

March 28th, 2025

District Manager
Halton-Peel District, Central Region
Ontario Ministry of the Environment
4145 North Service Road, Suite 300
Burlington, ON L7I 6A3

Reference: Certificate of Approval Number A680324

2024 Annual Report for the Autoclaves and the Site.

Dear District Manager:

As required by condition 51 of the above referenced certificate of approval, please find below the Annual Report for the Stericycle Autoclaves and site operation located at 95 Deerhurst Drive in Brampton Ontario for the 2024 reporting year.

(a) Monthly summary of tonnages of all wastes processed at, stored and /or transferred to the Site:

As shown below, Stericycle received a grand total of **7,762,098** kilograms of acceptable waste. **2,421,532** kilograms were incineration waste (anatomical, cytotoxic, and hazardous pharmaceutical and hazardous contract product destruction waste); **5,339,407** kilograms were autoclavable biomedical waste and non-hazardous contract product destruction waste, and the remaining **1,159** Kilograms were transfer waste (dental amalgam, x-ray backing and photo-processing waste).

Deerhurst 2024 Waste Volumes						
Month	Incineration			Autoclave	Transfer	Total
	Path(312P)	Rx (261)	Cyto (312P)	Bio (312P)	148 & 264	Kgs
January	24,416	52,719	158,322	546,282	-	781,738
February	21,799	41,125	120,467	462,522	-	645,914
March	28,749	55,936	150,843	426,293	44	661,864
April	21,730	59,540	104,846	453,385	140	639,641
May	21,056	51,793	125,502	401,999	64	600,413
June	22,514	47,066	108,602	410,583	49	588,814
July	23,249	44,048	119,745	481,310	270	668,622
August	22,723	52,327	128,177	415,312	87	618,625
September	19,628	39,804	103,773	370,062	101	533,368
October	23,671	63,040	129,418	492,457	211	708,797
November	28,437	55,189	141,204	458,705	195	683,731
December	21,120	49,302	139,651	420,497	-	630,570
Total Kg's	279,093	611,888	1,530,550	5,339,407	1,159	7,762,098



(b) Details of any incidents involving improperly labelled incoming waste and any actions taken to ensure proper handling of all wastes and to minimize the potential for reoccurrence of the improper labelling:

In 2024, Stericycle occasionally received waste containers that were improperly packaged, improperly labeled, overweight or radioactive. The following breakdown illustrates the containers received that triggered an exception report:

Condition of Packaging = 2

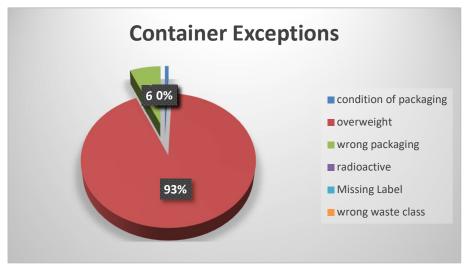
Missing Label = 0

Overweight = 247

Wrong Packaging = 17

Radioactive = 0

Wrong Waste Class = 0



All exception reports are properly recorded and distributed to the appropriate Client Care Manager for review with the individual waste generator to ensure such occurrences are minimized/eliminated.

Note that all Stericycle drivers and plant workers are continually educated on all applicable regulatory requirements. This helps in ensuring that non compliant packages are not collected by our drivers, therefore minimizing the number of exception reports for improper condition of packaging.

(c) Dates when the Autoclave was operated during the reporting period, including start and finish times as well as the names of the Trained Company representatives who were responsible for the proper operation of the Autoclaves:

The autoclaves were typically operated from Sunday nights to Saturday mornings with the exception of Christmas Day, Boxing Day and New Years Day. The autoclave is currently operated Monday to Friday from 07:00 to 23:30. If needed, an additional shift was run on Saturday mornings to accommodate for



varying waste volumes. Over two shifts the autoclaves were under the control of Denver D'Cruz – Day shift Supervisor, and Samuel Arthur – Afternoon shift Supervisor.

A comprehensive and detailed record of all the autoclave sterilization cycles remains on file at the site for inspection by the MECP at any time, this through the autoclave charts, which maintain the following operating parameters: start time, finish time, cycle time, temperatures, pressures, and confirmation of pre & post vacuum.

(d) Details of any loads that failed the Autoclave Verification testing required under condition 46(1):

Stericycle continues to test the efficiency of the autoclaves every six (6) operating days without exception. There were no Autoclave Verification failures through 2024.

(e) Any environmental and operational problems, including spills, that may have negatively impacted the quality of the environment encountered during the operation of the autoclave and any mitigative actions taken, including a summary of any complaints received regarding the operation of the autoclaves, as described under Condition 10(1):

There were no such operational problems encountered through 2024.

(f) Summary of all complaints received, and any actions taken to mitigate.

There were no complaints received (neither the general public nor neighboring companies) through 2024.

(g) A statement as to the compliance with all Conditions of this Certificate and with the inspection and reporting requirements of the Conditions contained herein:

Stericycle warrants that it has exercised best efforts to adhere to all the applicable Terms & Conditions of its Waste Disposal Site Certificate of Approval including all inspection and reporting requirements through the 2024 operating year.

Stericycle is very committed to the full compliance with all conditions of its Provisional Certificate of Approval, throughout the year, whenever a situation of possible non-compliance was identified; immediate actions were taken to ensure full compliance. Stericycle has mechanisms in place to ensure full compliance at all times. Employees are aware of their responsibilities and are trained appropriately.



(h) Any recommendations to minimize environmental impacts and improve Site operations and monitoring programs.

Stericycle believes that the current monitoring program is sufficient and enables both Stericycle and the MECP to have a good understanding of the Site operations and to assess its compliance with the Certificate of Approval and all the relevant regulations.

However, Stericycle is very committed to looking for ways to improve its operations through better procedures, training, inspections and monitoring programs and will continue to do so.

I trust that this is the information required and that it meets with your approval. Should you have any questions or require additional information, please do not hesitate to contact me accordingly

Regards,

Dan Kokol

Operational ESH Manager

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