



Technical Standards and Safety Authority  
 www.tssa.org  
 14th Floor - Centre Tower  
 3300 Bloor Street West  
 Toronto Ontario M9X 2X4  
 Fax: 416.231.4078  
 Customer Service: 1.877.682.6772

**Level 1 Risk and Safety Management Plan (RSMP)**  
**Technical Standards and Safety Act**  
 Propane Storage and Handling Regulation

This Level 1 RSMP applies to:
 

- a facility with a total propane storage capacity of 5,000 USWG or less; or
- a facility with a fixed propane storage capacity of exactly 5,000 USWG and no more than 500 USWG of portable propane storage capacity

Failure to fully complete this form may result in rejection.  
 Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number

Check applicable type of propane operations.

Cylinder     Motor Fill     Filling Plant     Card/Keylock

Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.



**SECTION A: GENERAL INFORMATION**

The undersigned applies to TSSA for a review for an RSMP under Ontario's *Technical Standards and Safety Act*, Propane Storage and Handling Regulation.

**A** Company Name: 2038948 Ontario Inc. Corporation No.: 2038948

Operator Name (if different from above): Kwick Stop Esso

Telephone No.: (705) 328-1033 Fax No.: 705 878 4616 E-mail: kwickstopesso@outlook.com

**B** Street No.: 433 Street Name / 911 Number / Address, if applicable: Kent Street West

Town / City or Township / County: Lindsay Province: ON Postal Code: K9V 6C3

Mailing address if different from above.

**C** Street No.: Street Name / 911 Number / Address, if applicable:

Town / City or Township / County: Province: Postal Code:

**Information on Container Refill Centre or Filling Plant**

**D** Location of facility:

Street No.: 433 Street Name / 911 Number / Address, if applicable: Kent Street West Nearest Major Intersection: Kent Street West & Highway 35

Town / City or Township / County: Lindsay Province: ON Postal Code: K9V 6C3

Name of Licence Holder: 2038948 Ontario Inc.

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): Dilip Shah ROT type: Cylinder Filling

Municipality (or municipalities if the facility or its hazard distance touches multiple borders): City of Kawartha Lakes

Hours of operation:

This document is valid until the next licence renewal date. You are required by law to notify TSSA of any change of information.

Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

Printname	Signature	Date (dd-mm-yyyy)
Name of Licence Holder: 2038948 Ontario Inc.		
Name of Senior Management person as defined in the Regulation holding the Record of Training: Dilip Shah	<i>Dilip Shah</i>	25-04-2018



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**SECTION A: GENERAL INFORMATION (cont'd)**

Indicate the year the facility was established.

1991

Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.

2017

Identify the psig rating and serial number for each fixed propane storage tank on site.

	PSIG	Serial Number
Tank1:	250	will update once tank is ordered
Tank2:		
Tank3:		

Enter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for each type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.

Fixed: 2,000 USWG      Portable: 278.4 USWG      Mobile: 0

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Name of person completing this form (please print) Tejas Shah	Official Title Manager
Signature <i>Shah Tejas</i>	Telephone No. (705) 341-6941
	Date (dd-mm-yyyy) 25-04-2018



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**SECTION A: GENERAL INFORMATION (cont'd)**  
Activity Information

Name of Propane Supplier(s) Highlands Propane Inc.		For Office Use - Party No.	
Street No. 5077	Street Name / 911 Number / Address, if applicable Highway 35		
Town / City or Township / Country Fenelon Falls		Province ON	Postal Code K0M 1N0
Telephone No. (705) 887-1670	Fax No.	Contact Name Jim Bellwood	
E-mail jbellwood@highlandspropane.ca			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		For Office Use - Party No.	
Street No.	Street Name / 911 Number / Address, if applicable		
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	
E-mail			

Off-site Cylinder and/or Mobile Storage n/a	Capacity stored off-site, in USWG	For Office Use - Party No.	
Street No.	Street Name / 911 Number / Address, if applicable		
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	

Note: Customer storage is not considered off-site storage.

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Signature 	Telephone No. (705) 341-6941	Date (dd-mm-yyyy) 25-04-2018	



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**SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN**

The licence holder will complete Section B in consultation with the local Fire Services.

Description of the maximum volume, types and storage location of other hazardous materials on site, if any.

Underground storage tanks - Regular Gasoline - 70,000 litres

Premium Gasoline - 22,370 litres

Diesel - 25,000 litres

Description of fire and emergency equipment indicated on facility site map.

Fire Extinguishers are located throughout the facility - refer to site plan for the locations

List of fire protection controls (e.g., fire detection systems, fire notification systems, alarm systems, automatic shut off devices, fusible links, etc.) and describe their function, use and operation.

Fusible link on pull chain. If propane transfer system is exposed to fire the link will melt and the tank valve will automatically close.

Excess flow valve will automatically close if propane flow exceeds maximum flow rate of 50 gallons per minute.

Emergency stop located on the bollard near the tank and also one located inside the store.

Maintenance and testing schedule for fire protection controls and devices.

- Pre-Use inspections

- Monthly inspection of fire extinguishers by owner

- Annual inspection of tank

- Annual 3rd party for fire extinguishers

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Name of person completing this form (please print) Tejas Shah	Official Title Manager
Signature <i>Sheli Tejan</i>	Telephone No. (705) 341-6941
	Date (dd-mmm-yyyy) 25-04-2019



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**SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)**

1. Contacts for Emergency Response

<b>1. Facility Contact Personnel - Key Contact</b>		<b>5. Facility 24-Hour Contact Person</b>	
Name Tejas Shah	For Office Use - Party No.	Name Tejas Shah	For Office Use - Party No.
Official Title Manager		Official Title Manager	
Telephone No. (705) 341-6941	Fax No.	Cell No. (705) 341-6941	Fax No.
E-mail shah1002@hotmail.com		E-mail shah1002@hotmail.com	
Role and responsibilities in emergency First Responder. See Supervisor responsibilities in "Schedule 1" for complete list.		Role and responsibilities in emergency First Responder. See Supervisor responsibilities in "Schedule 1" for complete list.	
<b>2. Facility Contact Personnel - Alternate Contact</b>		<b>6. Name of Facility Manager</b>	
Name Shahli Shah	For Office Use - Party No.	Name Tejas Shah	For Office Use - Party No.
Official Title		Official Title Manager	
Telephone No. (705) 341-1437	Fax No.	Telephone No. (705) 341-6941	Fax No.
E-mail shahli_40@hotmail.com		E-mail shah1002@hotmail.com	
Role and responsibilities in emergency As an alternate to first responder with same responsibilities as above.		Role and responsibilities in emergency First Responder. See Supervisor responsibilities in "Schedule 1" for complete list.	
<b>3. Local Fire Services - Key Contact</b>		<b>7. Propane Supplier Key Contact Person</b>	
Name Mark Panikhurst	For Office Use - Party No.	Name Jim Bellwood	For Office Use - Party No.
Official Title Fire Chief	E-mail mpanikhurst@kavarthalakes.ca	Official Title General Manager	E-mail jbellwood@highlandspropane.ca
Telephone No. (705) 324-5731 ext. 545	Fax No. (705) 878-3463	Telephone No. (705) 887-1870	Fax No.
Role and responsibilities in emergency Co-ordinate Emergency Response.		Role and responsibilities in emergency Proceed to site if required - Activate ERAP if required.	
Fire Services Address P. Cameron Ave Street North, Lindsay ON K9V 4C4		Propane Supplier Address 5177 Hwy. 35, Farnell Falls ON K0M 1N0	
<b>4. Local Fire Services - Alternate Contact</b>		<b>8. Municipal Contact</b>	
Name Terry Jones	For Office Use - Party No.	Name Cathie Ritchie	For Office Use - Party No.
Official Title Deputy Chief	E-mail tjones@kavarthalakes.ca	Official Title Clerk	
Telephone No. (705) 324-8731	Fax No. (705) 878-3463	Telephone No. (705) 324-8411 ext. 1235	Fax No. (705) 324-8110
Role and responsibilities in emergency Co-ordinate Emergency Response if Fire Chief is not available.		E-mail critchie@kavarthalakes.ca	
Fire Services Address 9 Cambridge Street North, Lindsay ON K9V 4C4		Municipality Name and Address City of Kawartha Lakes 180 Kent Street West, Lindsay ON K9V 2Y6	

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Name of person completing this form (please print) Tejas Shah	Official Title Manager
Signature <i>Shahli Tejas</i>	Telephone No. (705) 341-6941
	Date (dd-mm-yy) 31-05-2018





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**SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)**

**3. Record of Emergency Training Provided - For most recent 12-month period.**

**Training on Emergency Response Plan and Procedures provided to facility key contacts.**

Training Date (dd-mmm-yyyy) 30-Jun-2018	Print Name of Training Provider: Highlands Propane Inc.
	Print Name of Instructor: Jim Bellwood
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

**Training on the facility's Emergency Management Procedures provided to staff.**

Training Date (dd-mmm-yyyy) 30-Jun-2018	Print Name of Training Provider: Highlands Propane Inc.
	Print Name of Instructor: Jim Bellwood
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

**On-site specific training provided to certificate holders / persons with Records of Training.**

Training Date (dd-mmm-yyyy) 30-Jun-2018	Print Name of Training Provider: Highlands Propane Inc.
	Print Name of Instructor: Jim Bellwood
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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Name of person completing this form (please print) Tejas Shah	Official Title Manager
Signature <i>Shah Tejas</i>	Telephone No. (705) 341-6941
	Date (dd-mmm-yyyy) <i>25-04-2018</i>



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**SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)**

**4. Emergency Training Plan for Coming Year**

**Training on Emergency Response Plan and Procedures provided to facility key contacts.**

Target Date (dd-mmm-yyyy) 30-Jun-2019	Print Name of Training Provider: 2038948 Ontario Inc.
	Print Name of Instructor: Tejas Shah
Target Date (dd-mmm-yyyy):	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

**Training on the facility's Emergency Management Procedures provided to staff.**

Target Date (dd-mmm-yyyy) 30-Jun-2019	Print Name of Training Provider: 2038948 Ontario Inc.
	Print Name of Instructor: Tejas Shah
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

**On-site specific training provided to certificate holders / persons with Records of Training.**

Target Date (dd-mmm-yyyy) 30-Jun-2019	Print Name of Training Provider: 2038948 Ontario Inc.
	Print Name of Instructor: Tejas Shah
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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Name of person completing this form (please print) Tejas Shah	Official Title Manager
Signature <i>Shah Tejas</i>	Telephone No. (705) 341-6941
	Date (dd-mmm-yyyy) 25-04-2019





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**SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)**

The licence holder will complete Section B in consultation with the local Fire Services.

**5. Emergency Response Communications Plan**

**Warnings and Actions**

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).  
See Schedule 1

Describe what action is to be taken and by whom when a warning is issued (including details of a meeting place in a safe identified area and activating the evacuation plan, if necessary).  
See Schedule 1

**Communication with Emergency Response Authorities**

Describe when and how the licence holder will give early warning to emergency response authorities (including a process to ensure that a call is placed to 911).  
See Schedule 1

Describe provisions for fire department entry when there are no operations or staffing at the propane site.  
Fire trucks are equipped with bolt cutters to remove cabinet lock if needed

Describe how the licence holder will ensure continual flow of updated information to authorities.  
See Schedule 1

How long will it take the facility liaison person to respond to the site.  
Tejas lives 1 km from the site  
Bhakti lives 1 km from the site

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Name of person completing this form (please print) Tejas Shah	Official Title Manager
Signature <i>Shubh Tejas</i>	Telephone No. (705) 341-6941
	Date (dd-mmm-yyyy) 25-04-2018



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**SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)**

The licence holder will complete Section B in consultation with the local Fire Services.

**6. Building and Site Security and Procedures**

- |   | Yes                                 | No                       |
|---|-------------------------------------|--------------------------|
| 1. Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Is there adequate night lighting at the site?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials?                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Are there procedures that capture and record the daily inspection of hoses and inspection requirements for filling systems and mechanical devices used in the transfer of propane? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Are weighing systems validated for accuracy?   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves)   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Is the schedule of maintenance and testing activities retained on site?  | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

**7. Water Supply**

The propane licence holder should work with the local fire department to determine water supply capabilities that are available based on the propane facility's location.

- |  | Yes                                 | No                                  |
|--|-------------------------------------|-------------------------------------|
| 1. Is a pressurized water system available at the propane facility site?   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)           | 40 Metres                           |                                     |
| 4. What is the unobstructed distance to the closest approved water supply with year round access if there are no hydrants? (distance in metres only) | n/a                                 |                                     |

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Name of person completing this form (please print) Tejas Shah		Official Title Manager
Signature <i>Tejas Shah</i>		Telephone No. (705) 341-6941
		Date (dd-mm-yyyy) 31-05-2019



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**SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)**

The licence holder will complete Section B in consultation with the local Fire Services.

**B. Licence holder and local Fire Services Review**

**To be completed by the Local Fire Services**

Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan?  Yes  No

If not, please explain (e.g., no fire services).

**Fire services comments, if any:**

No updated aerial map available at time of submission. New commercial development West of facility.

Procedure on how the system will operate requested to be provided to fire service prior to dispensing operations.

All records for required testing and maintenance are to be available on site upon request.

**To be completed by the Licence Holder**

In response to the above comments, the following action(s) is required:

The licence holder will respond to the Local Fire Services comments by: \_\_\_\_\_

(dd-mmm-yyyy)

**LOCAL FIRE SERVICES**

The undersigned has reviewed Section B of the Risk and Safety Management Plan Fire Services.

Print name	Signature	Date (dd-mmm-yyyy)
Local Fire Services Name: Fritz Mattorn <b>FIRE PREVENTION OFFICER CITY OF KAWARTHA LAKES</b>		05-06-2018

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Name of person completing this form (please print) Iejas Shah	Official Title Manager
Signature 	Telephone No. (705) 341-6941
	Date (dd-mmm-yyyy) 31-05-2018



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**SECTION C: SUBMISSIONS**

Applicant must include a Facility Site Plan and Map of Surrounding Area

Facility Site Plan.

The licence holder will submit a copy of the original facility site plan updated with the following information:

1. The storage location of fixed, portable, and mobile vessels.
2. The maximum volume, types and storage location of hazardous materials.
3. Location of permanent structures on site.
4. Access and egress points and location of barriers.
5. Location of fire and emergency equipment (e.g., sprinkler systems, extinguishers, suppression systems) on site and location of fire hydrant or water supply where available.
6. Location of emergency shut off/shut down switches/valves.

Map of Surrounding Area.

The licence holder will submit a scaled aerial map of the surrounding area showing the following information:

7. The capacity and placement of the single largest propane storage vessel, including its setback from the front, rear and side property lines.
8. GPS co-ordinates of the single largest vessel.
9. Visual indication of the single largest fixed vessel and a circle made using the distance in Table 1 as the radius from the single largest fixed vessel.
10. Clear indication of the municipality or municipalities present within the circle.
11. Visual indication of property line information.
12. The location and name of roads within or abutting the site.
13. Key note to the drawing indicating the facility's municipal address, municipal lot number(s) and concession lines as applicable, and the date the map was prepared.
14. Address and contact information for each municipality (municipal clerk or secretary-treasurers of planning board). (Refer to page 5.)
15. Complete "Required Mapping Information from Updated Site Plan" in table below.

Required Mapping Information from Updated Site Plan

Date map prepared (dd-mmm-yyyy) 23-Apr-2018	Capacity of single largest propane storage vessel (USWG) 2,000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 158.5'	Right side property line: 20'
Rear: 187.5'	Left side property line: 130'
GPS coordinates of single largest vessel: 44°20'54.87" N 78°45'50.76" W	

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Name of person completing this form (please print) Tejas Shah	Official Title Manager
Signature <i>Shah Tejas</i>	Telephone No. (705) 341-6941
	Date (dd-mmm-yyyy) 25-04-2018



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**SECTION C: SUBMISSIONS (cont'd)**  
Applicant must include a Facility Site Plan and Map of Surrounding Area

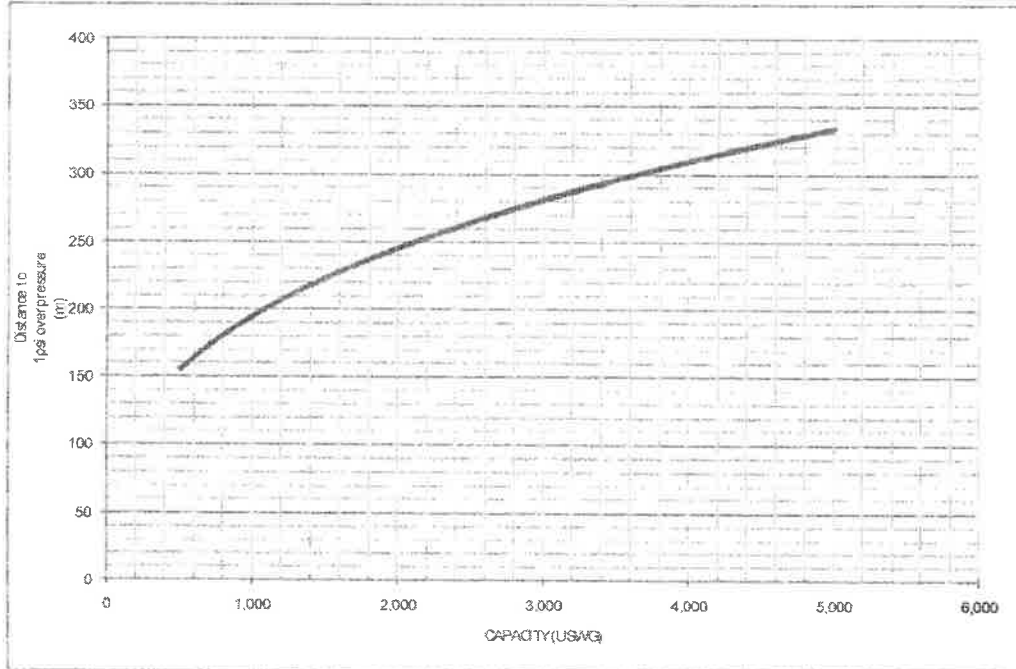
Table 1. Distance Table

Water Capacity (litres)	Nominal Water Capacity (USWG)	Distance to 1 psi overpressure (m)
1,890	500	155
3,760	1,000	195
4,920	1,300	213
6,620	1,750	235
7,130	1,885	241
7,560	2,000	246
18,900	5,000	333

Formula:  $D = 16.94 \times (1.524 \times C)^{1/3}$   
 D = Distance to overpressure of 1 psi (meters)  
 C = Tank Total Capacity in USWG

Parameters: Density of Propane is 0.5033 kg per litre @ 15 C  
 Assume all vessels are 80% full  
 1 gallon [US, liquid] = 0.003785411784 cubic meter  
 1 cubic metre = 264.17 USWG

Hazard Distance Chart (EPA-TNT model)





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**SECTION C: SUBMISSIONS (cont'd)**  
Applicant must include a Facility Site Plan and Map of Surrounding Area

As an accompaniment to the Map of Surrounding Area, provide the following information about buildings and features present within the circle in Table 2.

Table 2: Buildings and Features

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: Boston Pizzeria Address: 435 Kent Street West City: Lindsay Province ON Postal Code K9V 6C3				X	33 m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: Ontario Court of Justice (Detention Facility) Address: 440 Kent Street West City: Lindsay Province ON Postal Code K9V 6K2		X			187 m
Emergency responders specifically fire stations, ambulance stations, and police stations Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m

\* For multi-unit buildings, count each unit as "1".

Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

Name of person completing this form (please print) Tejas Ghah	Official Title Manager
Signature <i>Shah Tejas</i>	Telephone No. (705) 341-6941
	Date (dd-mm-yyyy) 31-05-2018



Technical Standards and Safety Authority  
www.tssa.org

14th Floor - Centre Tower  
3300 Bloor Street West  
Toronto Ontario M8X 2X4  
Fax: 416.231.4078  
Customer Service: 1.877.682.8772

Level 1 Risk and Safety Management Plan (RSMP)  
Technical Standards and Safety Act  
Propane Storage and Handling Regulation

**WORKSHEET**

Portable Storage Additional Information Worksheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5		
# 40	11.75		
# 33.3	9.62		
# 30	8.8		
# 20	5.8	48	278.4
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			278.4 USWG

Tanks Stored On-site Not Connected for Use

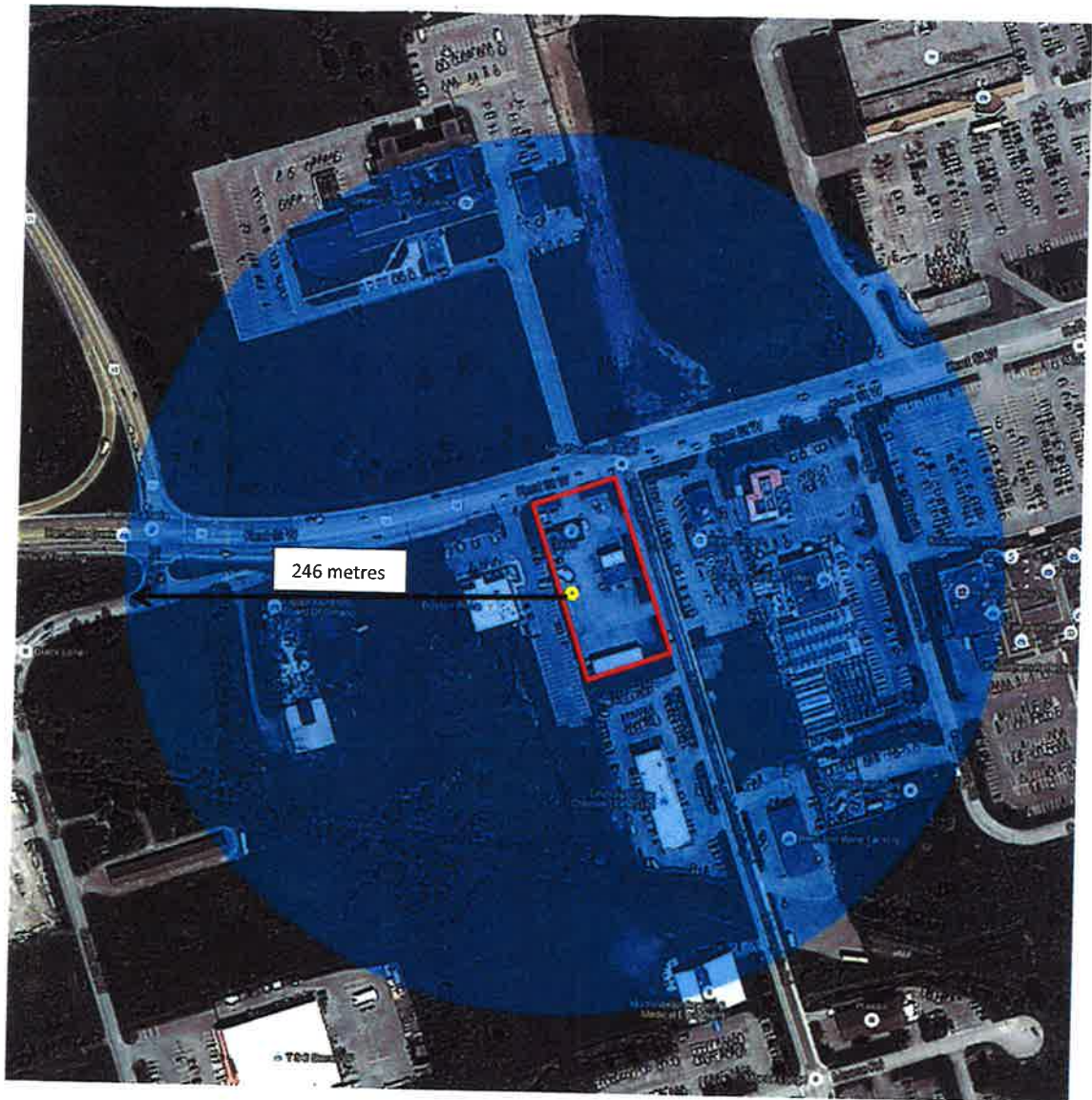
Tank Size in USWG	Quantity	Total Volume in USWG
Total Tank Capacity		0

Total Cylinder Capacity	278.4 USWG
Total Tank Capacity	0
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	278.4 USWG



# 2038948 Ontario Inc.

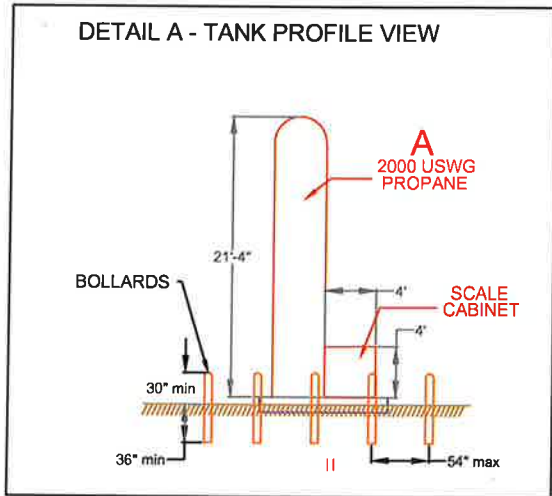
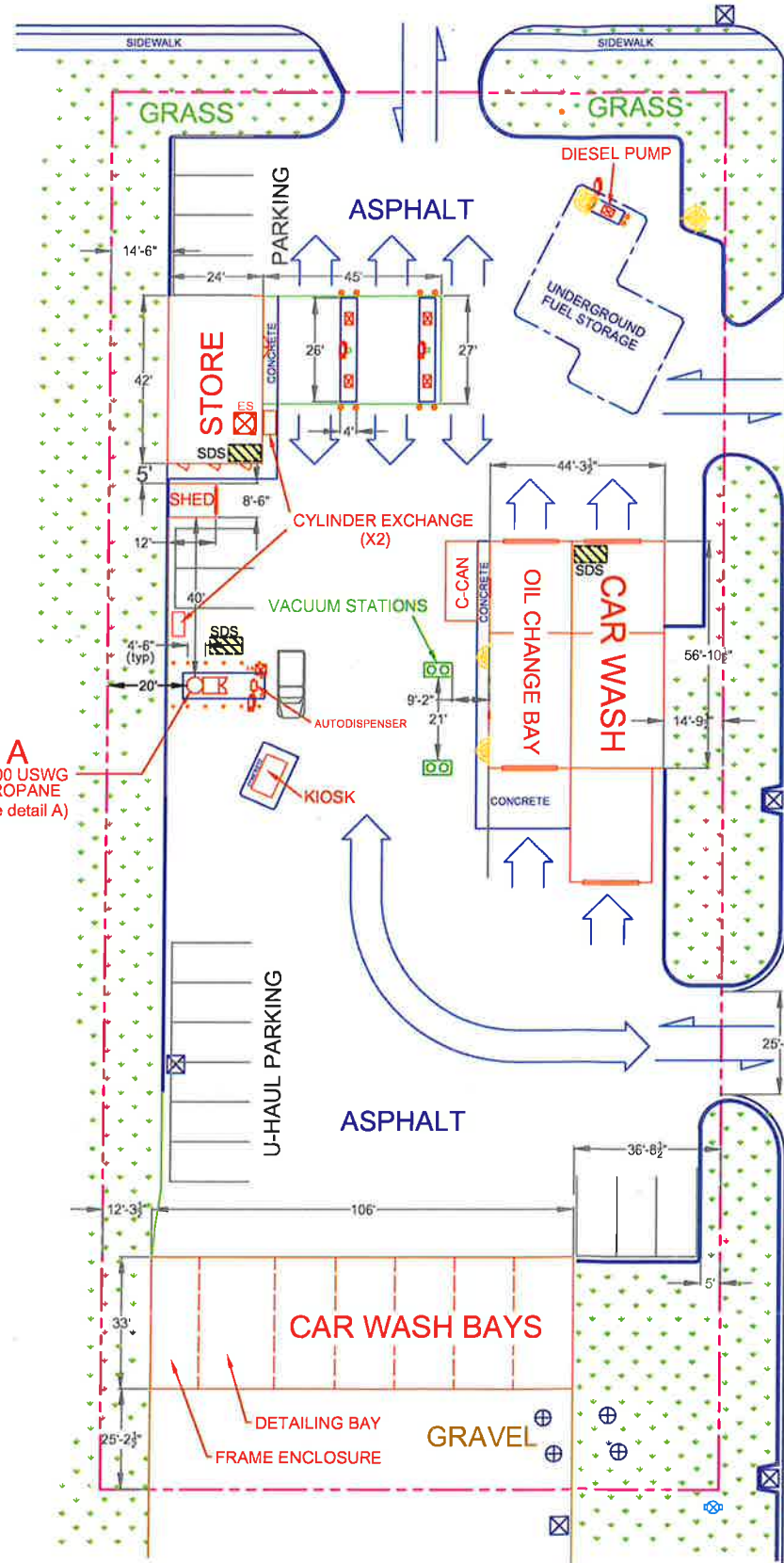
Lindsay, ON  
246 Metre Radius



Location	433 Kent Street W, Lindsay ON K9V 6C3	
Prepared	23-Apr-2018	
Largest Tank	2,000 USWG	
Tank Set Backs	North – 146.5'	East – 130'
	South – 199.5'	West – 20'
Radius	246 metres	
GPS Coordinates	44°20'54.97" N 78°45'50.61" W	
Municipality 1	City of Kawartha Lakes	
CAO	Ron Taylor	
Address	26 Francis St. Lindsay ON K9V 5R8	
Phone	(705) 324-9411	
Fax	(705) 324-5417	



# KENT STREET WEST



REFERENCE DOCUMENTS	
DRAWING NUMBER	DESCRIPTION



McLAUGHLIN ROAD

Technical Standards and Safety Authority  
Fuels Safety Division

**DRAWING REVIEWED**

Revisions/Notes: Yes / No

Name: SOLAMON KO

Signature: [Signature]

Date: January 4, 2019

S/R # 2338334  
Revised

LEGEND	
	Property Line
	Emergency Stop
	Gasoline Pumps
	Egress Points
	Fire Extinguisher
	Light Standard
	Storm Sewer/ Catch Basin
	Chain Link Fence
	Fire Hydrant
	Bollards
	Water Well
	Safety Data Sheet Location

FIXED STORAGE	
SIZE	QTY
2000 USWG	1
TOTAL (USWG)	2000

PORTABLE STORAGE	
SIZE	QTY
20 lb	48
TOTAL (lbs)	278.4

DISTANCE TABLE	
(distances in ft)	TANK A
NORTH PROPERTY LINE	146.5
EAST PROPERTY LINE	130
SOUTH PROPERTY LINE	199.5
WEST PROPERTY LINE	20

REV	DATE	DESCRIPTION
6	11/02/18	-rotate tank and cabinet - add autodispenser
5	05/30/18	-C-Can and SDS locations added
4	25/04/18	-pad and 2000 USWG tank reconfigured
3	21/11/16	-pad and 2000 USWG tank reconfigured
2	13/10/16	-E-stops added
1	15/09/16	-relocate propane tank and pad to utilize existing electrical cables
0	30/08/16	-initial version

DWG NO: HLP-LE-S-01-0R6	beatty petroleum consulting inc 182 George St. PO Box 894, Arthur, Ontario NOG 1A0	
APPROVED BY:	LINDSAY ESSO, Lindsay, ON Site Drawing	
	PREPARED BY: Jeff Collinson	CHECKED BY: Alex Beatty
	REV: 6	signature:                      date:

SITE PLAN