



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X 2X4
Fax: 416.231.4903
Customer Service: 1.877.682.8772

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 on site.

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 Ontario Corporation No., if applicable
 Operator Name (if different from above)
 Telephone No. Fax No. E-mail
B Street No. Street Name / 911 Number / Address, if applicable
 Town / City or Township / County Province Postal Code
 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. Street Name / 911 Number / Address, if applicable Nearest Major Intersection
 Town / City or Township / County Province Postal Code

Name of Licence Holder
 Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). ROT type
 Municipality (or municipalities if the facility or its hazard distance touches multiple borders)
 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.

Print name	Signature	Date (dd-mm-yyyy)
Name of Licence Holder <input type="text" value="Glendale Auto Services"/>		<input type="text" value="16-01-2013"/>
Name of Senior Management person as defined in the Regulation holding the Record of Training <input type="text" value="Rob Brouwer"/>		



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SECTION A: GENERAL INFORMATION (cont'd)

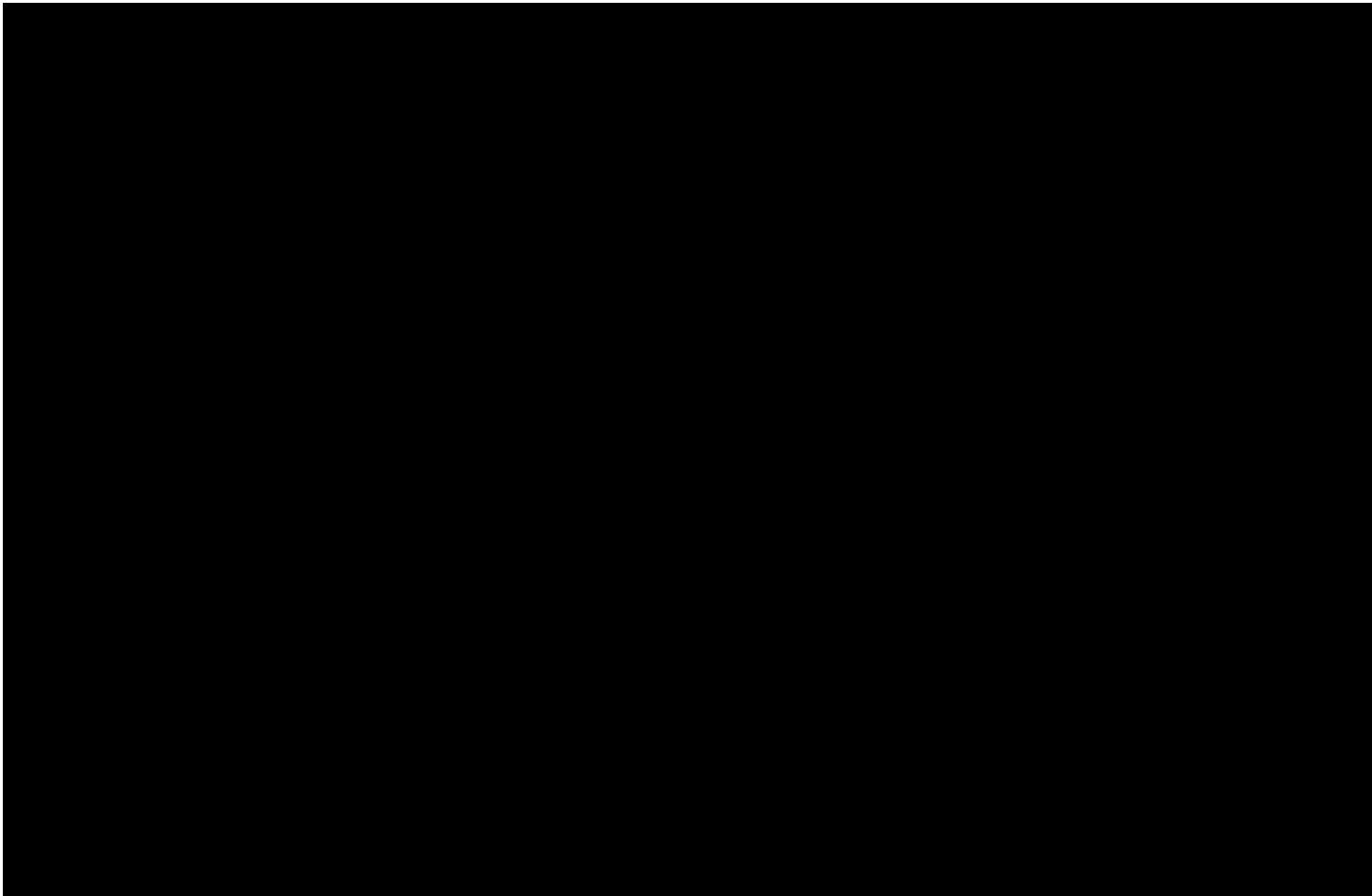
Indicate the year the facility was established. Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.
1985 1997

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

	PSIG	Serial Number
Tank1:	250	5560786
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: 1300 Portable: 174 Mobile: _____



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Name of person completing this form (please print) Doug Kloet	Official Title Owner
Signature 	Telephone No. 905-648-4113 Date (dd-mm-yyyy) 16-01-2011



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s)		[Redacted]	
Superior Propane			
Street No.	Street Name / 911 Number / Address, if applicable		
3089	Regional Road 12		
Town / City or Township / Country		Province	Postal Code
Smithville		On	LOR 2A0
Telephone No.	Fax No.	Contact Name	
877-873-7467		Leigh Causley	
E-mail			
causleyl@superiorpropane.com			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		[Redacted]	
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	Capacity stored off-site, in USWG	For Office Use - Party No.
N/A		
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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Doug Kloet	Owner	
Signature	Telephone No.	Date (dd-mm-yyyy)
	905-648-4113	16-01-2011



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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.

2 oxygen (size m) and 3 acetylene tanks (size cws) for torches, 1 cylinder of autoweld (size m) for the mig welder located in service bays

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

Fire Extinguishers -- 1 at propane refill, 1 in office, 4 in auto service bays


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.

1. Fusible link on main shutoff valve,
2. Power supply breaker at nearest bay door

Maintenance and testing schedule for fire protection controls and devices.

Maintenance and testing completed by Superior Propane according to their maintenance standards.

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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact		5. Facility 24-Hour Contact Person	
Name Doug Kloet	For Office Use - Party No.	Name Doug Kloet	For Office Use - Party No.
Official Title Owner		Official Title Owner	
Telephone No. 905-648-4113	Fax No. 905-648-5314	Cell No. 905-973-4113	Fax No.
E-mail doug@glendalemotors.ca		E-mail doug@glendalemotors.ca	
Role and responsibilities in emergency Coordinate site response		Role and responsibilities in emergency As above	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Rob Brouwer	For Office Use - Party No.	Name Doug Kloet	For Office Use - Party No.
Official Title Owner		Official Title as above	
Telephone No. 905-570-4113	Fax No.	Telephone No.	Fax No.
E-mail rob@glendalemotors.ca		E-mail	
Role and responsibilities in emergency As above		Role and responsibilities in emergency Coordinate site response	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Frank Biancucci	For Office Use - Party No.	Name Superior Propane	For Office Use - Party No.
Official Title Chief	E-mail frank.biancucci@hamilton.ca	Official Title	E-mail
Telephone No. 905-546-2424 x7762	Fax No.	Telephone No. 877-873-7467	Fax No.
Role and responsibilities in emergency Coordinate fire service response and liaise with the police		Role and responsibilities in emergency Identify and dispatch Superior Propane and or LPERGC emergency response personnel as required	
Fire Services Address 365 Wilson St W, Ancaster, On		Propane Supplier Address	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name	For Office Use - Party No.	Name Rose Caterini	
Official Title	E-mail	Official Title City Clerk	
Telephone No. 911	Fax No.	Telephone No. 905-546-2489	Fax No. 905-546-2095
Role and responsibilities in emergency Coordinate fire service response and liaise with the police		E-mail clerk@hamilton.ca	
Fire Services Address 365 Wilson St W, Ancaster, On		Municipality Name and Address 71 Main St W, Hamilton, On L8P 4Y5	

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2. Additional Safety Measures

Describe any other measures in place at the facility that exceed the minimum Code and Standards requirements.
nothing beyond b149.2 code

[Lined area for describing additional safety measures]

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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-mm-yyyy) March 9, 2012	Print Name of Training Provider: Superior Propane
	Print Name of Instructor: John Morrison
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Training Date (dd-mm-yyyy) 23-01-2012	Print Name of Training Provider: Doug Kloet
	Print Name of Instructor: Doug Kloet
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-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-mm-yyyy) NONE	Print Name of Training Provider: NONE
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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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-mm-yyyy) 30-09-2012	Print Name of Training Provider: FSN Training
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Target Date (dd-mm-yyyy) 23-01-2012	Print Name of Training Provider: Doug Kloet
	Print Name of Instructor: Doug Kloet
Target Date (dd-mm-yyyy) 13-02-2012	Print Name of Training Provider: Doug Kloet
	Print Name of Instructor: Doug Kloet
Target Date (dd-mm-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-mm-yyyy) 01-10-2012	Print Name of Training Provider: FSN Training
	Print Name of Instructor: Mike Farah
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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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).
The ROT person on duty will call 911 and will provide warnings outlined in the attached "Propane Emergency Response Procedures" placard if it is safe to do so. Key contacts will also be called.

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).
Actions and warnings will be taken by on duty ROT persons as per the attached ERP placard. The meeting place will be in the Express Lube building on the property if it is safe to do so.

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).
Any initial indications of a problem including a leak will cause the tank to be shut, the power turned off and appropriate emergency response authorities to be called. The ROT person will call 911 if necessary.

Describe provisions for fire department entry when there are no operations or staffing at the propane site.
The propane tank is located in a wide open area that is easily accessible from Wilson St. The fire access route is identified in the attached site plan.

Describe how the licence holder will ensure continual flow of updated information to authorities.
via the phone

How long will it take the facility liaison person to respond to the site.
10 minutes after having received the emergency call

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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 type="checkbox"/>	<input checked="" type="checkbox"/>
2. Is there adequate night lighting at the site?	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>
7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input 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)	63m	
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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SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

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

8. 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:

See APPENDIX 'A'

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-mm-yyyy)

LOCAL FIRE SERVICES

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

<i>FRANK</i> Local Fire Services Name	Print name <i>BIANCUCCI</i>	Signature <i>Frank Biancucci</i>	Date (dd-mm-yyyy) <i>March 28/12</i>
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Name of person completing this form (please print)	Official Title	
Signature	Telephone No.	Date (dd-mm-yyyy)



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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-mm-yyyy) 18-01-2011	Capacity of single largest propane storage vessel (USWG) 1300
Tank setback coordinates. Indicate placement on the map.	
Front: 42m	Right side property line: 2m
Rear: 30m	Left side property line: 56m
GPS coordinates of single largest vessel: 43.2290272, -79.9754876	

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SECTION C: SUBMISSIONS (cont'd)

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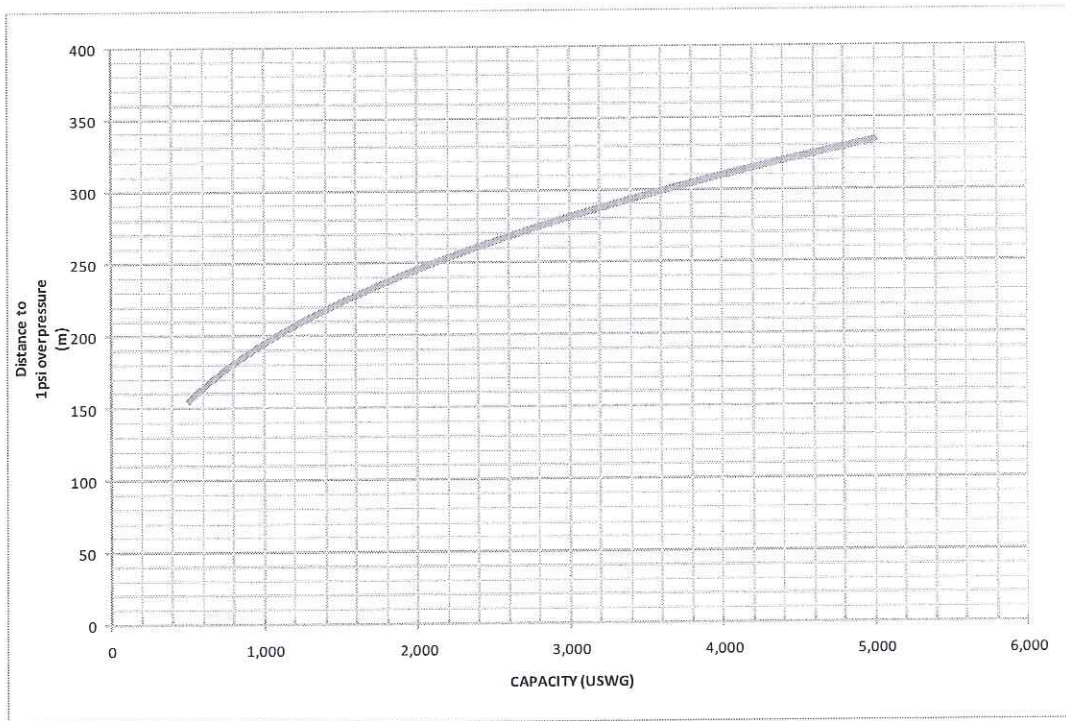
Table 1: Distance Table

Water Capacity (litres)	Nominal Water Capacity (USWG)	Distance to 1 psi overpressure (m)
1,890	500	155
3,780	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. [REDACTED]			x		20 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Robert Outlaw</u> Address: <u>401 Wilson St E</u> City: <u>Ancaster</u> Province <u>On</u> Postal Code <u>L9G 2C4</u>				x	20 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: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				_____ 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".

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Signature 	Telephone No. <u>905 648 4113</u> Date (dd-mm-yyyy) <u>2 3 2017</u>



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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	30	174
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			

Tanks Stored On-site Not Connected for Use

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

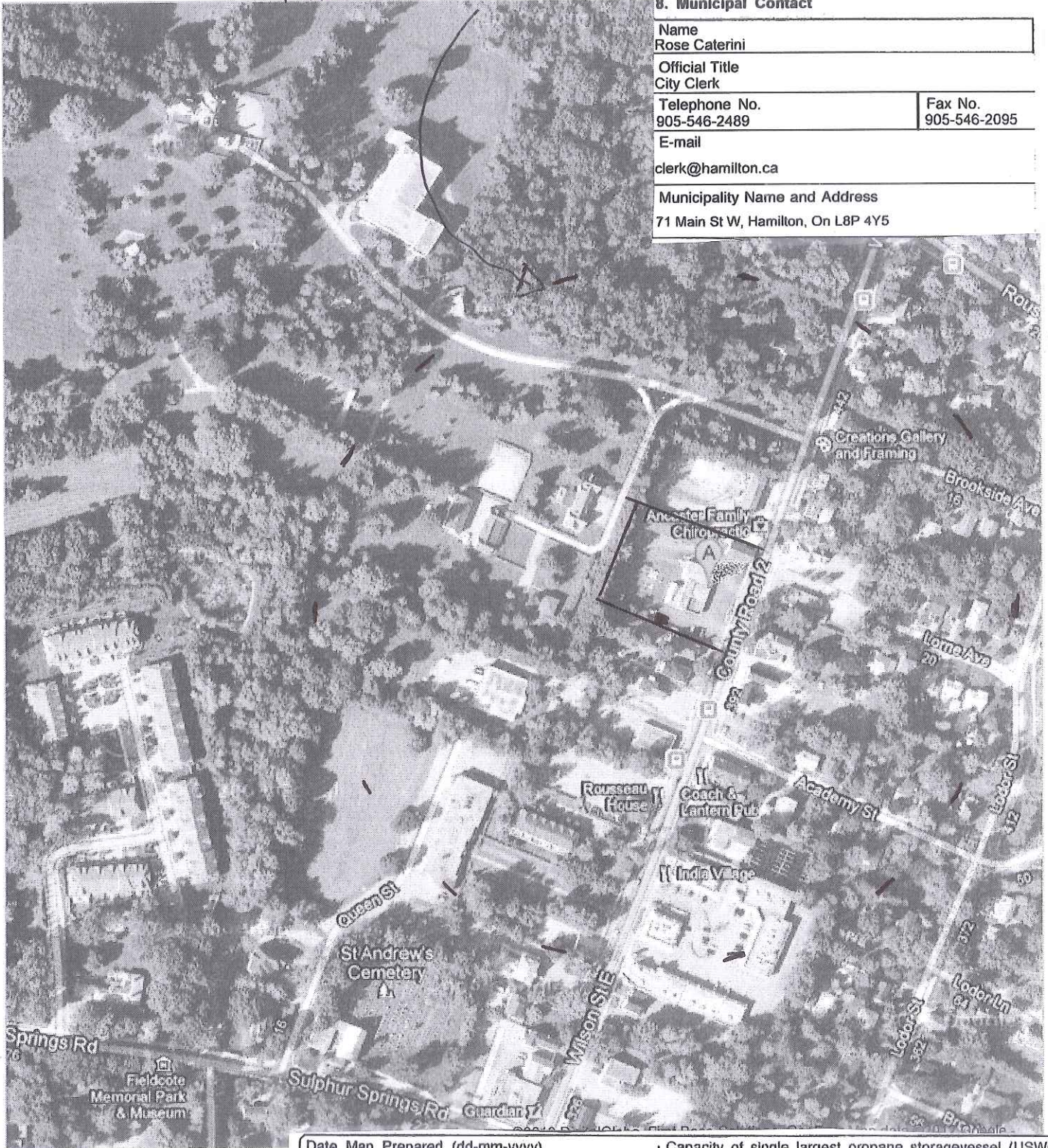
Total Cylinder Capacity	
Total Tank Capacity	
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	174

LOCATED IN HAMILTON, ON

Google

To see all the details that are visible on the screen, use the "Print" link next to the map.

RADIUS 213m



8. Municipal Contact	
Name Rose Caterini	
Official Title City Clerk	
Telephone No. 905-546-2489	Fax No. 905-546-2095
E-mail clerk@hamilton.ca	
Municipality Name and Address 71 Main St W, Hamilton, On L8P 4Y5	

Date Map Prepared (dd-mm-yyyy) 18-01-2011	Capacity of single largest propane storagevessel (USWG) 1300
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Tank setback coordinates. Indicate placement on the map.			
Front:	42m	Right side property line:	2m
Rear:	30m	Left side property line:	56m

GPS coordinates of single largest vessel: 43 2290272, -79.9754876

