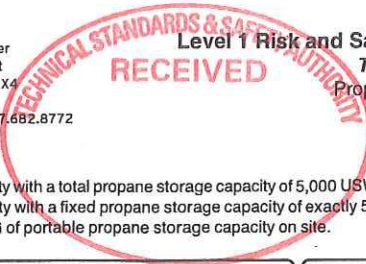




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Customer Service: 1.877.682.8772



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.

<p>Failure to fully complete this form may result in rejection. Making a false statement may result in a fine or prosecution under the <i>Technical Standards and Safety Act</i></p> <p>Licence Number 0033465001-C</p> <p>Check applicable type of propane operations.</p> <p><input checked="" type="checkbox"/> Cylinder <input checked="" type="checkbox"/> Motor Fill <input type="checkbox"/> Filling Plant <input type="checkbox"/> Card/Keylock</p> <p>Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.</p>	<p style="text-align: center;">For Office Use Only</p> <div style="border: 1px solid black; height: 80px; width: 100%; background-color: black;"></div>
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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 MR. GAS LIMITED	Ontario Corporation No., if applicable
	Operator Name (if different from above)	
	Telephone No. 613-824-6777	Fax No. E-mail Address 613-824-5235
B	Street No. 1-1420	Street Name, Lot / Concession No. YONVILLE DRIVE
	Town / City or Township / County ORLEANS	Province Postal Code ONTARIO K1C 7B3
C	Mailing address if different from above.	
	Street No.	Street Name, Lot / Concession No.
	Town / City or Township / County	Province Postal Code

Information on Container Refill Centre or Filling Plant		
Location of facility.		
D	Street No. 154	Street Name, Lot / Concession No. Nearest major intersection Highway 15
	Town / City or Township / County SMITHS FALLS	Province Postal Code ONTARIO K7A 1Y57

Name of Licence Holder MR. GAS LIMITED	
Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). GILLES GUINDON	ROT type PUMP ATTENDANT
Municipality (or municipalities if the facility or its hazard distance touches multiple borders) TOWNSHIP OF RIDGEAU LAKES	
Hours of operation. <div style="background-color: black; width: 100%; height: 40px;"></div>	

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.

Name of Licence Holder MR GAS LIMITED	Signature 	Date (mm-dd-yyyy) 01/14/2012
Name of Senior Management person as defined in the Regulation holding the Record of Training GILLES GUINDON		



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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)

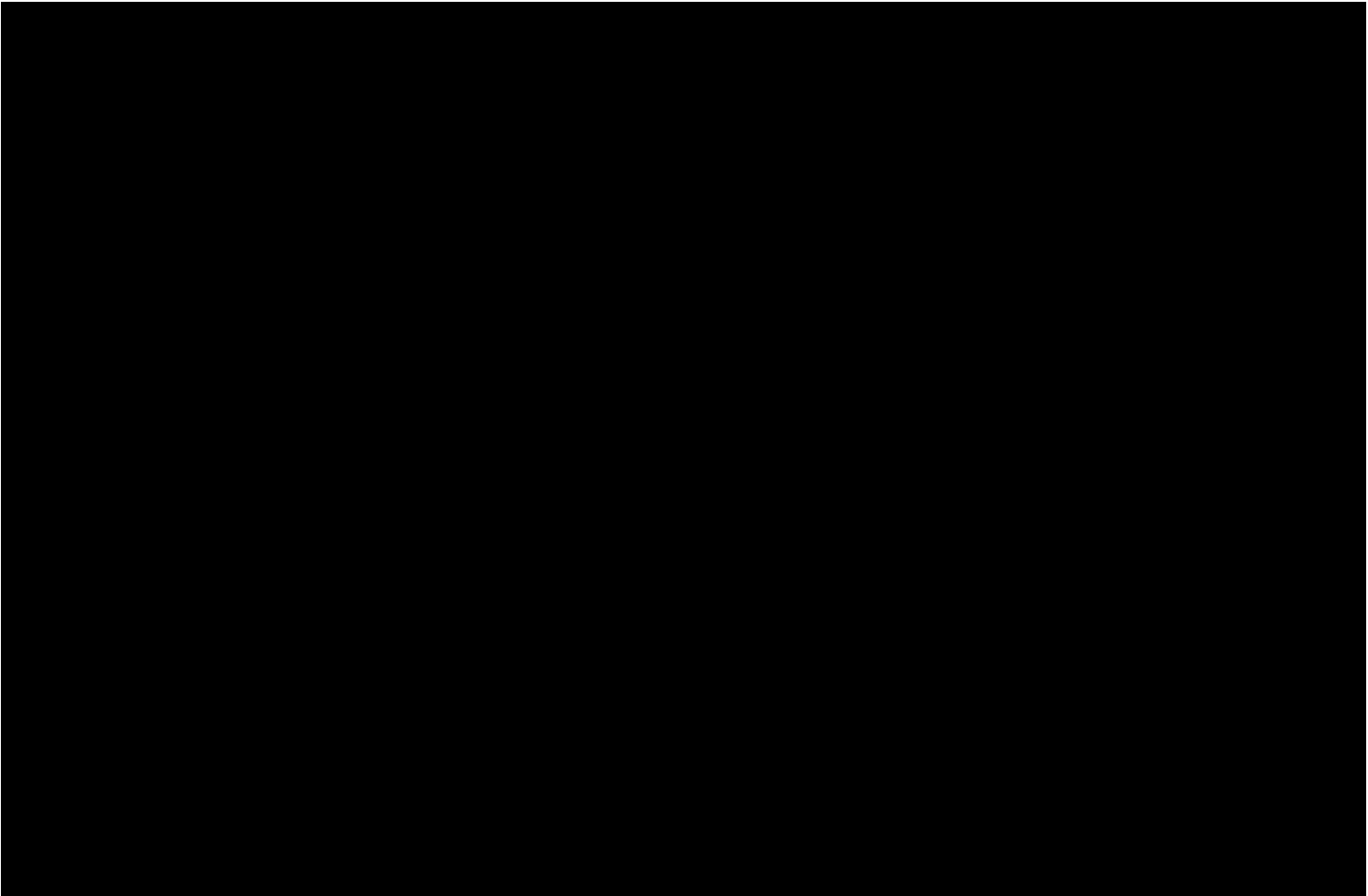
Indicate the year the facility was established. 1975 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.

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

	PSIG	Serial Number
Tank 1:	<u>250</u>	<u>129-5</u>
Tank 2:	_____	_____
Tank 3:	_____	_____

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: 2000 Portable: 34.8 Mobile: 0



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)	<u>Gilles Guindon</u>	
Signature	Official Title	Date (dd-mm-yyyy)
	<u>Vice President / General Manager</u>	<u>16/01/2012</u>
	Telephone No.	
	<u>613-804-6777</u>	



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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 Propane Supplier(s) <i>Superior Propane</i>		For Office Use - Party No. [REDACTED]	
Street No. <i>63</i>	Street Name / 911 Number / Address, if applicable <i>Roydon Place</i>		
Town / City or Township / Country <i>Ottawa</i>		Province <i>Ontario</i>	Postal Code <i>K2E 1A3</i>
Telephone No. <i>613-727-8807</i>	Fax No. <i>613-727-1326</i>	Contact Name <i>Mike Mullins</i>	
E-mail <i>guardian@superiorpropane.com</i>			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		For Office Use - Party No. [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.	
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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Name of person completing this form (please print) <i>Gilles Guindon</i>	Official Title <i>Vice President / General Manager</i>	
Signature 	Telephone No. <i>613-824-6777</i>	Date (dd-mm-yyyy) <i>16/01/2012</i>



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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.

23,700 litre fuel tank (underground) - 35,000 litre fuel tank (underground)

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

2- Fire Extinguishers (1) located at pump island, (1) located at propane pump
No Smoking / Turn off ignition signs on propane housing, + pump island.

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 located in service station building to shut off power to propane pump.
Emergency shut off switch located at propane cylinder housing

Maintenance and testing schedule for fire protection controls and devices.

Annual inspection of fire extinguishers by third party.
Quarterly inspection of fire extinguishers by Mr Gas Ltd
Daily inspection of propane shut off switch and fusible link by service station operator.

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Name of person completing this form (please print)		Official Title	
Gilles Guindon		Vice President / General Manager	
Signature		Telephone No.	Date (dd-mm-yyyy)
		613-824-6777	10/01/2012



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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 Contact		5. Facility 24-Hour Contact Person	
Name Bachir Nasrallah	F. No. [Redacted]	Name Bachir Nasrallah	F. No. [Redacted]
Official Title Station Manager		Official Title Station Manager	
Telephone No. 613-451-1400	Fax No. 613-283-2203	Cell No. 613-451-1400	Fax No. 613-283-2203
E-mail mrgas014@mrgas.com		E-mail	
Role and responsibilities in emergency Contacts emergency authorities - Evacuates site if required		Role and responsibilities in emergency Contacts Emergency authorities	

2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Salwa Nasrallah	F. No. [Redacted]	Name Bachir Nasrallah	F. No. [Redacted]
Official Title Station Operator		Official Title Station Manager	
Telephone No. 613-283-8074	Fax No. 613-283-2203	Telephone No. 613-451-1400	Fax No. 613-283-2203
E-mail mrgas014@mrgas.com		E-mail mrgas014@mrgas.com	
Role and responsibilities in emergency Secondary Contact		Role and responsibilities in emergency Contacts emergency authorities Enables evacuation plan	

3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Chief Jay DeBernardi	For Office Use - Party No.	Name Superior Propane	For Office Use - Party No.
Official Title Fire Chief - of Rideau Lakes	E-mail fire.jay@rideau-lakes.on.ca	Official Title Propane Supplier	E-mail guardian@superiorpropane.com
Telephone No. 613-928-2251 ext 237	Fax No. 613-928-3097	Telephone No. 613-727-8807	Fax No. 613-727-1326
Role and responsibilities in emergency Primary Responder		Role and responsibilities in emergency	
Fire Services Address 1439 County Rd 8, Delta, ON K0E-2G0		Propane Supplier Address 63 Royden Place, Ottawa, ON K2E-1A3	

4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Joel Gorman	For Office Use - Party No.	Name Dianna G Breese	F. No. [Redacted]
Official Title Fire Chief - Smiths Falls	E-mail	Official Title Municipal Clerk	
Telephone No. 613-283-5869	Fax No.	Telephone No. 613-928-2251 Ext 224	Fax No. 613-928-3097
Role and responsibilities in emergency Primary Responder		E-mail dianna@twprideau.lakes.on.ca	
Fire Services Address 77 Beckwith St North, Smiths Falls, ON		Municipality Name and Address Township of Rideau Lakes - 1439 County Rd 8 RR1 Delta, ON K0E-2G0	

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) Gilles Guindon	Official Title Vice President / General Manager
Signature 	Telephone No. 613-824-6777
	Date (dd-mm-yyyy) 16/01/2012



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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.

- Daily equipment inspection by propane pump attendants
(Please refer to attached form "Daily Propane Storage Vessel and equipment checklist")

- Pump attendants are required to inspect equipment for deficiencies and report any findings

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Name of person completing this form (please print)	Gilles Guindon		Official Title	Vice President / General Manager	
Signature			Telephone No.	613-824-6777	Date (dd-mm-yyyy)
			4/6/01/2012		



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Technical Standards and Safety Act
Propane Storage and Handling Regulation

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) <i>20/12/2011</i>	Print Name of Training Provider: <i>Kathy Harper</i>
	Print Name of Instructor: <i>Kathy Harper</i>
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) <i>20/12/2011</i>	Print Name of Training Provider: <i>Bochir Nasrallah</i>
	Print Name of Instructor: <i>Bochir Nasrallah</i>
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) <i>20/12/2011</i>	Print Name of Training Provider: <i>Kathy Harper</i>
	Print Name of Instructor: <i>Kathy Harper</i>
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:

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) <i>Giles Guindon</i>	Official Title <i>Vice President / General Manager</i>
Signature 	Telephone No. <i>613-824-6777</i>
	Date (mm-dd-yyyy) <i>Nov 01/12/2012</i>



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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)

4. Emergency Training Plan for Coming Year

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

Target Date (dd-mm-yyyy) 20/11/2012	Print Name of Training Provider: Kathy Harper
	Print Name of Instructor: Kathy Harper
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) 09/09/2012	Print Name of Training Provider: Bachir Nasrallah
	Print Name of Instructor: Bachir Nasrallah
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:

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

Target Date (dd-mm-yyyy) 20/11/2012	Print Name of Training Provider: Kathy Harper
	Print Name of Instructor: Kathy Harper
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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Name of person completing this form (please print) Gilles Guindon	Official Title Vice President / General Manager
Signature 	Telephone No. 613-824-6777
	Date (mm-dd-yyyy) 01/16/2012



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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

Warnings and Actions

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

Bachir Nasrallah is facility 24 hour response contact and in the event of an emergency will notify authorities as outlined in the emergency procedures plan. Authorities will be contacted using 911 service and Superior Propane 1-877-873-2407.

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).

After a warning is issued the Facility Manager, Bachir Nasrallah, will ensure all power is shut off to propane dispenser vessel and proceed to notify Will's Transpore (immediate neighbors) to evacuate to defined point (Far side lot or Leisure Days R.V Centre)

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).

By utilizing the emergency response procedures template provided by Superior Propane, the station operator will assess the situation and place a call to authorities by telephone after shutting down power to the dispenser.

Describe provisions for fire department entry when there are no operations or staffing at the propane site.

The local fire department can access the site without impedence throughout the entire day. In the event the station operator/staff were not at the site, there would be no limitations to site access.

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

Bachir Nasrallah (24 hour contact) will provide site details/propane vessel details to emergency services as required. Site operator is equipped with cellular phone and can provide information to authorities at all times.

How long will it take the facility liaison person to respond to the site.

Facility liaison person is out the site during hours of operation. If an emergency occurred after hours of operation take approximately 45 minutes 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)	Gilles Guindon		Official Title	Vice President / General Manager	
Signature		Telephone No.	603 824-6777	Date (mm-dd-yyyy)	01/16/2012



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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.

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)	APPROX 300m SAITHS FALLS HYDRANT	
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)	APPROX 300m	

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Name of person completing this form (please print)	Gilles Guindon		Official Title	Vice President / General Manager	
Signature			Telephone No.	613-824-6777	Date (mm-dd-yyyy)
					01/16/2012



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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?

Yes No

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

Fire services comments, if any:

CONCERNS OVER NO CONTACT, NOR LISTED PROCEDURE TO FOLLOW IMMEDIATELY IF EMERGENCY WARNING IS REQUIRED AND LISTED FACILITY 24HR REPRESENTATIVE IS UNREACHABLE.

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)

THIS SITE IS LOOKING AT REDESIGN & DEVELOPMENT IF THAT OCCURS THIS REVIEW WILL BE WITHDRAWN.

LOCAL FIRE SERVICES

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

Print name JAY DEBERNARDI Local Fire Services Name	Signature 	Date (dd-mm-yyyy) 12/01/2012
---	---------------	---------------------------------

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) Gilles Guindon	Official Title Vice President / General Manager
Signature 	Telephone No. 63-824-6777
	Date (mm-dd-yyyy) 01/16/2012



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Level 1 Risk and Safety Management Plan (RSMP)
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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)	Capacity of single largest propane storage vessel (USWG)
16/11/2011	2000
Tank setback coordinates. Indicate placement on the map.	
Front: 17.68 meters	Right side property line: 3.048 meters
Rear: 14.02 meters	Left side property line: 30.048 meters
GPS coordinates of single largest vessel: N 44 53.339 W 76 01.976	

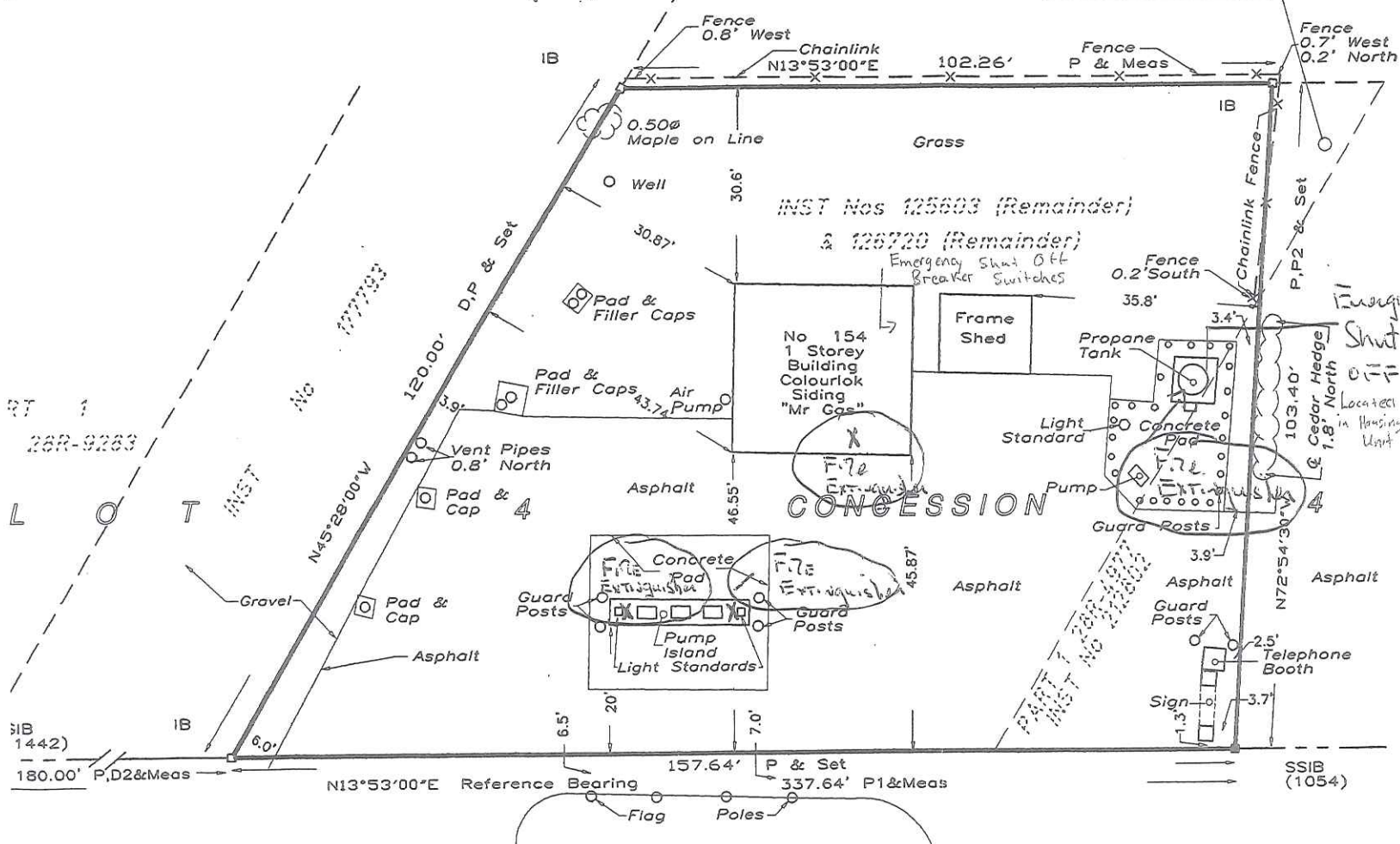
Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

Name of person completing this form. (please print)	Official Title	
Gilles Guindon	Vice President / General Manager	
Signature	Telephone No.	Date (dd-mm-yyyy)
	613-824-0777	16/01/2012

No Smoking / Turn OFF Ignitions
Signs AT the propane Facility
AND the pump island

Please Refer to Additional Site
Plan for Location / Capacities
INST No 41125 of Hazardous
Materials

PART 2, 28R-4977
INST No 212801

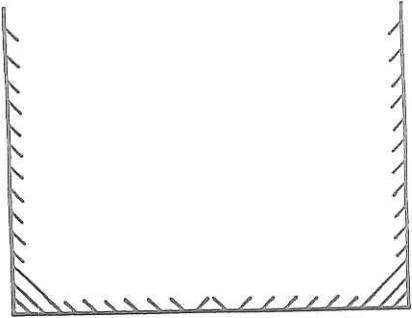
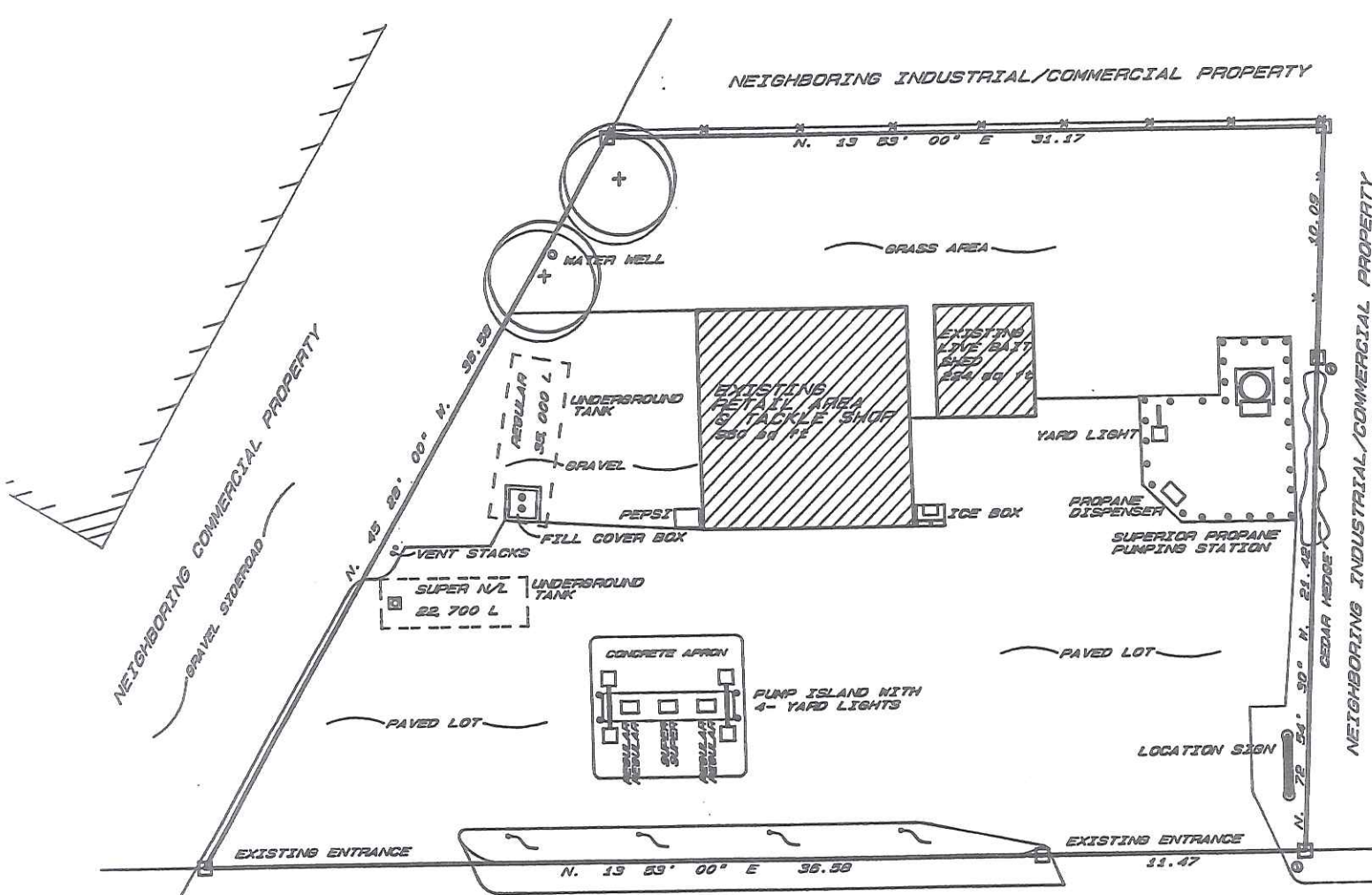


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HIGHWAY

Legend:
 ■ SIB
 □ SIB
 ○ SIB
 X CM
 CC (SU)
 Wrt
 Acc
 Meas
 X-X
 INST
 (1442)
 (1054)
 D
 P2
 P1



LEGAL DESCRIPTION
 PART OF LOT 4,
 CONCESSION 4
 TOWNSHIP OF ELMSLEY SOUT
 COUNTY OF LEEDS

PROPERTY AREA = 0.308 acres
 COMMERCIAL ZONED PROPERTY

CIVIL ADDRESS
 R. R. #1, LOMBARDY ROAD
 SMITHS FALLS, ONTARIO
 K7A 5B8

KING'S HIGHWAY NO. 15

EXISTING SITE PLAN SETUP

SS#14

LAST REVISED MAY '94



TOWNSHIP OF RIDEAU LAKES

Lombard St

Ferrara Drive



Legend

- | Imagery | |
|------------------------|-----------------------|
| Transportation Numbers | Limerick Compartments |
| Transportation Labels | Waste Disposal |
| Transportation Network | Closed |
| | Open |
| Provincial Hwy 4 Ln | Drainage |
| Provincial Hwy 2 Ln | Railway |
| County Rd | Land Parcels |
| Arterial St | 2008 Imagery |
| Local St | |
| Thousand Islands Pkwy | |
| Municipal Rd | |
| Private Rd | |
| Water Bodies | |
| Drainage | |

Scale: 1mm = 4.57metres.

Lot 4 - Concession 4

Map Printed On {2011-11-16 15:04}

Disclaimer This map is illustrative only. Do not rely on it as being a precise indicator of routes, locations of features, nor as a guide to navigation. Designed and produced by: United Counties of Leeds & Grenville. Source of information: UTM, Grid Zone 18, NAD 1983, with data supplied under licence by members of the Ontario Geospatial Data Exchange (OGDE), and Teranet inc. Queens Printer of Ontario.

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OnPoint

Property Line

Location: 15 Lombard St Hwy 15, Smiths Falls, Ontario

Prepared: December 16, 2011

2000 USWG Vertical Tank
 Tank setbacks: 3.0478 m North, 17.68 m East, 30.048 m South, Headm West
 Radius = 255.92 metres. GPS Coordinates 44.53.339 N, 76.01.976 W
 Municipality: Township of Rideau Lakes Municipal Clerk: Dianna G. Breese

Address: Township of Rideau Lakes,
 City Clerks office, 1439 County Rd B
 PRI, Delta, ON K0E-1G0



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X2X4
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

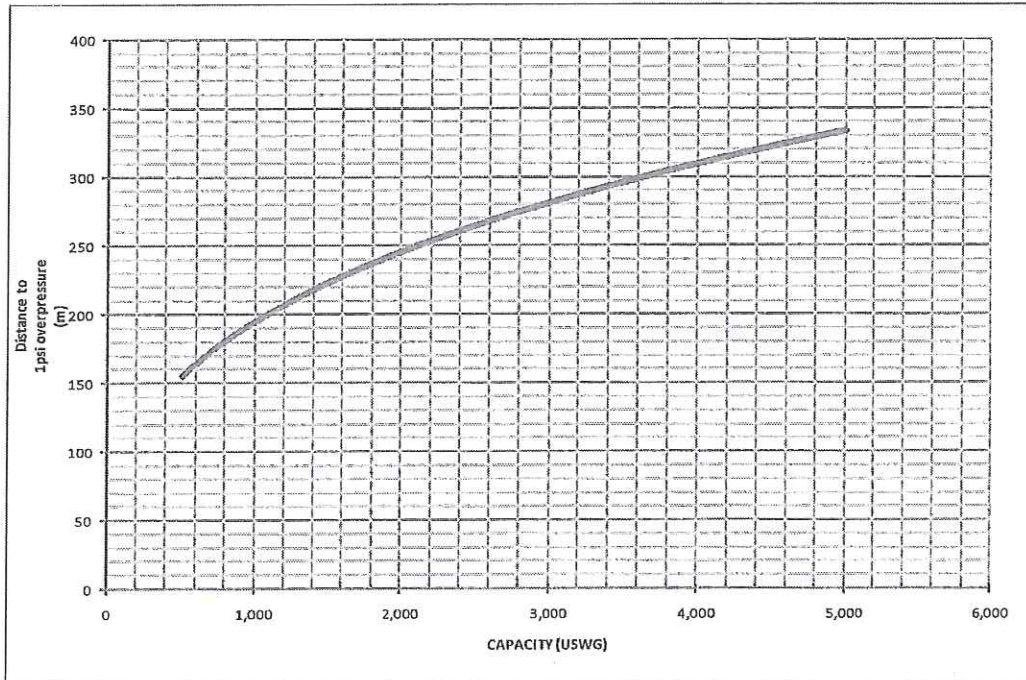
Table 1: Distance Table

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)



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)	Gilles Guindon		Official Title	Vice President / General Manager	
Signature			Telephone No.	613-824-6777	Date (mm-dd-yyyy)
					01/16/2012



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SECTION C: SUBMISSIONS (cont'd)
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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				0 m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				0 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Gill's Transfer Ltd</u> Address: <u>146 Hwy 15</u> City: <u>Smith's Falls</u> Province <u>ON</u> Postal Code <u>K7A 4T2</u>				X	9.2 m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				0 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				0 m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				0 m

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

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Signature 	Telephone No. <u>613-824-6777</u>
	Date (mm-dd-yyyy) <u>01/16/2012</u>



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SECTION C: SUBMISSIONS (cont'd)

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Portable Storage Additional Information Sheet

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	6	34.8
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			34.8

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
	N/A	
Total Tank Capacity		

Total Cylinder Capacity	
Total Tank Capacity	
Total Portable Capacity	

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			Date (mm-dd-yyyy)	01/16/2012