



Technical Standards and Safety Authority
 www.tssa.org
 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

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.

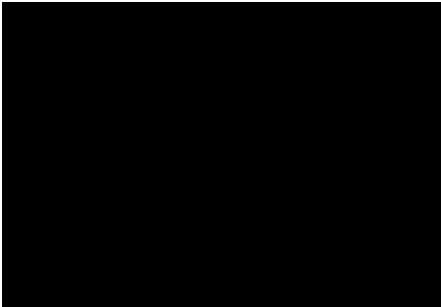
Failure to fully complete this form may result in rejection.
 Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number 0076611144-C

Check applicable type of propane operations.

Cylinder Motor Fill Filling Plant Card/Keylock

Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.



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 D. & F. Cloutier Group Enterprises Inc. Ontario Corporation No., if applicable _____

Operator Name (if different from above) Don Cloutier

Telephone No. 705-746-2133 Fax No. 705-746-8632 E-mail don078@hotmail.com

B Street No. 30 Street Name / 911 Number / Address, if applicable Pine Drive

Town / City or Township / County Parry Sound Province Ontario Postal Code P2A 3B8

Mailing address if different from above.

C Street No. _____ Street Name / 911 Number / Address, if applicable _____

Town / City or Township / County _____ Province _____ Postal Code _____

Information on Container Refill Centre or Filling Plant

D Location of facility.

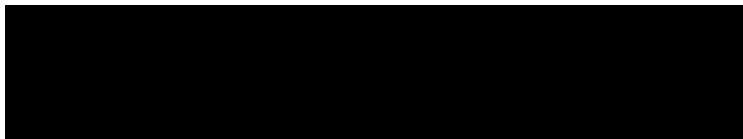
Street No. 30 Street Name / 911 Number / Address, if applicable Pine Drive Nearest Major Intersection Bowes Street and Pine Drive

Town / City or Township / County Parry Sound Province Ontario Postal Code P2A 3B8

Name of Licence Holder D. & F. Cloutier Group Enterprises Inc.


Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). Don Cloutier ROT type 100-08

Municipality (or municipalities if the facility or its hazard distance touches multiple borders) Parry Sound

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.

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Print name	Signature	Date (dd-mm-yyyy)
Name of Licence Holder <u>Don Cloutier</u>		<u>21/12/2011</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Don Cloutier</u>		



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established. Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.
2001

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

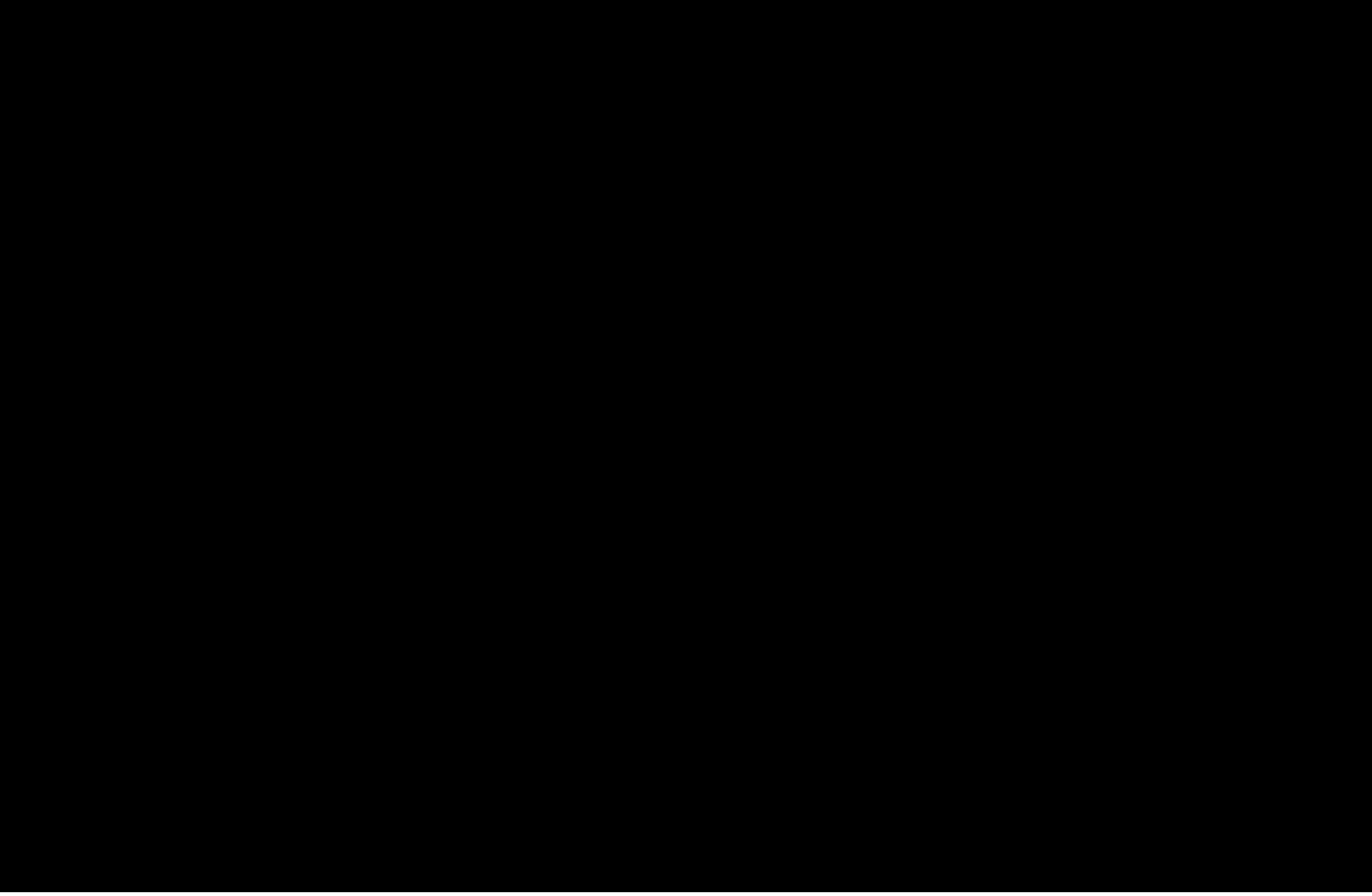
	PSIG	Serial Number
Tank 1:	250	1417-4
Tank 2:	_____	_____
Tank 3:	_____	_____

Note: you will find the PSIG and Serial number on the propane tank.

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: 5000 Portable: 280 Mobile: _____

Note: Complete this box if your store has a cage for propane cylinder exchange. One cage can hold 140 gallons. ie. if you have two cages, then put 280 gallons.



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Name of person completing this form (please print) Don Cloutier	Official Title President
Signature 	Telephone No. 705-746-2133 ext233
	Date (dd-mm-yyyy) 21/12/2011



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No Action required

SECTION A: GENERAL INFORMATION (cont'd)
Activity Information

Name of Propane Supplier(s)			
Superior Propane - Ontario Regional Operations Centre			
Street No.	Street Name / 911 Number / Address, if applicable		
251	Woodlawn Road West, Unit 217		
Town / City or Township / Country		Province	Postal Code
Guelph		Ontario	N1H 8J1
Telephone No.	Fax No.	Contact Name	
1-877-873-7467	519-836-7766	Mike Mullins	
E-mail			
mullinsm@superiorpropane.com			

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>			
Superior Propane - 5008-BALA			
Street No.	Street Name / 911 Number / Address, if applicable		
10109	Gordon Street		
Town / City or Township / Country		Province	Postal Code
Bala		Ontario	P0C 1A0
Telephone No.	Fax No.	Contact Name	
(416) 459-9705		Dan Parmenter	
E-mail			
parmentd@superiorpropane.com			

Off-site Cylinder and/or Mobile Storage	Capacity stored off-site, in USWG	For Office Use - Party No.
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.

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Name of person completing this form (please print)	Official Title
Don Cloutier	President
Signature	Date (dd-mm-yyyy)
	21/12/2011
Telephone No.	
705-746-2133	



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Refer to attachment for example of how to fill out this page.

SECTION B: EMERGENCY AND PREPAREDNESS RES

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.
2 bulk oil containers in south east corner of auto service max 1000L, 1 waste oil container outside in fenced compound at the S-E side of building max1300L
3 oxygen & 3 acetalyne tanks (2 of each on portable welding cart & 1 of each in fixed storage unit, 1 waste container 205L for used oil filters, 205L drum of glycol, storage container with max 65 used batteries. All of the above are more than 150m from propane storage tank

Description of fire and emergency equipment indicated on facility site map. **Identify where your fire extinguishers are around your propane tank.**
1 fire extinguisher located in propane cabinet, 2 fire extinguishers located in the garden centre, 15 located throughout retail
1 fire hydrant located 64m from the fixed propane tank
1 fire hose in south west corner of warehouse & 1 fire hose in east side of warehouse

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.
1 fusible link between tank and downstream dispensing equipment
explosion proof emergency stop button located 4m from the propane tank, staff attend this stop button during dispensing
emergency main disconnect switch is located in service centre
interlock cable located on cabinet door ISC valve closes when door is closed

Maintenance and testing schedule for fire protection controls and devices.
inspect pump every 2 months, grease every 6 months
test ISC valves every 6 months
inspect storage relief valve every 2 years

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Verify information entered is accurate.
Obtain information for #2, 3, 4 and 8

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 Don Cloutier	For Office Use - Party No.	Name Don Cloutier	For Office Use - Party No.
Official Title Dealer		Official Title Dealer	
Telephone No. 705-746-2133	Fax No. 705-746-8632	Cell No.	Fax No. 705-746-8632
E-mail don078@hotmail.com		E-mail don078@hotmail.com	
Role and responsibilities in emergency Co-ordinate site response.		Role and responsibilities in emergency Co-ordinate site response.	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Rob Morrish	For Office Use - Party No.	Name Don Cloutier	For Office Use - Party No.
Official Title General Manager		Official Title Dealer	
Telephone No. 705-746-2133	Fax No. n/a	Telephone No. 705-746-2133	Fax No. 705-746-8632
E-mail rmmorrish@hotmail.com		E-mail don078@hotmail.com	
Role and responsibilities in emergency Co-ordinate site response if Dealer not available.		Role and responsibilities in emergency Co-ordinate site response.	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Lawrence Green	For Office Use - Party No.	Name Superior Propane Hotline	For Office Use - Party No.
Official Title Fire Cheif		Official Title	
Telephone No. 705-746-2262	Fax No.	Telephone No. 1-877-873-7467	Fax No.
E-mail		E-mail	
Role and responsibilities in emergency		Role and responsibilities in emergency	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name John Tuck	For Office Use - Party No.	Name Jamie McGarvey	
Official Title Community Fire Services Officer		Official Title Mayor	
Telephone No. 705-746-2262	Fax No.	Telephone No. 705-746-2101	Fax No.
E-mail		E-mail www.townofparrysound.com	
Role and responsibilities in emergency		Municipality	

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

2. Additional Safety Measures

Refer to attachment for examples

Describe any other measures in place at the facility that exceed the minimum Code and Standards requirements.

Emergency shut off push button to shut down pump and close solenoid valve up stream of dispensing hoses

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Unless you have an emergency plan established at your store and you have provided training, then list 'n/a' on the first training date of each heading.

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) none	Print Name of Training Provider:
	Print Name of Instructor:
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) none	Print Name of Training Provider:
	Print Name of Instructor:
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) 04-06-2010	Print Name of Training Provider: Fuel Safety Network
	Print Name of Instructor: Bill Bird 416-574-1426
Training Date (dd-mm-yyyy) 30-05-2009	Print Name of Training Provider: Fuel Safety Network
	Print Name of Instructor: Bill Bird 905-642-8579
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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No action required at this time.

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) Q4 2011	Print Name of Training Provider:
	Print Name of Instructor:
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) Q4 2011	Print Name of Training Provider:
	Print Name of Instructor:
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) Q2-2012	Print Name of Training Provider: Fuel Saftey Network
	Print Name of Instructor: Bill Bird 905-642-8579
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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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

Most of the information here will be found in your store's emergency plan. Please refer to the attached for examples

Warnings and Actions

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).
The ROT on duty will contact emergency services by calling 911 They will have the area evacuated and if the store is affected they will use the 2 way radio to contact the on-duty manager in the retail store to evacuate that area

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).

Actions and Warnings will be taken by the ROT on duty. If evacuation is necessary all stall will meet on the boulevard next to Sobeys { N-E area of our lot}

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).

Each day an opening procedure is done by the on-duty ROT. If there are any deficiencies there is a sign posted and the dispensing station is closed. The Store Manager is notified and a service call is placed to Superior Propane.

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

We have two accesses to our open parking lot and the fire department will have no issues finding the propane site
One entrance is off Oastler Park Drive and the other is off Pine Drive. Please see attached site plan

Example of what to list here: Propane site is in large open area in parking lot. Fire department will not have any issues accessing the propane site.

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

The critical information required from the licence holder is the fill level of the tank. This information will be provided to authorities by the facility key contacts if this can be done in a safe and timely manner

How long will it take the facility liaison person to respond to the site. **How long would the Dealer/senior manager respond to the site?**

Approx. 20-30 minutes, depending on weather, after receiving the emergency call

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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.

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"/> |

The goal here is to ensure you answer yes to each of the questions. If you are unable to answer yes, action will be required to fix the issue. Contact the CTDA if you require assistance.

7. Water Supply

Contact your local fire department to obtain this information.

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 checked="" type="checkbox"/> | <input 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) | | <u>64m</u> |
| 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) | | <u>n/a</u> |

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This page is left blank and submitted to the local fire services for their review when the RSMP is complete.

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:

SEE REVIEW AND COMMENTS, PARRY SOUND FIRE DEPT., DATED DEC 19, 2011

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	Signature	Date (dd-mm-yyyy)
Local Fire Services Name <i>PARRY SOUND FIRE DEPT.</i>	<i>[Signature]</i>	<i>20/12/2011</i>

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Signature <i>[Signature]</i>	Telephone No. <i>705-746-2133</i>
	Date (dd-mm-yyyy) <i>21/12/2011</i>



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SECTION C: SUBMISSIONS

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

Facility Site Plan. Insert the following items onto your site plan. You can use the attached as a guide.

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 sealed 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) 01-06-2006	Capacity of single largest propane storage vessel (USWG) 5000
Tank setback coordinates. Indicate placement on the map.	
Front: <u>50 m</u>	Right side property line: <u>100 m</u>
Rear: <u>20 m</u>	Left side property line: <u>20 m</u>
GPS coordinates of single largest vessel:	<u>45.3426, -80.0087</u>

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SECTION C: SUBMISSIONS

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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) 01-06-2006	Capacity of single largest propane storage vessel (USWG) 5000
Tank setback coordinates. Indicate placement on the map.	
Front: _____	Right side property line: _____
Rear: _____	Left side property line: _____
GPS coordinates of single largest vessel:	45.3426, -80.0087

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) Don Cloutier	Official Title President
Signature 	Telephone No. 705-746-2133
	Date (dd-mm-yyyy) 21/12/2011



Technical Standards and Safety Authority
www.tssa.org

11th Floor Centre Tower
Bloor Street West
Toronto Ontario M 5X 1X6
Fax
Customer Service

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

No information needed on this page.

SECTION C SUBMISSIONS cont d

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

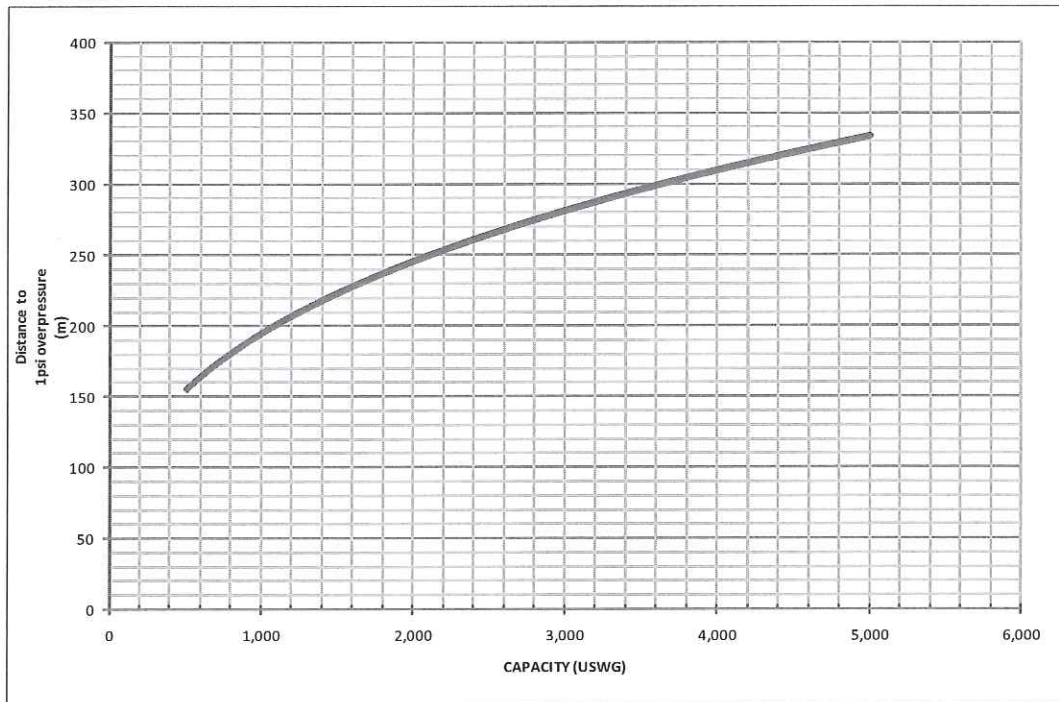
Table Distance Table

Water Capacity litres	Nominal Water Capacity USWG	Distance to 1 psi overpressure m

Formula $D = \sqrt{C}$
 D = Distance to overpressure of 1 psi meters
 C = Tank Total Capacity in USWG

Parameters Density of Propane is 4.24 kg per litre @ 15°C
 Assume all vessels are full
 1 gallon [US liquid] = 3.785411784 cubic meter
 1 cubic metre = 264.172052358 USWG

Hazard Distance Chart EPA TNT model



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Name of person completing this form please print Don Cloutier	Official Title President
Signature 	Telephone No 705-746-2133
	Date dd mm yyyy 21/12/2011



Technical Standards and Safety Authority
www.tssa.org

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

Name the closest building of each type within the circle from the aerial map and the total number of buildings within the circle for each section.

SECTION C: SUBMISSIONS (cont.)

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

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: <u>n/a</u> Address: _____ City: _____ Province _____ Postal Code _____	x				0 m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: <u>n/a</u> Address: _____ City: _____ Province _____ Postal Code _____	x				0 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Sobeys {Grocery Store}</u> Address: <u>25 Pine Drive</u> City: <u>Parry Sound</u> Province <u>Ont</u> Postal Code <u>p2a3b8</u>			x		100 m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>Comfort Inn</u> Address: <u>120 Bowes St</u> City: <u>Parry Sound</u> Province <u>Ont</u> Postal Code <u>p2a3b8</u>		x			300 m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: <u>n/a</u> Address: _____ City: _____ Province _____ Postal Code _____	x				0 m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>n/a</u> Address: _____ City: _____ Province _____ Postal Code _____	x				0 m

5 Hour #5

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

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Signature 	Telephone No. <u>705-746-2133</u>
	Date (dd-mm-yyyy) <u>21/12/2011</u>



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Level 1 Risk and Safety Management Plan (RSMP)
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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		
# 100	29.5		
# 75	75		
# 30	8.8		
# 20	5.8	48	278.4
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			

List total capacity that is at your store. Note: One propane cylinder exchange cage holds 140 Gallons.

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
Total Tank Capacity		

Total Cylinder Capacity	
Total Tank Capacity	5000
Total Portable Capacity	278.4

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) Don Cloutier		Official Title President	
Signature 		Telephone No. 705-746-2133	Date (dd-mm-yyyy) 21/12/2011

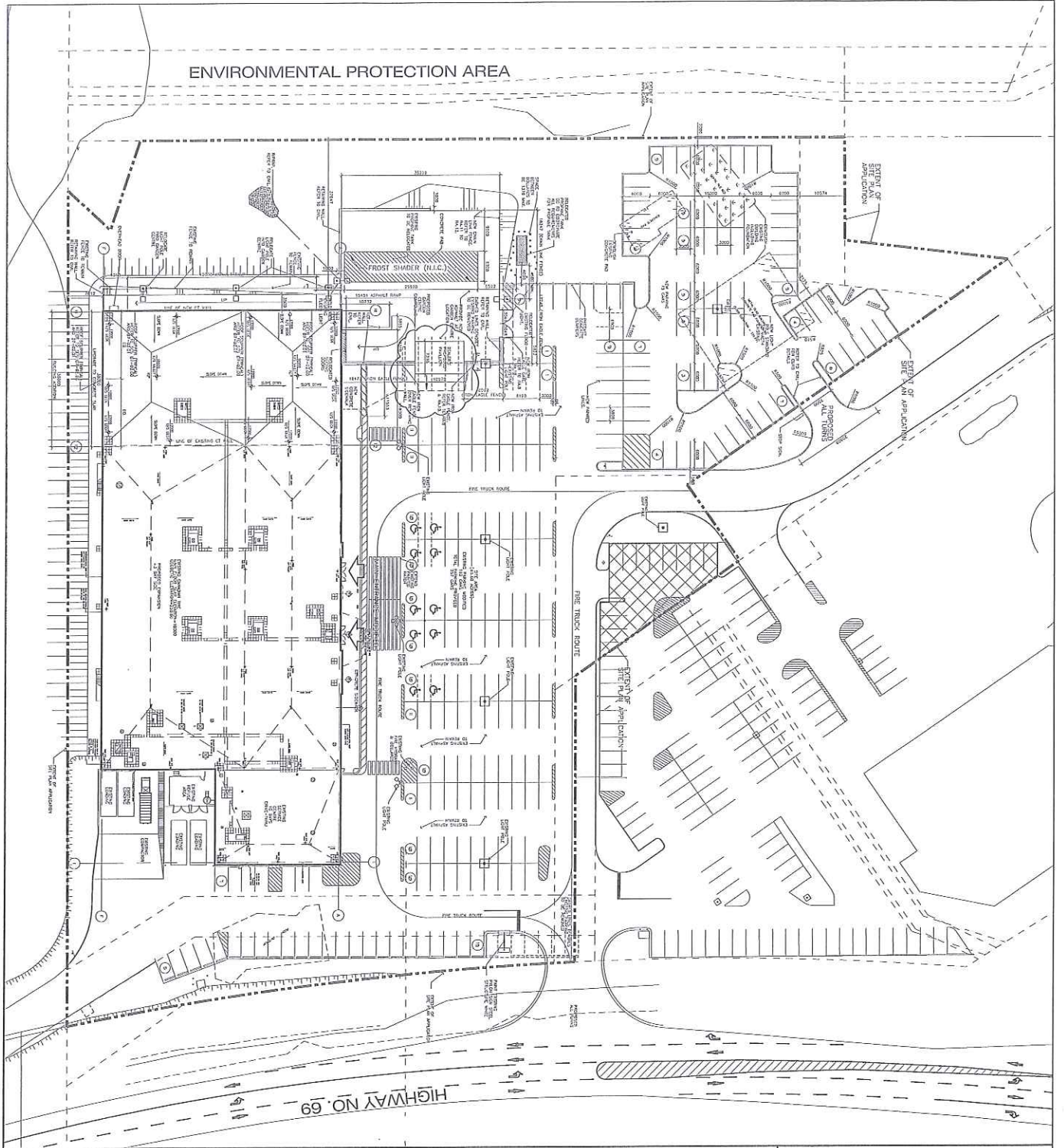


Location of Propane Storage Tank:	
Demarcated by:	In centre of circle.
Capacity of Propane Storage Tank:	
Capacity of Propane Storage Tank = 5000 USWG	
GPS Coordinates of Propane Storage Tank:	
GPS Co-ordinates = 45.3426, -80.0087	
Circular Distance to 1 psi overpressure:	
Demarcated by circle centred on tank radial distance = 246 m	

Note: Property Lines a setbacks shown on site plan.	
Municipality (ies) within the 1 psi overpressure circle:	
Parry Sound	
Municipal Contact:	ROB MENS
	c/o Town of Parry Sound
	52 Seguin St.
	Parry Sound
	Ont.
	P2A 1B4
	705-746-2101

Map of Surrounding Area
Canadian Tire - 30 Pine Drive
PART OF LOT 25, CONCESSION 1 AND PART OF THE ORIGINAL ROAD ALLOWANCE BETWEEN LOTS 25 AND 26, CONCESSION 1 TOWNSHIP OF MCDOW.
GAIL

ENVIRONMENTAL PROTECTION AREA



KEY PLAN

CONSTRUCTION DRAWINGS ARE FOR COORDINATION ONLY AND REQUIREMENTS OF TENDER ARE INCLUDED IN THE CONTRACT

NO.	DATE	DESCRIPTION
1	2018.04.10	ISSUED FOR TENDER
2	2018.04.10	ISSUED FOR TENDER
3	2018.04.10	ISSUED FOR TENDER



REVISION RECORD

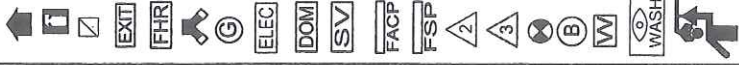
CONCRETE TIME SIGN SYSTEM LIMITED

PROJECT: CONCEPT 20/20 RETROFIT

SHEET NO: A01

NEIMARK ARCHITECT
1-416-463-5555
1000 SHEPPARD AVENUE EAST, SUITE 200
SCARBOROUGH, ONTARIO M1S 1T5

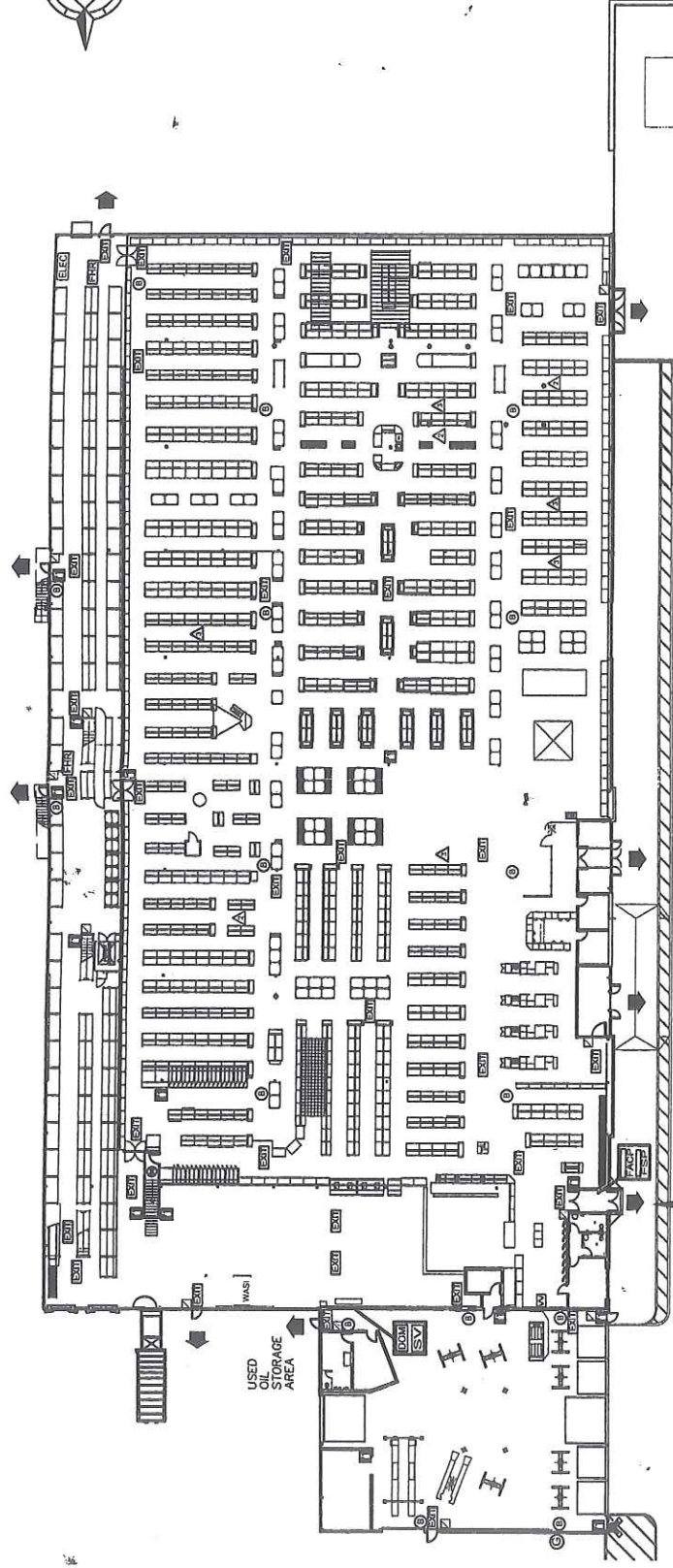
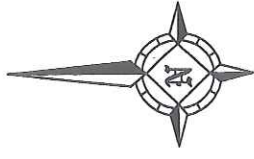
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- MAIN E
- DOMES
- SPRINK
- FIRE AL
- FIRE SF
- COMPR
- FLAMM
- SMOKE
- FIRE AL
- WINDO
- EYE W/
- EMERG



FIRE
 Fire Safe
 27-188
 Brampton
 PHONI
 FAX:
 EMAIL:
 WEB: 1

PROJECT:
 30 F
 PARRY SOON

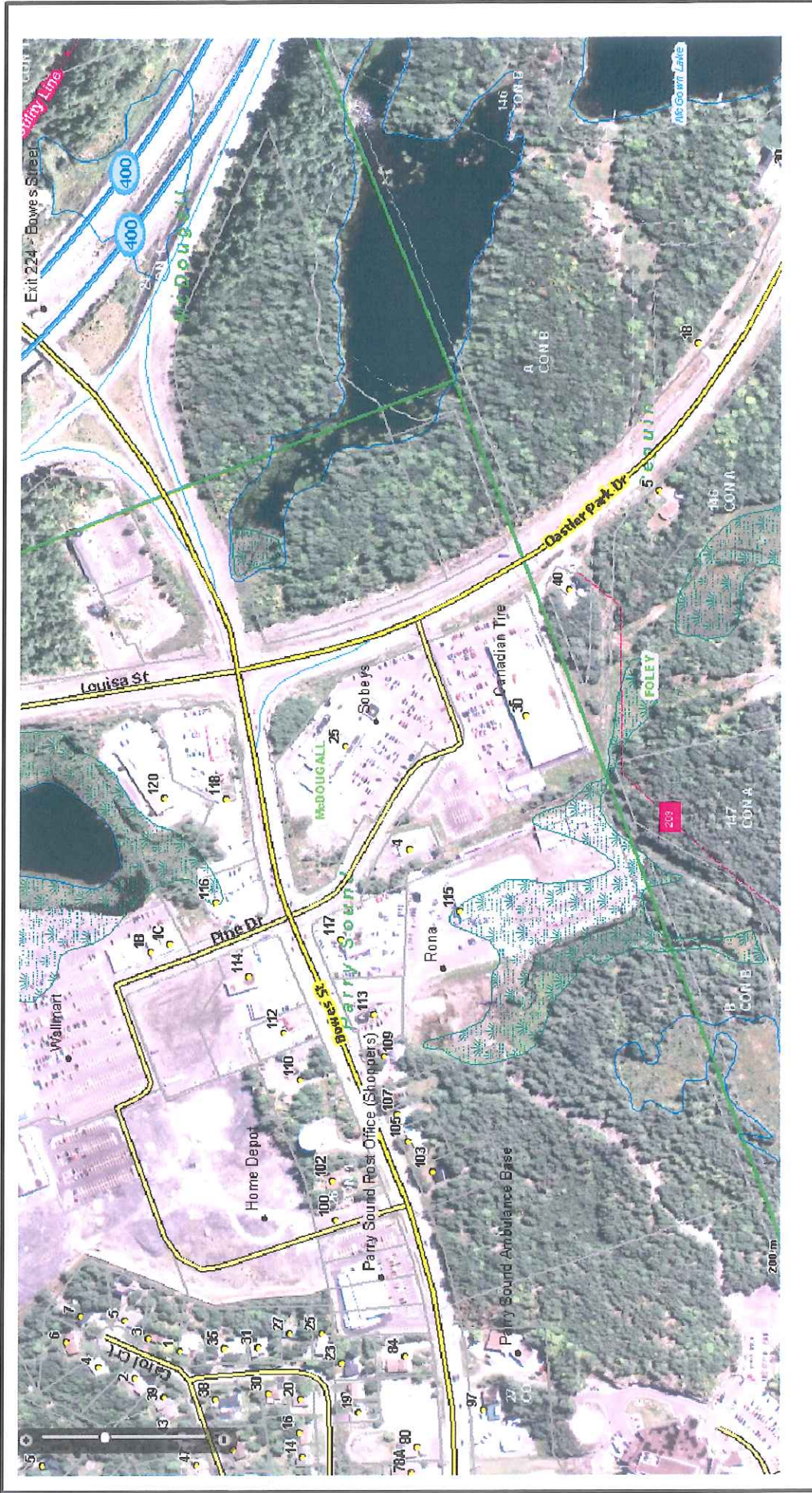
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DATE:	04/02/2007



FIRE DEPARTMENT
 MAIN ENTRANCE

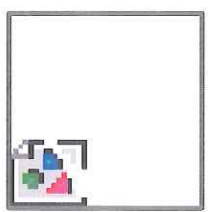
USED
 OIL
 STORAGE
 AREA

CONCRETE PAD
 PROPANE STATION



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WPSGN Internal GIS Map



Map Disclaimer

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