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Technical 14th Floor - Centre Tower 3300 Bloor Street West Safety Authority Forcet Ontor 10 NOX 2X4 Force 16.2314.903 Customer Service: 1.877.682.8772

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

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The Undersigned applies to TSSA for a review for an RSMP under Ontario's Technical Standards and Safety A Propane Storage and Handling Regulation. Company Neme A Picnic Island Resort Ltd. Operator Name (if different tions eleve) Same Telephone No. TOS-756-1405 Princi Island Resort Ltd. TOS-756-1405 Princi Island Resort Ltd. TOS-756-1405 Princi Island Resort Ltd. Town / City or Towneshy / County Honey Harrbour Mailing address if different from above. Steel No. Street Name / I'll Number / Address, if applicable Trown / City or Towneshy / County Princi Island Road Pol Box 50 Town / City or Towneshy / County Princi Island Road Pol Box 50 Town / City or Towneshy / County Principles on or Container Refits Centre or Filling Plant Location of facility. Smoothia. Street Name / I'll Number / Address, if applicable Trown / City or Towneshy / County Principles Island Road City Rd 5 (Honey Harbour Rd. & Picnic Island Road Town / City or Townesh / County Principles Island Road Ramort Loonous Middle Name of Loonous Middle Princip Island Resort Ltd. Princip Island Resort L				☐ Flesg Flant ☐ Cox	UKaylock			
The Undersigned applies to TESA for a review for an RSMP under Ontario's Technical Standards and Safety A Propans Storage and Handling Regulation. Company Name A Prince Island Resent Ltd. Operator Name (Edicerat from expre) Same Telephora-No. Fax No. Fax No	Subr	nik allong white this o	ompleted application a Fecilly Ste	Fisca and a Map of the Sarrounding ,	Aroa.			
The Underalgned applies to TSSA for a review for an RSMP under Ontaxio's Technical Standards and Safety A Propane Storage and Handling Regulation. Company Many A Picnic Island Resert Ltd Departer Name (Editoration exerce) Same Telephone No. Fax No. E-mail Tos. 705-755-2421 705-755-1405 ploticistand.com B Strock Name / 311 Risport / Actives, if applicable Town / City or Teverahy / County Honey Harbour Mulling address if different from above. C Steel No. Street Name / 311 Risport / Address, if applicable Town / City or Teverahy / County Honey Harbour D Intermation on Container Refill Centre or Filling Plant Location of Facility. Street Name / 911 Risport / Address, if applicable Town / City or Teverahy / County Produce C Steel No. Street Name / 911 Risport / Address, if applicable Town / City or Teverahy / County Produce C Steel No. Street Name / 911 Risport / Address, if applicable Town / City or Teverahy / County Produce C Steel No. Street Name / 911 Risport / Address, if applicable Town / City or Teverahy / County Produce C Street Name / 911 Risport / Address, if applicable Town / City or Teverahy / County Produce C Street Name / 911 Risport / Address, if applicable Town / City or Teverahy / County Produce C Street Name / 911 Risport / Address, if applicable Town / City or Teverahy / County Produce C Street Name / 911 Risport / Address, if applicable Picnic Island Resort Ltd, Neme of a Sander Management person as defined in the regulation byte floored of Training (ROT). ROT Type Ken Aquino PTI 190-8 Cen # 111703 (Produce)			r in the second	CTION A: GENERAL	INFORMATION	one de company y de la company		
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A Picnic Island Resort Ltd., Oparator Name (2 discent from elgan) Same Telephone No. Fax No. E-mail 705-755-2421 705-756-1405 plonicistand.com B Street No. Sheet Name / 911 Rushor / Address, if applicable 175 Picnic Island Road Town / City or Termship / County Province Postal Code Honcy Harbour Mailing address if different from above. Sized No. Street Name / 911 Number / Address, if applicable 175 Picnic Island Road Po Box 50 Town / City or Termship / County Province Sized No. Street Name / 911 Number / Address, if applicable Honey Harbour Town / City or Termship / County Po Box 50 Town / City or Termship / County Po Box 50 Town / City or Termship / County Po Box 50 Town / City or Termship / County Po Box 50 Town / City or Termship / County Po Box 50 Trioning of facility. Street Name / 911 Number / Address, if applicable Town / City or Termship / County Postal Code Honey Harbour Rd. & Picnic Island Road Town / City or Termship / County Province Postal Code Honey Harbour On Postal Island Road Neared Major Intersocion City Rd 5 (Honey Harbour Rd. & Picnic Island Road Town / City or Termship / County Province Postal Code Honey Harbour On Postal Code			e and transming hegula	1011-		Onlands Concession are N t		
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Telephone No. Fax No. E-mail Politicular Comp. B. Street No. Street Name / 911 Riumbor / Address, if applicable 175 Picnic Island Road Politicular Comp. Province Politicular Comp. Province Politicular Comp. Po			(diforant from elgava)		** ************************************			
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Town / City or Township / County Produce Postal Code Honey Harbour Post Postal Code Honey Harbour Post Postal Code On POE 1E0 Name of Lloence Holder Picroic Island Resort Ltd. Name of Section Management person as defined fir the regulation holding the Recent of Training (ROT). ROT type	D		1	Address, il applicable	Noarest Major Intersec	noltz		
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Kon Aquino PTI 100-8 Cen # 111703 (PF Municipalities if the facility of its hazard detance touches multiple borders)	l	Picnic Island Res	on Lid.					
Ken Aquino PTI 100-9 Cen # 111703 (PF Municipalities if the facility or its hazard distance touches multiple borders)	Ī	Jomá of a Sanlor N	lanagament person es defined in t	he regulation housing the Rocant of	Training (SOT).	ROT type		
Municipality (or municipalities if the teatily or its hazard distance touches multiple borders)						PTI 100-8 Cen# #11703 (PPO-3)		
Township of Georgian Bay								
	T	ownship of Geor	glan Bay					
Hours of operation,		Almos aparelles						
ricere as optimists.		our a or operation,						
	+							

This document is valid until the next licence renewal date. You are required by taw to notify TSSA of any change of information. Declaration: I am aware that it is an offence to give false information in this docu-

Printnume	Signature / A	Date (dd-mm-yyyy)
Name of Ucente Holder Pionic Island Resort Ltd.		
Name of Senior Management person as defined in the	delle	21
Regulation holding the Record of Training Ken Aquino	XIA	7 4 08 05 100

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14th Floor - Centre Tower 3300 Bloor Street West Toronto Ontario M8X2X4 Customer Service: 1.877,682,8772

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

dicate the year the facility was established. 972	Indicate the year of any significa. None	nt modifications, as defined in s.1, O.Reg 211/01, since establishment
fentify the psig rating and serial number for ea	ch fixed propane storage tank on	site.
PSIG	Serial Number	
Tank1: 250	6746	
Tank2:		
Tank3:		Market State Control of the Control
nter capacity of propane in USWG, fixed, por	table, and mobile, and provide det	tailed inventory that includes the number of tank/vessel for
ach type (fixed, portable, and mobile) and the		
	dispusity of outsit tariffeedsti, off	a separate document.
Fixed: 1450 USWG	Portable: 0	Mobile: 0

Name of person completing this form (please print) Jason Greenway	Official Title Manager	
Signature Dheenver	Telephone No. 705-756-2421	Date (dd-mm-yyyy) 68 05 2612
FS 09195 (11/10) Peda 2 of 15		



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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) Superior Propane - Regional Operation Centre Street No. Street Name / 911 Number / Address, if applicable 251 Woodland Road East Unit 217 Town / City or Township / Country Province Postal Code Guelph On N1H 8J1 Telephone No. Fax No. Contact Name 877-873-7467 519-836-7766 Bruce Graham E-mail grahamb@superiorpropane.com Name of Propane Transporter. If same as above, please check box. Superior Propane Street No. Street Name / 911 Number / Address, if applicable 789 Bayview Drive Town / City or Township / Country Province Postal Code L4N 9A5 Telephone No. Fax No. Contact Name 705-762-4396 519-836-7766 Wayne Larocque E-mail larocquW@superiorpropane.com For Office Use - Party No. Off-site Cylinder and/or Mobile Storage Capacity stored off-site, in USWG None 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.

Name of person completing this form (please print)	Official Title	
Jason Greenway	Manager	
Signature Theenicut	Telephone No. 705-756-2421	Date (dd-mm-yyyy) 08 05 2017



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14th Floor - Centre Tower 3300 Bloor Street West Safety Authority Fax: 416.231.4903 Toronto Ontario M8X2X4 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 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 *3 Gasoline tanks 2 are 23,000 litres 1 is 6,000 litres total of 75,000 litres Underground tank (Refer to site map)				
Diesel - 1x 23,000 litre tank Underground tank (Refer to site map)				
Description of fire and emergency equipment indicated on facility site map. A-B-C Fire Extinguishers. Dry Chemical AMEPEX ABC 20lb Mod Ay11				
I located @ Propane dispenser				
located @ office				
located @ gas dock 1 located @ Fry Hut				
ist of fire protection controls (e.g., fire detection systems, fire notification systems, alarm systems, automatic shut off devices, fusible links, etc.) nd describe their function, use and operation.				
- Fusible link on ISC - isolation valve between the tank and the downstream propane dispensing equipment.				
Emergency Shut Off - at propane tank. This shuts down the pump and closes a solenoid valve upstream of hoses.				
. Power supply breaker inside the gas bar building. This cuts all power to the propane system - shuts down pump; closes solenoid valve.				
laintenance and testing schedule for fire protection controls and devices. Maintenance and testing is undertaken by Superior Propane according to Superior's Maintenance Standards. Schedule for key equipment is:				
1- Pumps - (pumps every 3 months; pump motor: check belts monthly; grease pump every 6 months).				
- ISC valve (test for closure every 6 months.				
- Storage tank Relief Valves - inspected every 2 years; replacement schedule as per provincial regulations.				

Name of person completing this form (please print) Jason Greenway	Official Title Manager	
Signature	Telephone No. 705-756-2421	Date (dd-mm-yyyy) 08 05 2012
S 09195 (11/10) Page 4 of 5		



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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Ke	y Contac		5. Facility 24-Hour Contact Person		
Name Jason Greenway			Name Jason Greenway	an domain at	
Official Title Manager			Official Title Manager		
Telephone No. 705-756-2421	Fax No. 705-756		Cell No. 905-308-5972	Fax No. 705-756-1405	
E-mail info@picnicisland.com			E-mail info@picnicisland.com		
Role and responsibilities in emergend	CV	The state of the s	Role and responsibilities in em	pergency	
Co-ordinate site response plan (ERP)	1.5.		Co-ordinate site response plan		
2. Facility Contact Personnel - A	Iternate C	ontact	6. Name of Facility Manager		
Name Jason Greenway			Name Jason Greenway		
Official Title Manager			Official Title Manager		
Telephone No. 705-756-2421	Fax No. 705-756	-1405	Telephone No. 705-756-2421	Fax No. 705-756-1405	
E-mail info@picnicisland.com			E-mail info@picnicisland.com		
Role and responsibilities in emergence	у	4.1	Role and responsibilities in em	ergency	
Co-ordinate site response plan (ERP)			Co-ordinate site response plan (ERP)		
3. Local Fire Services - Key Conta	ct		7. Propane Supplier Key Cor	ntact Person	
Name Jim Boswell		For Office Use - Party No.	Name Superior Propane Hot Line	For Office Use + Party No.	
Official Title Director of Protection Services/Fire Chi	ef		Official Title	6	
Telephone No. 705-538-2765	Fax No. 705-538-	1328	Telephone No. 877-873-7467	Fax No. N/A	
E-mail jboswell@gbtownship.ca		N	E-mail n/a		
Role and responsibilities in emergence	У		Role and responsibilities in em	ergency	
Coordiante Emergency Response / adv Response. Liaise with police services.	ise on Fire	Service	Identify and dispatch Superior Propane and or LPERGC emergency response personal as required		
4. Local Fire Services - Alternate C	ontact				
Name For Office Use - Party No. Lindsay Matthews		Name Susan Boonstra			
Official Title Fire Prevention Officer			Official Title Clerk		
Telephone No. 705-538-2765	Fax No. 705-538-	1328	Telephone No. 705-538-2337 x 231	Fax No. 705-538-1850	
E-mail Imatthews@gbtownship.ca			E-mail sboonstra@gbtownship.ca		
Role and responsibilities in emergence	у		Municipality		
Coordinate Emergency Response / adv contact is not available and liaise with			Township of Georgian Bay		
			W		

Name of person completing this form (please print)	Official Title	
Jason Greenway	Manager	
Signature Alenua	Telephone No. 705-756-2421	Date (dd-mm-yyyy) 08 05 2012
FS 09195 (11/10) Page of 15		American Control of the Control of t



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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.
E-stop located @ the dispenser area to cut the electrical in the event of an emergency, shutting the power of to the solenoid stopping the flow of propane.
The state of the s

Name of person completing this form (please print)	Official Title	
Jason Greenway	Manager	
Signature Alchery	Telephone No. 705-756-2421	Date (dd-mm-yyyy) 08 05 2012
FS 09195 (11/10) Page 6/1 15		



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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	sponse Plan and Procedures provided to facility key contacts.				
Training Date (dd-mm-yyyy)	Print Name of Training Provider:				
None Print Name of Instructor:					
Training Date (dd-mm-yyyy)	Print Name of Training Provider:	Alay .			
	Print Name of Instructor:				
Training Date (dd-mm-yyyy)	Print Name of Training Provider:				
	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:				
None	Print Name of Instructor:				
Training Date (od-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 pro	vided to certificate holders / persons with Records of Training.				
Training Date (dd-mm-yyyy)	Print Name of Training Provider: FSN Training & Development Inc.	Please Note - a ROT is valid for 3 years			
03-05-2011	Print Name of Instructor: Bill Bird				
Training Date (dd-mm-yyyy)	Print Name of Training Provider: FSN Training & Development Inc.	Please Note - a ROT is valid for 3 years			
26-08-2011	Print Name of Instructor: Bill Bird				
Training Date (dd-mm-yyyy)	Print Name of Training Provider:				
	Print Name of Instructor:				

Name of person completing this form (please print)	Official Title	
Jason Greenway	Manager	
Signature	Telephone No. 705-756-2421	Date (dd-mm-yyyy) OR OS 20 Z
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SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

4. Emergency Training Plan for Coming Year

Training on Emergency Re	esponse Plan and Procedures provide	ed to facility key contact	S. J.
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	Key Contact or Alternate	Please note: Canadian Propane Gas Association
Q3-2012	Print Name of Instructor:	to be arranged	has currently developed the course PTI 911-02
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	Addition of the second	content and it and its provider is available to be
	Print Name of Instructor:		taught in the first half of this 2012.
Target Date (dd-mm-yyyy)	Print Name of Training Provider:		
	Print Name of Instructor:		
Training on the facility's En	nergency Management Procedures p	rovided to staff.	
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	Key Contact to train staff	
Q3-2012	Print Name of Instructor: t	o be arranged	
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 pr	ovided to certificate holders / persons	with Records of Trainin	9.
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	FSN Training & Developm	ent Inc. Please Note - a ROT is valid for 3 years
Q3-2012	Print Name of Instructor:	Bill Bird	Note: To call training provider if any training is required
Target Date (dd-mm-yyyy)	Print Name of Training Provider:		in 2012
	Print Name of Instructor:	7,2	
Target Date (dd-mm-yyyy)	Print Name of Training Provider:		100
	Print Name of Instructor:		

Name of person completing this form (please print)	Official Title	
Jason Greenway	Manager	
Signature Delenicis	Telephone No. 705-756-2421	Date (dd-mm-yyyy) 08 05 2012



Technical Standards and

14th Floor - Centre Tower 3300 Bloor Street West Safety Authority 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 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

Warnle	OM	and	Acti	ane
BU CAS 4 5 15	173	and	L. C. C. C.	0112

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate). The operator or alternate will contact emergency services by calling 911 and will provide warnings outlined in the attached: "Propane Emergency Response

Procedures" placard (to be posted on site and part of the employee training). If it is safe to do so this could involve advising neighbors to evacuate. The

owner/operator may also contact Superior Propane via the emergency number identified in the ERP.

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 owner /operator or alternate should first follow the actions in the ERP provided herein. Stage evacuation, if the release of propane cannot be stopped by cutting electrical power may be required. Note a specific muster point is not advisable, since a propane plume can blow in any direction.

Actions will be taken by an on duty ROT person(s)

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).

When the system is operational, a ROT person will be on duty and be in the propane tank area. This person will be able to visually ascertain any abnormal/ accident event and implement the appropriate emergency response actions. When the system is not in operation, the ISC valve (main isolation valve) is closed, and the propane system is unattended. Any accident involving the propane tank during such times will require the intervention of random, nearby individuals

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

The propane tank system is located in a wide open area that is easily accessible.

The fire access routes are identified in the attached site plan.

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

The critical information required from the license holder is (a) how to shut the system down and (b) the fill level in the tank (if known)

Fill level is relevant from a time-to-BLEVE perspective (a near empty tank will BLEVE sooner than a full tank if there is a fire impingement on the tank).

This information will be provided to the authorities by Jason Greenfield or alternate.

How long will it take the facility liaison person to respond to the site. Key Contact: 5 to 10 minutes to arrive at the facility in the event of an emergency

Name of person completing this form (please print) Jason Greenway	Official Title Manager	
Signature De nuc	Telephone No. 705-756-2421	Date (dd-mm-yyyy) O8 O5 ZO 1 Z
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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 Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)? Is there adequate night lighting at the site? Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials? 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? Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders? Are weighing systems validated for accuracy? Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)? Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) Is the schedule of maintenance and testing activities retained on site? 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. No Is a pressurized water system available at the propane facility site? 1 Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location? What is the unobstructed distance to the closest water supply that could be used for None firefighting activities? (distance in metres only) What is the unobstructed distance to the closest approved water supply with year 9.6 m - Lake Huron round access if there are no hydrants? (distance in metres only) 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. Official Title Name of person completing this form (please print) Jason Greenway Manager Signature Telephone No. Date (dd-mm-yyyy)

705-756-2421

2012



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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.
- 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.
- 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) 15-04-2012		Capacity of single largest propane storagevessel (USWG) 1450 USWG		
Tank setback coordinates. Front:	Indicate placement of 64.1 m	on the map. Right side property line:	9.5 m	
	10.1 m	Left side property line:	29.1 m	

Declaration: I am aware that it is an offence to give false information in this document and

Name of person completing this form (please print)	Official Title	
Jason Greenway	Manager	
Signature	Telephone No. 705-756-2421	Date (dd-mm-yyyy) 08 05 2012
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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
3,780	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:

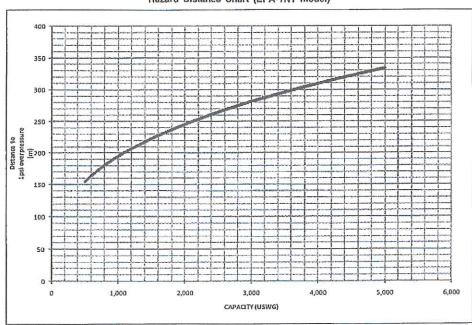
Density of Propane is 0.5033 kg per litre @ 15 C

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)



Manager	
Telephone No. 705-756-2421	Date (dd-mm-yyyy) 08 05 2012



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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: Bulldings 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	1,000	and F	of Build eatures th an "2 2-10	(")	Distance from Tank to Closest Building or Feature
Industrial buildings or parks or golf courses Name: None Address: Province Postal Code	×				0m
Residential building units specifically permanent single family dwellings condominiums and apartments.		х			24m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: Picnic Island Resort Ltd (Fry Hut - Gas Hut) Address: City: On Postal Code P0E 1E0			х		10 m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: Picnic Island Resort (Cabins / Trailers) Address: 175 Picnic Island Road City: Province On Postal Code POE 1E0				x	160, m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental heal institutions, and prisons. Name: Address: City: Province Postal Code					0m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: None Address: Province Postal Code	×				0m

Official Title	
Manager	
Telephone No. 705-756-2421	Date (dd-mm-yyyy) の分 の5 2012
	Manager Telephone No.

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



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SECTION C: SUBMISSIONS (cont'd)

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

Portable Storage Additional Information Sheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	0	0
# 100	29.5	0	0
# 40	11.75	0	0
# 33.3	9.62	0	0
# 30	8.8	0	0
# 20	5.8	0	0
#10	2.9	0	0
# 5	1.5	0	0

Tanks Stored On-site Not Connected for Use

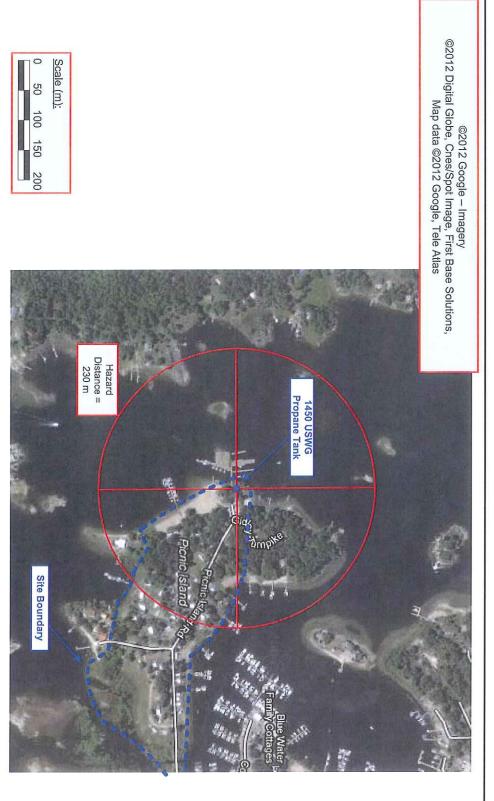
Tank Size In USWG	Quantity	Total Volume in USWG	
)	0	0	
- Mariana de la companya de la comp			

Total Cylinder Capacity	0	
Total Tank Capacity	1450 USWG	
Total Portable Capacity	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) Jason Greenway	Official Title Manager		
Signature Glerican	Telephone No. 705-756-2421	Date (dd-mm-yyyy) 08 05 2012	

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Capacity of Propane Storage Tank = 1450 USWG

Capacity of Propane Storage Tank:

North: 9.6 m East: 64.1 m South: 29.1 m West: 10.1 m Approximate Due to Water Levels

Township of Georgian Bay

Municipality (ies) within the 1 psi overpressure circle:

GPS Co-ordinates = 44.863888,-79.826341

Clerk, Township of Georgian Bay 99 Lone Pine Road, Port Severn, Ontario, L0K 1S0 Tel: 705-538-2337 Fax: 705-538-1850

Susan Boonstra

Picnic Island Resort Ltd. 175 Picnic Island Rd, Box 58 Honey Harbour, ON P0E 1E0

Map of Surrounding Area

Legal Description 175 Picnic Island Rd FR: 322 9 .0000 ISLAND 34 OR PICNIC ISLAND RP 35R12685 PARTS 1 TO 4

Drawn by: L. Wills

Date: April 16, 2012

email: sboonstra@gbtownship.ca

Denoted by circle centred on tank; radial distance = 230 m



