

General Information and Instructions

General:

Information provided in this form and in any supporting information is collected and maintained by the Environmental Approvals Access and Service Integration Branch of the Ministry of the Environment and Climate Change ("MOECC") under the authority of the *Environmental Protection Act*, R.S.O. 1990, c. E.19, as amended ("EPA"), and will be used to evaluate compliance with MOECC noise guidelines for an application for Environmental Compliance Approval (Air & Noise) made under section 20.2 of Part II.1 of the EPA for approval to engage in an activity mentioned in subsection 9(1) of the EPA. This Primary Noise Screening Method may also be used in order to prepare a noise report under O. Reg. 1/17 Registrations under Part II.2 of the *Act - Activities Requiring Assessment of Air Emissions*. Supporting information may be claimed as confidential; however, the collection, use and dissemination of this information are governed by the *Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c. F.31, as amended. Questions about this collection should be directed to the Customer Services and Outreach Unit Supervisor, Environmental Approvals Access and Service Integration Branch, 135 St. Clair Ave. W, 1st Floor, Toronto ON M4V 1P5. Telephone outside Toronto 1-800-461-6290 or in Toronto 416-314-8001.

Instructions:

Refer to the Primary Noise Screening Method Guide for information and instructions on how to complete this form.

Facility Information

Company Name

ARLANXEO Canada Inc.

Site Name

West Site

Site Address - Street information (applies to an address that has civic numbering and street information - includes street number, name, type and direction)

Unit Number

Street Number

1265

Street Name

Vidal Street S.

PO Box

Survey Address (used for a rural location specified for a subdivided township, an unsubdivided township or unsurveyed territory)

Non Address Information (includes any additional information to clarify clients' physical location)

Municipality/Unorganized Township

County/District

City/Town

Sarnia

Province

Ontario

Postal Code

N7T 7M2

Step 1: Confirm Facility Eligibility

1. Do any of the following cases apply to the facility?

- a) Facility has a Point of Reception in a Class 4 Area Yes No
- b) Facility is closer to a Point of Reception than 50 metres Yes No
- c) Application for Renewable Energy Approval Yes No

2. What is the facility's NAICS Code?

325110

Step 2: Identify Closest Point of Reception

4. Has a Land Use Zoning Designation Plan that meets the requirements outlined in Step 2 of the Primary Noise Screening Method Guide been obtained for the purposes of completing Step 2? Yes No
5. Enter a description of the closest Point of Reception affected by any of the noise emissions that may arise from the operations at the facility.
[Church on First Nations lands located 1047 metres southeast of the Facility.](#)

6. What is the acoustical classification for the closest Point of Reception? [Class 1](#)

Step 3: Determine Actual Separation Distance

7. Has a Scaled Area Location Plan that meets the requirements outlined in Step 3 of the Primary Noise Screening Method Guide been obtained for the purposes of completing Step 3? Yes No
8. What is the Actual Separation Distance from the facility to the closest Point of Reception?
[1,047](#)

Step 5: Compare Actual Separation Distance with Minimum Separation Distance

POR - 1

Actual Separation Distance

[1047](#)

Minimum Separation Distance

[1000](#)

Step 6: Preparer Statement

Sign the below Preparer Statement.

By signing this statement you are verifying that:

- I am a representative of the company identified in "Facility Information", or have been retained by the company, for the purposes of completing this Primary Noise Screening Method form;
- I have confirmed that the facility is eligible to use the Primary Noise Screening Method (Step 1);
- The closest Point of Reception has been identified and the Land Use Zoning Designation Plan is appended (Step 2);
- A Scaled Area Location Plan is appended, which identifies the facility, the closest Point of Reception and the Actual Separation Distance (Step 3);
- I have accurately completed the Primary Noise Screening Method form, identified all noise sources as required, and determined the Minimum Separation Distance (Step 4);
- I have compared the Actual Separation Distance from the facility to the closest Point of Reception, as determined in Steps 2 and 3, with the Minimum Separation Distance determined in Step 4; and
- The facility meets the requirements of the Primary Noise Screening Method (Step 5).

Preparer Last Name

[Stevens](#)

Preparer First Name

[Robert](#)

Preparer Title

[Principal](#)

Company Name

[HGC Engineering](#)

Signature



Date (yyyy/mm/dd)

[2017/09/18](#)

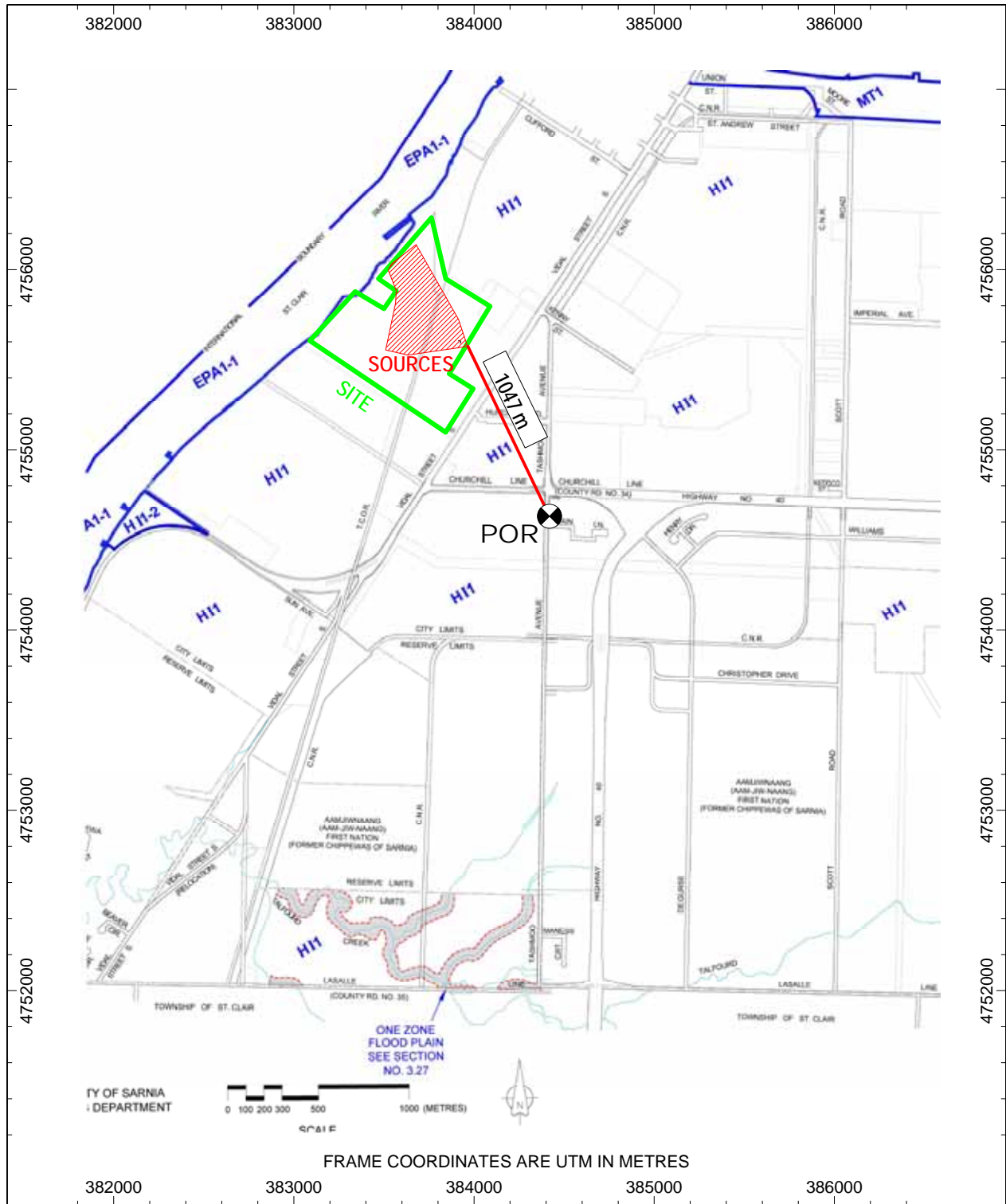


Figure 1: Scaled Zoning Map Showing Facility and Point of Reception