



345 Carlingview Drive  
Toronto, Ontario M9W 6N9  
Tel.: 416.734.3300  
Fax: 416.231.1626  
Toll Free: 1.877.682.8772

[www.tssa.org](http://www.tssa.org)

1. Please provide a layout drawing (floor plan) for the vehicle showing the location of the appliances and propane cylinders or tanks as well as any openings into the vehicle such as doors, windows or air supply inlets. A neat hand-drawn sketch is acceptable.
2. Please list all of the gas fired Appliances. We need this information to confirm that Appliances are approved for use, and to make up the Rating Plate. A template for this rating plate was attached.
3. Please complete the attached component list. Fill in the form with the make and model number of the components that have been installed. This includes Gas Regulators, Automatic Gas Shut Off Valves, Exhaust Proving Switch, Combustion Air Proving Switch, etc. Different installations will have different lists of components.

4. We require that there be an interlock between the exhaust fan and the gas supply so that the fan must be proven to operate before the gas can be supplied to the appliances.

This involves an Air Flow Proving Switch for the fan and an Automatic Gas Valve in the main gas supply line. You will also need a Manual Reset Device on this circuit to prevent the gas valve from automatically reopening following a brief power interruption. This can be accomplished with either a magnetic contactor switch on the exhaust fan circuit or with an appliance reset relay that may be provided by your fire suppression supplier. Please confirm that you have this, and ensure that the components are included in your list.

5. Please describe how combustion air and make up air to replace that exhausted by the fan are to be provided. If you will have a permanent air supply opening, please detail the size and location of the opening. If you depend on an open window or door for the air supply, there must be a switch interlocked with the gas supply such that there can be no gas flow unless the door or window is opened. Please provide details of the switch on the component list.



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**TSSA Work Order (WO) Number:**

Mobile Food Service    Self-Propelled Vehicle    Trailer    Portable Cart    Other-specify

Identification Number                      V.I.N.

**Appliances**

<b>Manufacturer</b>	<b>Type</b>	<b>Model Number</b>	<b>Input (BTUH)</b>

**For Use with Propane Gas**

Manifold Pressure:    in. w.c.

Electrical Rating:    120/240 Volts, 60 Hz,    Amps

Design Standard:    TSSA-MFSE-2020



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## **Propane Gas Components**

<b>COMPONENT</b>	<b>MAKE</b>	<b>MODEL NUMBER</b>
Regulator		
Gas Hose Assembly		
Fire Suppression Automatic Valve		
Air Flow Interlock Automatic Valve		
Manual Reset Device		
Appliance Connectors		
Air Flow Proving Switch		
Window Switch		
Exhaust Fan		
Manual Valves		