantity (tonnes)
64742-47-8	Hydrotreated light distillate	0

Total VOCs Reported

0

Total Speciated VOCs

0

Do you want to use ranges for public reporting? If "No" is selected you are indicating that any report to the public may contain the exact quantity provided. *

No

Change in Method of Quantification

There has been a change in the method or combination of methods used to track and quantify the substance during the previous calendar year

Describe the changes **

Select the reason for change: **

Describe how the change impact tracking and quantification of the substance **

Incidents out of the normal course of events

There have been incidents out of the normal course of events that occurred at the facility during the previous calendar year that affected the results of tracking/quantification of this substance.

Explain how tracking and quantifications were affected **

Significant Process Change

There has been a significant process change at the facility during the previous calendar year.

On-site Releases

Click "Edit" to enter your reportable values. In order to calculate totals, you must click the "Validate" button.

Enter the values for releases to air for the substance

Releases to Air

Category	Basis Of Estimate	Quantity (Tonnes)
Stack or Point Releases	C - Mass Balance	13.32
Storage or Handling Releases	NA - Not Applicable	
Fugitive Releases	C - Mass Balance	23.66
Spills	NA - Not Applicable	
Other Non-point Releases	NA - Not Applicable	

Total - Releases to Air

36.98

Volatile Organic Compound (VOC) Breakdown

Enter the quantity (Tonnes) of volatile organic compounds (VOCs) in the column below, then click "Save and Return". If there are no values for certain VOC species, you may leave those quantity fields blank.

Volatile Organic Compound (VOC) Breakdown

Details

Enter breakdown values for

Other Sources - Speciated VOCs

Quantity (Tonnes)

36.98

Total VOCs Reported

36.98

Total Speciated VOCs

11.17

VOC Substance list *

CAS Number	Substance Name	Quantity (tonnes)
64742-47-8	Hydrotreated light distillate	11.17

Total VOCs Reported

36.98

Total Speciated VOCs

11.17

Enter the values for releases to air for Part 5 VOCs

Releases from Other Sources - Speciated VOCs

Click "Edit" to enter release values for speciated VOCs that are from all other categories above including stacks Edit" beside "Stack or Point Releases" in the table above.

Category	Basis Of Estimate	Quantity (Tonnes)
Other Sources - Speciated VOCs	NA - Not Applicable	36.98

Breakdown of Annual Releases

Distribute Equally

Monthly Releases

January %	February %	March %	April %
8.33	8.33	8.34	8.33
May %	June %	July %	August %
8.33	8.34	8.33	8.33
September %	October %	November %	December %
8.34	8.33	8.33	8.34
Total %			
100.00			

Reasons for Changes in Quantities Released from Previous Year

Select the applicable reason or reasons *

Changes in production levels, Other (specify in On-site Releases comment field)

Comments ? (On-Site Releases) **

Changes in ink supplier.

Comparison Report: Enters, Creation, Contained in Product

Ensure that "Last Reported Quantity" and the "Reporting Period of the last reported quantity" reflect current year's reporting to the last year's values. If you selected the pre-population function, the exact values in your previous year's report will be inserted into the current year's template, including the comparison report. Therefore, you will be required to update all values and texts.

Enters the facility (Use)

Breakdown Substances

CAS RN: 64742-47-8, Substance Name: Hydrotreated light distillate

Substance Name

Hydrotreated light distillate

Quantity (Tonnes)

37.33

Last Reported Quantity (Tonnes) *

20.99

Reporting Period of Last Reported Quantity *

2013

Change

16.34

% Change

77.85

Creation

Breakdown Substances

CAS RN: 64742-47-8, Substance Name: Hydrotreated light distillate

Substance Name

Hydrotreated light distillate

Quantity (Tonnes)

0

Last Reported Quantity (Tonnes) *

0

Reporting Period of Last Reported Quantity *

2013

Change

0

% Change

Reasons for Change

Reasons for Change

Reason(s) for Change

Increase in production levels, Other

(please specify)

Change of ink supplier

(please specify): Change of ink supplier

Comparison Report: On-site Releases

Ensure that "Last Reported Quantity" and the "Reporting Period of the last reported quantity" reflect current year's reporting to the last year's values. If you selected the pre-population function, the exact values in your previous year's report will be inserted into the current year's template, including the comparison report. Therefore, you will be required to update all values and texts.

Total Releases to Air

Breakdown Substances

CAS RN: 64742-47-8, Substance Name: Hydrotreated light distillate

Substance Name

Hydrotreated light distillate

Quantity (Tonnes)

11.17

Last Reported Quantity (Tonnes) *

9.24

Reporting Period of Last Reported Quantity *

2013

Change

1.93

% Change

20.89

Reasons for Change

Reasons for Change

Reason(s) for Change

Increase in production levels, Other

(please specify)

Change in ink supplier

(please specify): Change in ink supplier

Post Plan Substance Details

64742-47-8, Hydrotreated light distillate

64742-47-8, Hydrotreated light distillate

Objectives, Description and Targets

This information is read-only and is pulled directly from your most recent submitted Plan Summary. To make changes to the information on this screen, please update your plan summary and re-submit. For more details about updating the plan summary, please select "Help".

Objectives

Objectives in plan: *

Transcontinental Printing has prepared this toxic substance reduction plan for VOCs to investigate options to reduce the usage of VOCs while supplying customers with products that meet their needs. Employees will continue to be trained to use the minimum quantity of solvent necessary for cleaning and to keep all containers closed.

Use Targets

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

No quantity target

Quantity

Unit

or

What is the targeted timeframe for this reduction? *

No timeline target

years

or

Description of Target

Creation Targets

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

No quantity target

Quantity

Unit

or

What is the targeted timeframe for this reduction? *

No timeline target

years

or

Description of targets

Actions

Additional Actions

Were there any additional actions outside the plan taken during the reporting period to reduce the use and/or creation of the substance? *

No

Describe any additional actions that were taken during the reporting period to achieve the plan's

objectives: **

Provide a public summary of the description of the additional action taken: **

Reductions due to additional actions taken **

The amount of reduction in **use** of the substance at the facility during the reporting period that resulted due to the additional actions.

No Amount tonnes

The amount of reduction in **creation** of the substance at the facility during the reporting period that resulted due to the additional actions.

No Amount tonnes

The amount of reduction in the substance **contained in product** at the facility during the reporting period that resulted due to the additional actions.

No Amount tonnes

The amount of reduction in **release to air** of the substance at the facility during the reporting period that resulted due to the additional actions.

No Amount tonnes

The amount of reduction in **release to water** of the substance at the facility during the reporting period that resulted due to the additional actions.

No Amount tonnes

The amount of reduction in **release to land** of the substance at the facility during the reporting period that resulted due to additional actions.

No Amount tonnes

The amount of reduction in the substance **disposed on-site** (including tailings and waste rocks) at the facility during the reporting period that resulted due to the additional actions.

No Amount tonnes

The amount of reduction in the substance **disposed off-site** (including tailings and waste

rocks) at the facility during the reporting period that resulted due to the additional actions.

No Amount

tonnes

The amount of reduction in the substance recycled off-site at the facility during the reporting period that resulted due to the additional actions.

No Amount

tonnes

Amendments

Amendments

Were any amendments made to the toxic substance reduction plan during the reporting period? *

No

Description any amendments that were made to the toxic substance reduction plan during the reporting period **

Provide a public summary of the description of any amendments that were made to the toxic substance reduction plan during the reporting period **