Technical Standards and Safety Authori www.tssa.o.g

Technical 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 Propulation

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 or

		Lilledon			
	M	Failure to fully complete this form aking a false statement may resu under the Technical Standa	It in a fine or prosecution		
Licen	ice Number	0076491810-C			
Check	applicable type	of propane operations.			
	√ Cylinde		Filling Plant Card/Keylock		
Subm	it along with this	completed application a Facility Site Pl	an and a Map of the Surrounding Area.		
		SEC	CTION A: GENERAL INF	ORMATION	
The Pro	Undersign pane Stora Company Nam	ge and Handling Regulati	review for an RSMP under O on.	ntario's Technical St	andards and Safety Act, Ontario Corporation No., if applicable
A	Can Fuels	9			
^	STREET, STREET,	e (if different from above) akhwal			
	Telephone No. 519-293-341	Fax No. 519-293-3411	E-mail		
В	Street No. 124	Street Name / 911 Number / Main Street	Address, if applicable		
	Town / City or	Township / County		Province	Postal Code NOM 1A0
	Ailsa Craig			Ontario	INDIVITAD
С	Mailing add Street No.	ess if different from above. Street Name / 911 Number.	/ Address, if applicable		
	Town / City or	Fownship / County		Province	Postal Code
In		n Container Refill Centre or F	illing Plant		
	Location of f Street No.	acility. Street Name / 911 Number /	Address, if applicable	Nearest Major Intersection	1
D	124	Main Street		Stewart Street	
		Township / County		Province	Postal Code
		Township / County		Ontario	NOM 1A0
	Ailsa Craig				
2000	Name of Licence	e Holder			Í
	Anil Kumar N	akhwal			
	Name of a Ser	ior Management person as defined in	the regulation holding the Record of Traini	ng (ROT).	ROT type
	Anil Kumar N	lakhwal			P-T-I 100-01
	Municipality (or municipalities if the facility or its haz	ard distance touches multiple borders)		Ĭ
	Ailsa Craig				
					74
	Hours of opera	tion.			
		-	110		

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

Printname Name of Licence Holder Anii Kumar Nakhwal	Signature Date (dd-mm-yyyy) Amilkum in Nath 27-09-2011
Name of Senior Management person as defined in the	
Regulation holding the Record of Training Anil Kumar Nakhwal	





Technical Standards and

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Fax: 416.231.4903

Level 1 Risk and Safety Management Plan (RSMP)

Technical Standards and Safety Act Propane Storage and Handling Regulation

127		- 1 ⁻⁷ ,150, 1110, 1	
nan a	SE	CTION A: GENERAL INFORM	IATION (cont'd)
Indicate the yea	ar the facility was established.	Indicate the year of any significant modification	ations, as defined in s.1, O.Reg 211/01, since establishment.
Identify the psig	rating and serial number for ea	ch fixed propane storage tank on site.	
	PSIG	Serial Number	
Tank 1;	250	20.3-7	
Tank2:			
Tank3:			
	1 110140 6 1		entory that includes the number of tank/vessel for
Fixed	. 2000	Portable: 0 M	oblie: <u>0</u>
Fixed	. 2000	Portable: W	oblie:
Fixed	. 2000	Portable: W	oblie:
Fixed	. 2000	Portable: W	oblie:
Fixed	. 2000	Portable: W	oblie:
Fixed	. 2000	Portable: W	oblie:
Fixed		Portable: U M	oblie:
Fixed		Portable: U M	oblie:
Fixed		Portable: W	oblie:
Fixed		Portable: U M	oblie:

Name of person completing this form (please print)	Official Title	
Anll Kumar Nakhwal	Proprietor	
Signature And Kunse North hal	Telephone No.	Date (dd-mm-yyyy)
Bus	519-293-3411	27-09-2011



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Toronto Ontario M8X 2X4
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Level 1 Risk and Safety Management Plan (RSMP) **Technical Standards and Safety Act** Propane Storage and Handling Regulation

SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propa	ne Supplier(s)				
McRobert Fuels					
Street No. Street Name / 911 Number / Address, if applicable R.R.# 1					
Town / City or `Strathroy	Township / Country		Provinc Ontario	Postal Code N7G 3H3	
Telephone No.	Fax No.	Contact Name			
519-246-1019	519-246-1160	Allan McRobert			
E-mail	¥				
Name of Propa	ne Transporter. If same as above	e, please check box.	7		
Street No.	Street Name / 911 Number / Add	ress, if applicable			
Town / City or 7	-I Fownship / Country	4-11-12-12-12-12-12-12-12-12-12-12-12-12-	Provinc	ce Postal Code	
Telephone No.	Fax No.	Contact Name		п	
E-mail			A		
				W. Company	
Off-site Cylinde	r and/or Mobile Storage	, 0	capacity stored off-site, in USWG	For Office Use - Party No.	
None					
Street No.	Street Name / 911 Number / Addr	ess, if applicable			
Town / City or T	ownship / Country		Provinc	Postal Code	
Telephone No.	Fax No.	Contact Name		-	
Note: Customer s	torage is not considered off-site st	orage.		The state of the s	
	Declaration: I am awar	e that it is an offence that the informatio	e to give false information in t n i have given here is true and	this document and I complete.	
Name of person o	ompleting this form (please print)		Official Title		
nil Kumar Nakhw			Proprietor		
Signature	A 1 la		Telephone No.	Date (dd-mm-yyyy)	
/	fruit bennas Ne	akhwa	519-293-3411	27-09-	



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

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.	
Gasoline stored in underground steel cathodicaly protected tanks 2 X 25000 I, 1 X 15000 I.	
Diesel Fuel stored in 4500 I aboveground double walled steel tank.	
Description of fire and emergency equipment indicated on facility site map.	
Fire Extinguisher located in building and at storage tank. Also a fire extinguisher located at Gasoline Pump Island.	

List of fire protection controls (e.g., fire detection systems, fire notification systems, alarm systems, automatic shut off devices, fu and describe their function, use and operation. Manual Fire alarm button located in building security panel located inside building enterance. Electrical panel is marked for power shut down	
system. There is an emergency shut down level located at the tank which closes the I.S.C. Valve (Internal Shutoff Control Valve). It is closed	
Cabinate door is closed by design. There is a Fusible Link located on the I.S.C. Valve which severs if exposed to heat shuting the valve off.	
Maintenance and testing schedule for fire protection controls and devices. The tank I.S.C. Valve is opened and visually inspected daily at opening. The system is inspected yearly by the propane supplier and a reco	d is kept
of the inspection. Repairs are recorded. The system is also inspected at least yearly by TSSA inspectors and orders are issued for repairs.	Repairs are
completed in a timely manner. Fire extinguishers are inspected annually.	
Automatic Shut off valves are inspected yearly.	

Name of person completing this form (please print) Anil Kumar Nakhwal	Official Title Proprietor		
Signature Anil Kermay Makhul	Telephone No. 519-293-3411	Date (dd-mm-yyyy) 27-09-2011	



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

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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Conta	act	5. Facility 24-Hour Contact Person	, in
Name Anli Kumar Nakhwai	For Office Use - Party No.	Name Anil Kumar Nakhwal	For Office Use - Party No.
Official Title Proprietor		Official Title Proprietor	
Telephone No. Fax N 519-293-3411 519-29	lo. 93-3411	Cell No. 519-8519668 Fax No. 519-293-3	3985
E-mail япакhwal@yahoo.com		E-mail anakhwal@yahoo.com	
Role and responsibilities in emergency		Hole and responsibilities in emergency	
Initiate Emergency calls and advise applicable	parties of emergency.	Initiate Emergency calls and advise applicable par	rties of emergency.
2. Facility Contact Personnel - Alternate	Contact	6. Name of Facility Manager	
Name Sushil Nakhwal	For Office Use - Party No.	Name Anil Kumar Nakhwal	For Office Use - Party No.
Official Title Secretary		Official Title Proprietor	
Telephone No. 519-828-3464 519-83	la. 28-3464	Telephone No. Fax No. 519-293-3411 Fax No.	3411
E-mail		E-mail anakhwal@yahoo.com	
Role and responsibilities in emergency		Role and responsibilities in emergency	
Initiate Emergency calls and advise applicable primary contact is unavailable.	parties of emergency if	Initiate Emergency calls and advise applicable parties of emergency.	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	11.4 (.41.)
Transmission in additional		VI Topano Sappinor Roy Santast I Sissin	13-13134.
Name Ron Whitmore	For Office Use - Party No.	Name Allen McRobert	For Office Use - Party No.
Name	For Office Use - Party No.	Name	For Office Use - Party No.
Name Ron Whitmore Official Title Fire Chief Telephone No. Fax N	IN EAST NOTES	Name Allen McRobert Official Title	For Office Use - Party No.
Name Ron Whitmore Official Title Fire Chief Telephone No. Fax N	lo.	Name Allen McRobert Official Title Owner Telephone No. Fax No.	For Office Use - Party No.
Name Ron Whitmore Official Title Fire Chief Telephone No. Fax N 519-293-3360 519-28	lo. 93-3860	Name Allen McRobert Official Title Owner Telephone No. 519-246-1019 Fax No.	For Office Use - Party No.
Name Ron Whitmore Official Title Fire Chief Telephone No. 519-293-3360 E-mail Role and responsibilities in emergency Liaison with the property owner. Administrator of	lo. 93-3860	Name Allen McRobert Official Title Owner Telephone No. 519-246-1019 E-mall Role and responsibilities in emergency Work with Local Fire Services when requested.	For Office Use - Party No.
Name Ron Whitmore Official Title Fire Chief Telephone No. 519-293-3360 E-mail Role and responsibilities in emergency Liaison with the property owner. Administrator of advisor to municipal council.	lo. 93-3860	Name Allan McRobert Official Title Owner Telephone No. 519-246-1019 E-mall Role and responsibilities in emergency Work with Local Fire Services when requested.	For Office Use - Party No.
Name Ron Whitmore Official Title Fire Chief Telephone No. 519-293-3360 519-29 E-mail Role and responsibilities in emergency Liaison with the property owner. Administrator of advisor to municipal council. 4. Local Fire Services - Alternate Contact Name	of the fire services and	Name Allan McRobert Official Title Owner Telephone No. 519-246-1019 E-mall Role and responsibilities in emergency Work with Local Fire Services when requested. 8. Municipal Contact Name	For Office Use - Party No.
Name Ron Whitmore Official Title Fire Chief Telephone No. 519-293-3360 E-mail Role and responsibilities in emergency Liaison with the property owner. Administrator of advisor to municipal council. 4. Local Fire Services - Alternate Contact Name Scott Jones Official Title District Fire Chief Telephone No. Fax N	of the fire services and	Name Allan McRobert Official Title Owner Telephone No. 519-246-1019 E-mall Role and responsibilities in emergency Work with Local Fire Services when requested. B. Municipal Contact Name LINDA CREAGHE Official Title	For Office Use - Party No.
Name Ron Whitmore Official Title Fire Chief Telephone No. 519-293-3360 E-mail Role and responsibilities in emergency Liaison with the property owner. Administrator of advisor to municipal council. 4. Local Fire Services - Alternate Contact Name Scott Jones Official Title District Fire Chief Telephone No. Fax N	of the fire services and For Office Use - Party No.	Name Allan McRobert Official Title Owner Telephone No. 519-246-1019 E-mall Flole and responsibilities in emergency Work with Local Fire Services when requested. 8. Municipal Contect Name LINDA CREAGHE Official Title Clerk Telephone No. Fax No.	For Office Use - Party No.
Name Ron Whitmore Official Title Fire Chief Telephone No. 519-293-3360 E-mail Role and responsibilities in emergency Liaison with the property owner. Administrator of advisor to municipal council. 4. Local Fire Services - Alternate Contact Name Scott Jones Official Title District Fire Chief Telephone No. 519-617-3574 E-mail	of the fire services and For Office Use - Party No.	Name Allan McRobert Official Title Owner Telephone No. 519-246-1019 E-mall Role and responsibilities in emergency Work with Local Fire Services when requested. 8. Municipal Contact Name LINDA CREAGHE Official Title Clark Telephone No. 519 294 6244 E-mail	For Office Use - Party No.

Name of person completing this form (please print)	Official Title
Anil Kumar Nakhwal	Proprietor
Signature And kuna Makhul	Telephone No. 519-293-3411 Date (dd-mm-yyyy) 7-09-1



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

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

2. Additional Safety Measures

Describe any other measures in place at the facility that exceed the minimum Code and Standards requirements.
Facility meets all applicable codes and regulations.

Name of person completing this form (please print) Anil Kumar Nakhwal	Official Title Proprietor	
Signature Anil Kerman Nakhusal	Telephone No. 519-293-3411	Date (dd-mm-yyyy) 27-69-2011

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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 Res	ponse Plan and Procedures provided to facility key contacts.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Propane Training Institute
14/09/2011	Print Name of Instructor: Charles Hammond
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
•	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
77277	Print Name of Instructor:
Training on the facility's Em	ergency Management Procedures provided to staff.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Propane Training Institute
14/09/2011	Print Name of Instructor: Charles Hammond
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
Training Date (dd-mm-yyyy)	Print Name of Instructor:
T. Char Date (University)	Print Name of Training Provider:
Training Date (dd-mm-yyyy)	Print Name of Instructor:
On-site specific training pro	ovided to certificate holders / persons with Records of Training.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Propane Training Institute
14/09/2011	Print Name of Instructor: Charles Hammond
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:

Name of person completing this form (please print) Anil Kumar Nakhwal	Official Title Proprietor	
Signature Anil Kerman Nakhwal	Telephone No. 519-293-3411	Date (dd-mm-yyyy) 27-09-2011



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

4. Emergency Training Plan for Coming Year

Training on Emergency Re	sponse Plan and Procedures provided to facility key contacts.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Propane Training Institute
14/09/2011	Print Name of Instructor: Charles Hammond
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 Er	nergency Management Procedures provided to staff.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Propane Training Institute
14/09/2011	Print Name of Instructor: Charles Hammond
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
V V	Print Name of Instructor:
On-site specific training pr	ovided to certificate holders / persons with Records of Training.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Propane Training Institute
14/09/2011	Print Name of Instructor: Charles Hammond
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:

Name of person completing this form (please print)	Official Title	
Anil Kumar Nakhwal	Proprietor	
Signature And Kerman Makhurof	Telephone No. 519-293-3411	Date (dd-mm-yyyy) 91-09-24/



Warnings and Actions

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

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

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

Either the proprietor, or in his absence the on duty employee shall contact Emegency Services vis a 911 call to inform Emergency Services in the event of a

emergency. Also, the the proprietor, or in his absence the on duty employee shall ensure that the facility is evacuated and persons are directed to the sale
area located across the street in front of the bank. Also the proprietor, or in his absence the on duty employee shall ensure all neighbours would be notified of
the danger.
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).
The proprietor, or in his absence the on duty employee shall ensure that every person on the grounds is vocally instructed to evacuate to the area
indicated as the safe area across the street at the bank entrance. Will call emergency services by cell phone or phone from the phone located in the bank
building used as the safe area. Also the residential neighbour located to the west of the facility and the commercial buildings to east and the industrial zone
to the south would be notified in person of the potential hazard and directed to the safe area.
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).
The proprietor or in his absence an emplyee shall call emergency services via phone immediately upon discovery of any hazard that may result in a imminent
dangerous situation. The phone lines located in the safe area or via cell phone which ever is closest to the person shall be used.
Describe provisions for fire department entry when there are no operations or staffing at the propane site.
Access to the single pressure vessel is open to Main Street as well as the rear of the property is not fenced and access is open and not gated at any time.
In the event Emergency Services needs access to the building and it is locked, the entry door consists of a window which could be breached with minimal
effort allowing EMS access to the building. In the event that EMS needs to shut down power to the refilling station, the circuit panel is located at the rear right
hand corner of the interior of the building and is clearly marked with a large shut off sign.
Describe how the licence holder will ensure continual flow of updated information to authorities.
Depending on the nature of the emergency the license holder shall notify applicable authorities by telephone.
How long will it take the facility liaison person to respond to the site.

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) Anil Kumar Nakhwal	Official Title Proprietor		
Signature Anil Kerman Nakhwef	Telephone No. 519-293-3411	Date (dd-mm-yyyy) 27-09-201/	

10 minutes



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

Date (dd-mm-yyyy)

27-09-2011

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

	APAIIAIA A. PINIPIIAIPIIAI VIIA IIIPI VIIPIII	OLOHOU D. Emergeno / Alb I Hall / Hal				
	The licence holder will complete Section B in consultation with the local Fire Services. 6. Building and Site Security and Procedures					
<u></u>	6. Building and Site Security and P	Tucedures				
		Yes No				
1.	Does the propane location have controlled access to limit unnecessary risk and (lock out procedures)?	d entry				
2.	Is there adequate night lighting at the site?	✓				
3.	Are procedures in place that ensure access routes, aisles, storage area, filling a and the grounds are kept clear from unwanted materials?	areas				
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?	d V				
5.	Does the facility have procedures that include a process to isolate and purge a overfilled propane cylinders?	any				
6.	Are weighing systems validated for accuracy?	✓				
7.	Are storage areas clearly marked with the vessels' capacity status (i.e., filled, e purged and other hazardous materials)?	empty, ✓				
8.	Are quality assurance procedures in place to ensure that all valves are closed a the propane cylinders are filled?(e.g., QCC valves)	after				
9.	Is the schedule of maintenance and testing activities retained on site?	✓				
	7. Water Supply					
	propane licence holder should work with the local fire department to determine with the propane facility's location.	water Yes No				
1.	Is a pressurized water system available at the propane facility site?	\checkmark				
2.	Can the municipal fire department pump 375 GPM (1420 LPM) of water at the location?	nis 🗸				
3.	What is the unobstructed distance to the closest water supply that could be us firefighting activities? (distance in metres only)	sed for 51 meter				
4.	What is the unobstructed distance to the closest approved water supply with yound access if there are no hydrants? (distance in metres only)	n/a				
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.						
Nar	Name of person completing this form (please print) Official Title					
1		Proprietor				

Telephone No.

519-293-3411

Signature

Anil Kumas Nakhwal

Technical Standards and Safety Authorit www.tssa.org

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 3300 Bloor Street West

 Toronto Ontario M8X2X4
 Toronto Ontario M8X2X4

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

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?

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

Fire services comments, if any:
I have reviewed the Emergency and Preparedness Plan and it seems reasonable for this location.

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.			
Print name Local Fire Services Name Ron Whitmore	Signature Kar Militar	Date (dd-mm-yyyy) 28/09/2011	

Name of person completing this form (please print) ANIL KUM AR NAKHWAL	Official Title President	
Signature And kerner Nakhal	Telephone No. 519-293-3411	Date (dd-mm-yyyy) 21 oct 11



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

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.
- The maximum volume, types and storage location of hazardous materials.
- Location of permanent structures on site.
- 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.
- Location of emergency shut off/shut down switches/valves.

Map of Surrounding Area.

The licence holder will submit a scaled agrial 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.
- GPS co-ordinates of the single largest vessel.
- 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
- 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-r 26-09-2011	пт-уууу)	Capacity of single largest propane 2000	e storagevessel (USWG)
Tank setback coordinates. Front:	13,4	map. Right side property line;	
Rear:	3.5	Left side property line:	28
GPS coordinates of single	largest vessel: 43deg	08'52,79"N 81deg32'17.23	

Name of person completing Anil Kumar Nakhwal	this form (please print)		Official Title Proprietor	
Signature	And Klenn	Makhel	Telephone No. 519-293-3411	Date (dd-mm-yyyy) 27-09-1



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Technical Standards and Safety Act

Propane Storage and Handling Regulation

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
3,780	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 x (1.524 x C) 1/3

D = Distance to overpressure of 1 psi (meters)

C= Tank Total Capacity in USWG

Parameters:

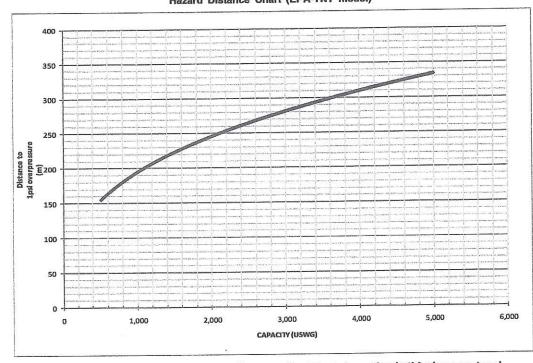
Density of Propane is 0.5033 kg per litre @ 15 C

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)



Name of person completing this form (please print) Anil Kumar Nakhwal	Official Title Proprietor	
Signature Anil Kumar Nakhwel	Telephone No. 519-293-3411	Date (dd-mm-yyyy) 27-09-2011



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

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

Bui	Idings 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")			
Name:	dings or parks or golf courses 14 y 19 n M Secol Storage 13 0 Mais Street 4:154 Craig Province Postal Code			Х		<u>38,6</u> m	
	uilding units specifically permanent single family dwellings, condominiums, and apartments.				×	<u>28,4</u> m	
Name:	building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. The Mgs Cnic Lodge Hall 131 Main Street Ailsa Craig Province OV. Postal Code	r		5	X	<u>33,8</u> /m	
Name: Address:	Duilding units – continuous occupancy specifically hotels, campgrounds, and resorts. 「ソッカル Province Postal Code	Х		2		m	
institutions, a Name: Address:	itutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health and prisons. Nehe Province Postal Code	×				m	
Name: Address:	esponders specifically fire stations, ambulance stations, and police stations. V N E	×				m	

Name of person completing this form (please print)				Official Title	Official Title			
Anil Kumar Nakhwal				Proprietor	Proprietor			
Signature	Anil	Kumay	Nakhuf	Telephone No. 519-293-3411	Date (dd-mm-yyyy) 21 - 09 - 2011			

^{*} For multi-unit buildings, count each unit as "1".



14th Floor - Centre Tower 3300 Bloor Street West Standards and Toronto Ontario M8X2X4
Safety Authority Fax: 416.231.4078 Customer Service: 1.877.682.8772

2012 Application for Renewal of Level 1 Propane Licence Technical Standards and Safety Act

Propane Storage and Handling Regulation

CAPACITY INFORMATION A. Fixed Tanks Capacity Serial Number **PSIG** 2000 45606 20,3-7 250 Tank 1: Tank 2: Tank 3: 2000 Total Fixed Capacity: B. Portable Storage Total Capacity in USWG Quantity Capacity in USWG Cylinder Size 123.9 0 # 420 0 0 29.5 #100 11.75 0 # 40 28.86 9.62 # 33.3 17.6 8.8 #30 时号 5.8 # 20 2.9 0 #10 1.5 #5 04.46 Line A **Total Cylinder Capacity** Tanks Stored On-site Not Connected for Use Total Capacity in USWG Quantity Tank Size In USWG Line B Total Tank Capacity 2104.4 Total Portable Capacity. Line A plus Line B: _ C. Mobile Tanks Total Capacity in USWG Quantity Tank Size In USWG Type Tankers

You are required by law to notify TSSA of any change of information contained in the Risk and Safety Management Plan within 15 days.

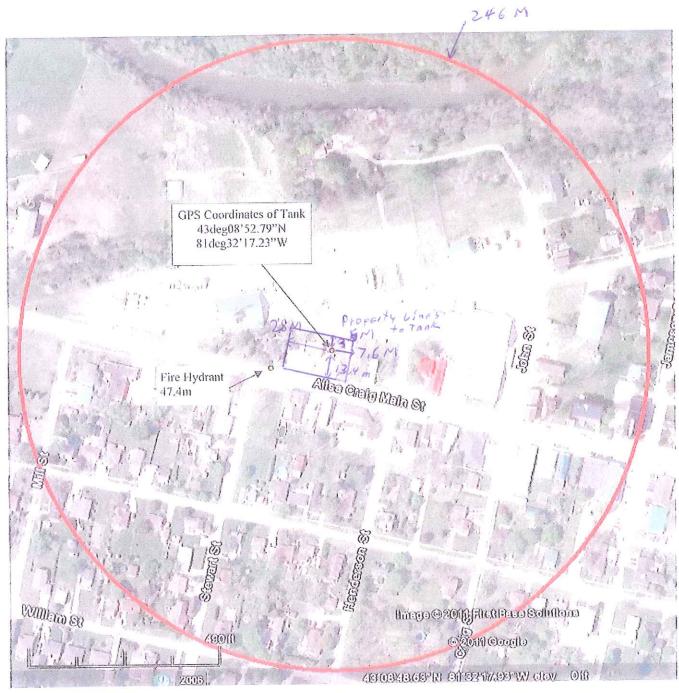
Declaration: I am aware that it is an offence to g I hereby declare that the information I ha	give false information in this docume ave given here is true and complete.	nt and		
Print name of person completing this form. ANU KUMAR NAKHWAL	Official Title			
Signature And Krawan Norkhard	Telephone No. 5/9-293 34(1)	Date (dd-mm-yyyy) 12つアード2012		

Cargo Liners

Total Mobile Tank Capacity

Ailsa Craig Location—Aerial Photo

DRAWN OCT ZOII - PHOTO ZOCG ORAWN BY CANTLES HUMMOND



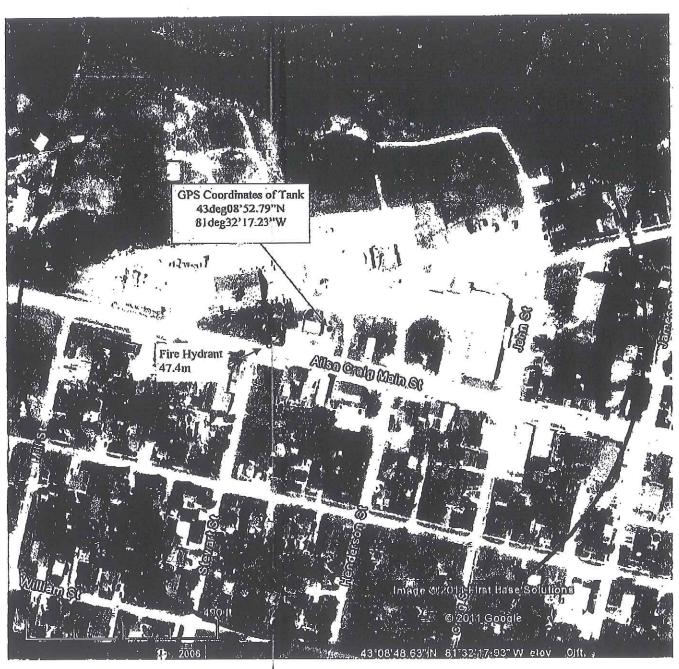
NOTES! NO SPECIFIED SENSITIVE INSTITUTIONS

MUNICIPAL CONTACT: LINDA CREAGHE - CLERK

THE MUNICIPALITY OF NORTH MIDDLESEX 519 294 - 6244

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The Municipality of Aerial Photo Morth Middle Sex



Muncipality contact - LINDA CREAGHE

CLERK (519:294-6244)

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