

Vital Service Disruption Plan

Background

Toronto Municipal Code Chapter 354, Apartment Buildings, (Chapter 354) requires all owners or operators of apartment buildings to develop and maintain a Vital Service Disruption Plan. This form includes standards and minimum requirements in Sections 3, 4, 5, 6 and 7 that must be provided along with some optional services you may provide but are not required to provide [see items marked as "OPTIONAL" in sections 5 and 6]. Owners/operators must begin implementing the Vital Service Disruption Plan once they have identified an unplanned vital service disruption.

You must use this form to complete your Plan. Owners/operators must complete a separate form for each registered apartment building in Toronto.

Under Chapter 354 it is an offence to:

- a. fail to develop and maintain a Vital Service Disruption Plan;
- b. fail to immediately provide the completed Vital Service Disruption Plan to the City during an evaluation, audit, investigation, response to a vital service disruption, or any time that the City requests it; and/or
- c. fail to implement the standards and minimum requirements in Sections 3, 4, 5 (heat, fire safety plan and building security), 6 (fire safety plan, building security and unit access) and 7 of the Vital Service Disruption Plan during a time of prolonged vital service disruption.

The City can lay charges against owners/operators who fail to provide or implement the Plan, which may result in a fine of up to \$100,000 on conviction (or more if a daily fine is imposed).

The City may direct an owner/operator as to how their responsibility is to be carried out at any time during an unplanned vital service disruption.

If the City is involved in supporting the response to the unplanned vital service disruption, the owner/operator must implement their Plan in close coordination with City divisions, agencies, and corporations, such as the Office of Emergency Management and Toronto Fire Services.

Instructions

Complete this form in electronic Word format (that is, .doc or .docx), save it, and then print, sign, and date it for your records. You may not delete or alter any component of this form. Additional information may be included as an appendix to this form. Owners/operators must review and update their Vital Service Disruption Plan on an annual basis and anytime that there are operational or organizational changes.

The accompanying Guidance Document provides information to help owners/operators complete the Vital Service Disruption Plan form. Owners/operators can contact the City's RentSafeTO team at 416- 396-7228 or RentSafeTO@toronto.ca with questions about this form or the requirements under Chapter 354.

1. Building information			
RentSafeTO Registration Number			
Street Number	Street Name		
City/Town	ı	Province	Postal Code



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Number of Units		Number of Floors		Property Type
2. Contacts with the	authority to ac	t for the o	owner/operator	
a. Primary Contact				
First Name			Last Name	
Job Title/Position			1	
Business Street Number	Business Street Name			Suite/Unit Number
City/Town	City/Town Province			Postal Code
Business Telephone Num	nber		Business Mobile Number	
Business Email Address				
b. Secondary contact				
First Name			Last Name	
Job Title/Position				
Business Street Number	Business Street Name			Suite/Unit Number
City/Town		Province		Postal Code
Business Telephone Number			Business Mobile Number	
Business Email Address				
3. Communicating with the City of Toronto				
Confirm that the owner/operator's representative(s) will respond to communications from the City within two hours at all times throughout the disruption.			□ Yes	



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Provide contact information for the individual who will be on-site during an unplanned vital service disruption.

If there is more than one individual, include this additional information in Section 8.

Name (First and Last)

Job Title/Position

Business Telephone Number

Business Mobile Number

Business Email Address

4. Communicating with tenants

	Name (First and Last)
	Job Title/Position
Provide contact information for the point of contact for all tenant enquiries related to a vital service disruption.	Business Telephone Number
	Business Mobile Number
	Business Email Address
Provide contact information for a management contact for tenants to escalate complaints or service requests related to a vital service disruption.	Name (First and Last)
	Job Title/Position
	Business Telephone Number
	Business Mobile Number
	Business Email Address

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	□ Yes
	Indicate which of the following methods the owner/operator will use to provide these daily updates (note: at least one method of communication must be selected):
	Email □ Yes □ No
Confirm that the owner/operator will provide, at	Telephone □ Yes □ No
minimum, daily updates to tenants during the first seven days of an unplanned vital service disruption.	
	Social media (for example Facebook, Twitter) □ Yes □ No
	Other methods (for example public website, robocalls)
	If yes, please specify:
Confirm that the owner/operator will host an in- person information meeting with tenants on the th day of an unplanned vital service disruption and ongoing on a monthly basis or at the direction of the City.	□ Voc
Confirm that the owner/operator will conduct a sur of tenants on the seventh day of an unplanned vit service disruption to identify, at minimum, the tena concerns, outstanding questions, and any unmet needs related to a vital service disruption.	al
Confirm that the owner/operator will summarize the survey results and provide all survey results to the City within 12 hours of a request	

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	☐ Yes Indicate which of the following methods the owner/operator will use to provide these weekly updates (note: at least one method of communication must be selected):
	Email □ Yes □ No
Confirm that owner/operator will provide, at a minimum, weekly updates to tenants during unplanned vital service disruptions that last from seven days to four weeks.	Telephone □ Yes □ No
	Text messages □ Yes □ No
	Social media (for example Facebook, Twitter) ☐ Yes ☐ No
	Other methods (for example public website, robo-calls) ☐ Yes ☐ No If yes, please specify:
Confirm that the owner/operator will provide, at a minimum, bi-weekly updates to tenants during unplanned vital service disruptions that exceed four weeks.	☐ Yes Indicate which of the following methods the owner/operator will use to provide these bi-weekly updates (note: at least one method of communication must be selected):
	Email □ Yes □ No
	Telephone □ Yes □ No
	Text messages □ Yes □ No
	Social media (for example Facebook, Twitter) □ Yes □ No
	Other methods (for example public website, robo-calls) Yes No If yes, please specify:
	Details of the unplanned vital service disruption
Confirm that the following information will be provided to tenants in all updates about the unplanned vital service disruption.	☐ Yes Estimated duration of the disruption ☐ Yes



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	Contact details for the owner/operator's representative(s) ☐ Yes
	Updates on available supports and how to access them (for example water, heat, lodging, etc.) ☐ Yes
	Updates on restoration and construction activities □ Yes
	Updates on the Fire Safety Plan, building security, and tenant access to their units (as applicable) ☐ Yes
Confirm that the owner/operator will meet the mandatory requirements for communicating with tenants via a notification board as per Chapter 354-3.2.	□ Yes
Describe the process by which the owner/operator will ensure that tenant contact information (for example phone numbers, email addresses) is kept up-to-date.	
Describe the process by which tenants will be proactively told how they will receive information during an unplanned vital service disruption.	
Provide any other details on how the owner/operator will communicate with tenants during an unplanned vital service disruption.	
5. Services for tenants during shelter-in-pla	ce events
Heat Confirm that the owner/operator will provide tenants with resources to safely heat their units to a minimum temperature of 21 degrees between October 1 and May 15 within 24 hours of the disruption onset during periods where electricity and/or gas are not available (at the expense of the owner/operator). Note: the installation of some temporary generators or heating devices may require approval of the Electrical Safety Authority or the Technical Standards and Safety Authority.	☐ Yes Specify how:
Fire Safety Plan Confirm that the owner/operator will continue to meet all obligations under the Ontario Fire Code and implement the necessary provisions of the approved Fire Safety Plan.	☐ Yes Specify how:
Building Security Confirm that the owner/operator will secure the premises in the event that a vital service disruption has an impact on normal day-to-day security measures.	☐ Yes Specify how:



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Drinking Water (Optional) If the owner/operator chooses to provide tenants with drinking water within 24 hours of a disruption onset where water has been discontinued (at the expense of the owner/operator) please specify.	Indicate what, if any, services will be provided to tenants:
Kitchen access (may include access to operating appliances and/or hot meals, meal vouchers, or food) (Optional) If the owner/operator chooses to provide tenants with access to operating cooking and refrigeration appliances and/or food, such as hot meals and/or meal vouchers within 24 hours of the disruption onset (at the expense of the owner/operator) please specify.	Indicate what, if any, services will be provided to tenants:
Other Provisions (Optional) Describe any other provisions that the owner/operator chooses to provide (for example access to generators, blankets, and bathing facilities).	Indicate what, if any, services will be provided to tenants:
6. Services for displaced tenants during eva	acuations
Fire Safety Plan Confirm that the owner/operator shall continue to meet all obligations under the Ontario Fire Code and implement the necessary provisions of the approved Fire Safety Plan.	☐ Yes Specify how:
Building Security Confirm that the owner/operator shall secure the premises in the event that a vital service disruption has an impact on normal day-to-day security measures	☐ Yes Specify how:
Unit Access Provided that it is safe to enter the apartment building, confirm that tenants will be granted with access to their unit: • for a minimum of one hour within two weeks after an evacuation order; and • for a minimum of one hour every four weeks thereafter.	☐ Yes Specify how:
Lodging (Optional) If the owner/operator chooses to provide tenants with appropriate lodging within 24 hours of the disruption onset (at the expense of the owner/operator) please specify.	Indicate what, if any, services will be provided to tenants:
Drinking Water (Optional) If the owner/operator chooses to provide tenants with drinking water within 24 hours of a disruption onset where water has been discontinued (at the expense of the owner/operator) please specify.	Indicate what, if any, services will be provided to tenants:



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Food (may include hot meals, meal vouchers, and/or kitchen access) (Optional) If the owner/operator chooses to provide tenants with food, such as hot meals, meal vouchers, and/or access to a kitchen (including access to operating cooking and refrigeration appliances) within 24 hours of the disruption onset, please specify.	Indicate what, if any, services will be provided to tenants:
Clothing (Optional) If the owner/operator chooses to provide this service, specify how tenants will access clothing in the event they do not have access to their units.	Indicate what, if any, services will be provided to tenants:
Personal Items (Optional) If the owner/operator chooses to provide this service, specify how tenants will access personal items such as toiletries.	Indicate what, if any, services will be provided to tenants:
7. Tenants on the Voluntary Tenant Contact	List
Describe the additional assistance that will be available to tenants identified on the Voluntary Tenants Contact List as per Chapter 354-3.8. Include details of how the owner/operator will communicate with these tenants, the accommodations that will be provided to them during an evacuation to address their identified needs, how frequently an owner/operator representative will check-in on them (particularly during an event that requires them to shelter-in-place), and any other ways that the owner/operator will meet their needs. Outline the process by which tenants who are not on	
the Voluntary Tenants Contact List will be able to add themselves during a vital service disruption to access additional assistance.	
	Name (First and Last)
Provide contact information for a management contact for tenants on the Voluntary Tenants Contact List.	Job Title/Position
	Business Telephone Number
	Business Mobile Number
	Business Email Address
Confirm that the owner/operator's representative(s) will respond to communications from tenants identified on the Voluntary Tenants Contact List within two hours at all times during a disruption.	□ Yes



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8. Other considerations, if anyUse this space to outline any additional communications efforts or actions that will be taken by the owner/operator during a vital service disruption. If there are specific considerations and challenges associated with the apartment building, explain in detail here.

1.			
2.			
3.			
9. Signature of apartment building owner/op	erator		
First Name	Last Name		
Job Title/Position			
Signature	Date (yyyy-mm-dd)		
City of Toronto Office Use Only			

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