Technical Standards and Safety Authority 345 Carlingview Drive Toronto, Ontario M9W 6N9 Tel: 416.734.3300 Intake Group

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

Fax: 416.231.4078 Customer Service: 1.877.682.8772 propanelicensing@tssa.org www.tssa.org

This Level 1 RSMP applies to:

AUG 0 1 2017

• a facility with a total propane storage capacity of 5,000 USWG or less; or

• a facility with a fixed propane storage capacity of exactly 5,000 USWG and no more than 500 USWG of portable propane storage capacity on site.

Failure to fully complete this form may result in re-Making a false statement may result in a fine or prosecut under the Technical Standards and Safety Act Licence Number Check applicable type of propane operations ✓ Motor Fill Filling Plant ✓ Cylinder Card/Keylock Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.

SECTION A: GENERAL INFORMAT

1	Company Name S Operator Name (if diffe	926759 ONTARIO INC. erent from above)			Corporation No.
	Telephone No. 613-332-4100	Fax No. E- 613-332-0399	-mail krbull@sympatico).ca	
3	Street No. 234	Street Name / 911 Number / Addre HASTINGS STR	\$2800 CO 00 \$1 CO 00 \$1 CO 00		
	Town / City or Townsh	nip / County NCROFT		Province ONTARIO	Postal Code K0L 1C0
_	Mailing address if Street No.	different from above. Street Name / 911 Number / Address	ess, if applicable		
	Town / City or Townshi	ip / County		Province	Postal Code
Inf D	formation on Con Location of facility. Street No.	Street Name / 911 Number / Addre	ess, if applicable	Nearest Major Intersection HASTINGS STRE	n ET NORTH & BRIDGE STREET
	Town / City or Townsh	ip / County NCROFT		Province ONTARIO	Postal Code K0L 1C0
		r 6759 ONTARIO INC.	guiation holding the Record of Train	ning (ROT)	ROT type
	1	CK BULL	Julation holding the necord of man	mig (NOT).	100-11
Municipality (or municipalities if the facility or its hazard distance touches multiple borders) BANCROFT Hours of operation.					

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

	I hereby declare that the information I have	ave given here is true and comple	te.
	Printname	Signature	Date (dd-mmm-yyyy)
Name of Licence Holder	926759 ONTARIO INC.	Maril	08-06-2017
Name of Senior Management p	person as defined in the		
Regulation holding the Record	of Training RICK BULL		



Tank3: ___

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Indicate the year the facility was established. 1991 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. 2014 Change of steel and supplier. No change to capacity, orientation & operation Identify the psig rating and serial number for each fixed propane storage tank on site. PSIG Tank 1: 250 140-12 Tank 2: Serial Number 140-12

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.

	1999	Page 1997 Company Company	1480	ACRES AND ADDRESS OF THE PARTY	0	
Fixed:	1000	Portable:	1100	Mobile:		

Name of person completing this form (please print)	Official Title		
RICK BULL	PRESIDENT	PRESIDENT	
Signature	Telephone No. 613-332-4100	Date (dd-mmm-yyyy) 08-06-2017	



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SECTION A:	GENERAL	INFORMATION	(cont'd)
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Activity Information For Office Use - Party No. Name of Propane Supplier(s) PARKLAND FUEL (branded as SPARLING'S PROPANE) Street No. Street Name / 911 Number / Address, if applicable 27532 HIGHWAY 62 SOUTH Province Postal Code Town / City or Township / Country BANCROFT **ONTARIO** KOL 1CO Contact Name Telephone No. Fax No. 613-332-3352 613-332-0926 LYNN WAUGH E-mail lynn.waugh@parkland.ca For Office Use - Party No. Name of Propane Transporter. If same as above, please check box. 🗸 Street Name / 911 Number / Address, if applicable Street No. Town / City or Township / Country Province Postal Code Telephone No. Fax No. Contact Name E-mail 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.

Official Title PRESIDENT	
Telephone No. 613-332-4100	Date (dd-mmm-yyyyy) 08-06-2017
	PRESIDENT Telephone No.



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SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN

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

Description of the maximum volume, types and storage location of other hazardous materials on site, if any. Oxygen/Acetylene: several cylinders stored in the shed at the rear of the building for on-site use
Propane: assorted cylinders in quantities as listed on page 15 of this RSMP and stored as shown on the site plan within the fenced area of the property.
Several drums of "Krown T-40" rust proofing solution are stored in the shed at the rear of the building.
Description of fire and emergency equipment indicated on facility site map.
There are a total of 6 portable fire extinguishers located throughout the property (1 @ propane dispenser; 2 in the public area of the office; 2 in the shop area
and 1 outside at the rear of the building.)
Fire extinguishers are maintained compliant with the Ontario Fire Code.
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.
The internal safety control (ISC) valve in the tank outlet is protected with a fusible link. The normally closed valve is pulled open by a cable attached to the
cabinet door and can only be in the open position when the cabinet door is open. In the event of a fire, the fusible link will melt, allowing the ISC valve to
close within the tank. When unattended, the lever is returned to the closed position, thus closing the ISC valve. The remote ECO switch as well as the main
breaker terminates power to the propane solenoid valve and pump.
Maintenance and testing schedule for fire protection controls and devices. The facility is inspected on a monthly basis by the operator. The operation of the ECO function and the ISC valve movement and a visual inspection
of the condition of the fire extinguishers are part of the monthly inspection. Any deficiencies found in the propane system are reported to Sparling's
Propane for immediate attention. Staff who are certified conduct a daily visual inspection of the propane equipment prior to using. Sparling's Propane
conducts an annual inspection of the entire propane facility. Fire extinguishers and the premises are maintained in compliance with the Ontario Fire Code.

Name of person compl RICK BULL	eting this form (please print)	Official Title PRESIDENT	
Signature	We bull	Telephone No. 613-332-4100	Date (dd-mmm-yyyy) 08-06-2017



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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact			5. Facility 24-Hour Contact Person		
Name RICK BULL		For Office Use - Party No.	Name RICK BULL	For Office Use - Party No.	
Official Title			Official Title PRESIDENT		
PRESIDENT (cell # 7	Fax No.	70)	Cell No.	Fax No.	
613-332-4100	613-33	2-0399	705-868-6176	613-332-0399	
E-mail krbull@sympatico.ca			E-mail krbull@sympatico.ca		
Role and responsibilities in emergency	/		Role and responsibilities in emergency		
Provide assistance to emergency respo		quired	Provide assistance to emergency responders as required		
2. Facility Contact Personnel - Alt	ernate Co	ntact	6. Name of Facility Manager		
Name		For Office Use - Party No.	Name KIMBERLEE BULL	For Office Use - Party No.	
KIMBERLEE BULL Official Title			Official Title		
	705-750-8	161)	SECRETARY		
Telephone No. 613-332-4100	Fax No.		Telephone No. 613-332-4100	Fax No. 613-332-0399	
E-mail			E-mail		
krbull@sympatico.ca			krbull@sympatico.ca		
Role and responsibilities in emergency		audan d	Role and responsibilities in emergency Provide assistance to emergency responders as required		
Provide assistance to emergency responders as required		Provide assistance to emergency response	onders as required		
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact F			
Name PAT HOOVER		For Office Use - Party No.	Name LYNN WAUGH	For Office Use - Party No.	
Official Title	E-mail	aguar@abfira aa	Official Title	E-mail	
FIRE CHIEF Telephone No.	Fax No.	pover@nhfire.ca	BRANCH MANAGER Telephone No.	lynn.waugh@parkland.ca Fax No.	
613-332-2442		3-332-2222	613-332-3352	613-332-0926	
Role and responsibilities in emergency	У		Role and responsibilities in emergency		
Manage Emergency Response			Key contact to activate emergency response plan		
Fire Services Address			Propane Supplier Address		
33 Chemaushgon Road, P.O. Box 790, Ba	ancroft, ON I	K0L 1C0	27532 Highway 62 South	n, Bancroft, ON K0L 1C0	
4. Local Fire Services - Alternate C	ontact		8. Municipal Contact		
Name MATT MUSCLOW		For Office Use - Party No.	Name HAZEL LAMBE	For Office Use - Party No.	
Official Title FIRE PREVENTION OFFICER	E-mail mr	musclow@nhfire.ca	Official Title CAO/CLERK		
Telephone No. 613-332-2442	Fax No. 613	3-332-2222	Telephone No. 613-332-0399	Fax No. 613-332-0384	
Role and responsibilities in emergence			E-mail	4	
Assist with Management of Emergency Re	sponse		hlambe@bancroft.ca		
Fire Services Address			Municipality Name and Address		
33 Chemaushgon Road, P.O. Box 790,	Bancroft. 0	ON KOL 1CO	BANCROFT		
		removedania sessioni	1 2, 3,0,0,0,1		

Name of person completing this form (please print)	Official Title		
RICK BULL	PRESIDENT	PRESIDENT	
Signature M bull	Telephone No. 613-332-4100	Date (dd-mmm-yyyy) 08-06-2017	



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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. A sign is affixed to the dispenser that identifies Sparling's Propane as the supplier of fuel as well as the 24/7 Sparling's Propane emergency response
contact number (1-855-332-3352).
The dispenser cabinet is locked and closed when the business is not open and unattended thus closing the ISC valve.
Monthly inspections of the facility are completed and recorded by the operator. Any deficiencies found are corrected or reported immediately to
Sparling's Propane.
The operator conducts and records a daily visual inspection of the dispenser.
Also see the Propane Emergency Response Procedures.

Name of person completing this form (please print)	Official Title	
RICK BULL	PRESIDENT	
Signature \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Telephone No.	Date (dd-mmm-yyyy)
M-1 bull	613-332-4100	08-06-2017



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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-mmm-yyyy)	Print Name of Training Provider: Parkland Fuel Corporation (Sparling's)
13-04-2017	Print Name of Instructor: Mike Naczynski
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-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-mmm-yyyy)	Print Name of Training Provider: 926759 Ontario Inc.
13-04-2017	Print Name of Instructor: Rick Bull
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-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-mmm-yyyy)	Print Name of Training Provider: 926759 Ontario Inc.
13-04-2017	Print Name of Instructor: Rick Bull
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

Name of person completing this form (please print)	Official Title	
RICK BULL	PRESIDENT	
Signature L. L. L.	Telephone No. 613-332-4100	Date (dd-mmm-yyyy) 08-06-2017

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

4. Emergency Training Plan for Coming Year

Training on Emergency Res	sponse Plan and Procedures provided to facility key contacts.
Target Date (dd-mmm-yyyy)	Print Name of Training Provider: 926759 Ontario Inc.
13-04-2018	Print Name of Instructor: Rick Bull
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training on the facility's Em	ergency Management Procedures provided to staff.
Target Date (dd-mmm-yyyy)	Print Name of Training Provider: 926759 Ontario Inc.
13-04-2018	Print Name of Instructor: Rick Bull
Target Date (dd-mmm-yyyy)	Print Name of Training Provider: 926759 Ontario Inc.
As needed (new hires)	Print Name of Instructor: Rick Bull
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
On-site specific training pro	ovided to certificate holders / persons with Records of Training.
Target Date (dd-mmm-yyyy)	Print Name of Training Provider: 926759 Ontario Inc.
13-04-2018	Print Name of Instructor: Rick Bull
Target Date (dd-mmm-yyyy)	Print Name of Training Provider: 926759 Ontario Inc.
As needed (new hires)	Print Name of Instructor: Rick Bull
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

Name of person completing this form (please print)	Official Title	
RICK BULL	PRESIDENT	
Signature M B all	Telephone No. 613-332-4100	Date (dd-mmm-yyyy) 08-06-2017



Warnings and Actions

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

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

5. Emergency Response Communications Plan

The operator is responsible for calling 911 when an emergency situation arises. The operator will also notify key contacts if not already on site. Also see the Propane Emergency Response Procedures and the existing Emergency Response Plan listed in Tab 8. 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 operator will advise all occupants to evacuate the premises and report to the emergency meeting place at the southeast corner of the property. In the event of a catastrophic failure attempts will be made by facility employees to advise persons inside the hazard distance of the emergency and when possible will advise all persons to move to a safe location outside the hazard radius. 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 operator will call 911. Once at the meeting place, the operator will confirm with the key contacts that emergency services were notified.	Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate). Typically both key contacts are on site when open for business. For simplicity, references to operator may include either key contact or the on duty attendant.
Also see the Propane Emergency Response Procedures and the existing Emergency Response Plan listed in Tab 8. 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 operator will advise all occupants to evacuate the premises and report to the emergency meeting place at the southeast corner of the property. In the event of a catastrophic failure attempts will be made by facility employees to advise persons inside the hazard distance of the emergency and when possible will advise all persons to move to a safe location outside the hazard radius. 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 olaced to 911). The operator will call 911. Once at the meeting place, the operator will confirm with the key contacts that emergency services were notified. Describe provisions for fire department entry when there are no operations or staffing at the propane site. The tank is not within a fenced compound and is accessible 24/7 however the dispenser cabinet is locked when unattended. Describe how the licence holder will ensure continual flow of updated information to authorities. The operator will assume the responsibility of tracking information and waiting for and meeting with emergency services until one of the key contacts is present, at which time the key contact will assume the responsibility for assisting emergency services.	
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Name of person compl	eting this form (please print)	Official Title	
RICK BULL	16	PRESIDENT	
Signature	H bull	Telephone No. 613-332-4100	Date (dd-mmm-yyyy) 08-06-2017



Fax: 416.231.4078 Customer Service: 1.877.682.8772 propanelicensing@tssa.org www.tssa.org 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)?	\checkmark			
2.	Is there adequate night lighting at the site?	✓			
3.	Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials?	\checkmark			
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?	1			
5.	Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?	✓			
6.	Are weighing systems validated for accuracy?	\checkmark			
7.	Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?	✓			
8.	Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled? (e.g., QCC valves)	\checkmark			
9.	Is the schedule of maintenance and testing activities retained on site?	\checkmark			
	7. Water Supply				72
	propane licence holder should work with the local fire department to determine water bly 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?	\checkmark			
2.	Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?	√			
3.	What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)	13.72 m	netres		
4.	What is the unobstructed distance to the closest approved water supply with year round access if there are no hydrants? (distance in metres only)	n/	'a		

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

Telephone No.

PRESIDENT

613-332-4100

Date (dd-mmm-yyyy)

08-06-2017

Signature

RICK BULL

Name of person completing this form (please print)



Technical Standards and Safety Authority 345 Carlingview Drive Toronto, Ontario M9W 6N9 Tel: 416.734.3300 Fax: 416.231.4078 Customer Service: 1.877.682.8772

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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

e completed by the Local Fire Services

Yes

To be completed by the Local Fire Services Has the local fire service had an opportunity to review the Emergency Re	Yes esponse and Preparedness Plan? ✓	No
If not, please explain (e.g., no fire services).		
The original RSMP was submitted for review to the Fire Service. This version co	ontains updated contact information & site plan and	d an aerial map formatted
from a satellite photo. There is no change to the propane storage capacity, tank	orientation or propane operation. Fire service is fr	ee to provide comment.
Fire services comments, if any:		
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	pv.	
The liberior floraci will respond to the Legal Fine cervices comments	(dd-mmm-yyyy)	
LOCAL FIRE		
The undersigned has reviewed Section B of the Risk and Safety M	anagement Flan File Services.	
Print name	Signature	Date (dd-mmm-yyyy)

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) RICK BULL	Official Title PRESIDENT	
Signature 11-1	Telephone No. 613-332-4100	Date (dd-mmm-yyyy) 08-06-2017

Local Fire Services Name



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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.
- 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.
- 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-n 13-07-201	nmm-yyyy) 7 (Updated Map)	Capacity of single largest propa 1999 uswg	
Tank setback coordinates. Front:	Indicate placement on the 16 Metres	ne map. Right side property line:	7.3 Metres
Rear:	46 Metres	Left side property line:	32 Metres
GPS coordinates of single	largest vessel: 45.04	4.358 North x 077.51.363 West	

Name of person complet	ing this form (please print)	Official Title	
RICK BULL	1	PRESIDENT	
Signature	W Bull	Telephone No. 613-332-4100	Date (dd-mmm-yyyy) 08-06-2017



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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:

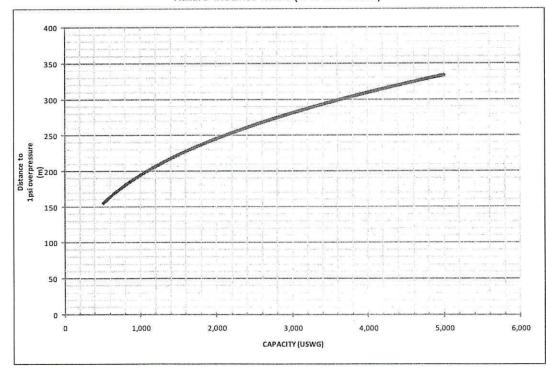
Density of Propane is 0.5033 kg per litre @ 15 C

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)





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SECTION C: SUBMISSIONS (cont'd)

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

As an accompaniment to the Map of Surrounding Area, provide the following information about buildings and features present within the circle in Table 2.

Table 2: Buildings and Features

* Number of Buildings Distance from and Features Buildings and Features Present within the Circle on the Map of the Surrounding Area Tank to Closest (mark with an "X") **Building** or AND Name and Address of Closest Building or Feature 1 2-10 11+ Feature Industrial buildings or parks or golf courses m X Address: ______ Province Province Postal Code City: Residential building units specifically permanent single family dwellings, condominiums, and apartments. 52 _ m X Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Tim Horton's m Address: 234 Hastings Street North x _____Province Ontario Postal Code K0L 1C0 Bancroft City: Commercial building units - continuous occupancy specifically hotels, campgrounds, and resorts. m х Address: Province Postal Code City: Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. m Name: Address: _____ Province _____ Postal Code_____ Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _ m X Address: ____ Province Postal Code City:

Name of person completing this form (please print) RICK BULL		Official Title PRESIDENT	
Signature	Whall	Telephone No. 613-332-4100	Date (dd-mmm-yyyy) 08-06-2017

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



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WORKSHEET

Portable Storage Additional Information Worksheet

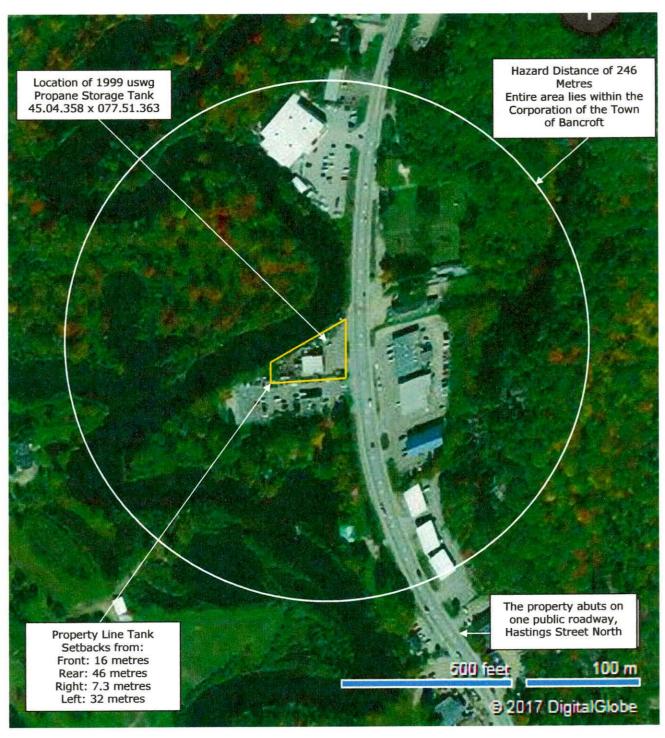
Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5	42	1239
# 40	11.75	1	40
# 33.3	9.62	16	154
# 30	8.8	4	36
# 20	5.8	4	24
# 10	2.9	4	12
# 5	1.5	2	3
al Cylinder Capacity	1480		

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
	N.	
otal Tank Capacity 0		

Total Cylinder Capacity	1480
Total Tank Capacity	0
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	1480

HAZARD RADIUS AERIAL MAP for 926759 ONTARIO INC.



Facility Address: 234 Hastings Street, Bancroft, Ontario		
Municipal Contact Information: Hazel Lambe	Date Map Revised:	
CAO/Clerk, Bancroft hlambe@bancroft.ca 613-332-0399	July 13, 2017	

