



Technical Standards and Safety Authority
 345 Carlingview Drive
 Toronto, Ontario M9W 6N9
 Fax: 416.231.4078
 Customer Service: 1.877.682.8772
 www.tssa.org

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.

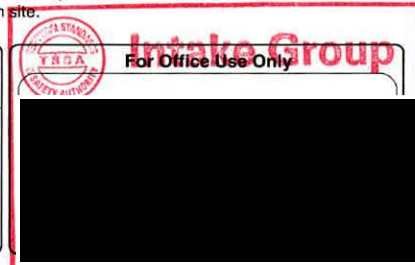
Failure to fully complete this form may result in rejection.
 Making a false statement may result in a fine or prosecution
 under the *Technical Standards and Safety Act*

Licence Number 00276251

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 2356723 Ontario Ltd. o/a Old Kennedy Road Gas Bar and Convenience Corporation No. 2356723

Operator Name (if different from above) _____

Telephone No. 905-604-3644 Fax No. _____ E-mail zdkyokushin@yahoo.com

B Street No. 35-51 Street Name / 911 Number / Address, if applicable Old Kennedy Road

Town / City or Township / County Markham Province Ontario Postal Code L3R 0L6

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

Location of facility.

D Street No. 35-51 Street Name / 911 Number / Address, if applicable Old Kennedy Road Gas Bar & Convenience Nearest Major Intersection Steeles Avenue East & Old Kennedy Road

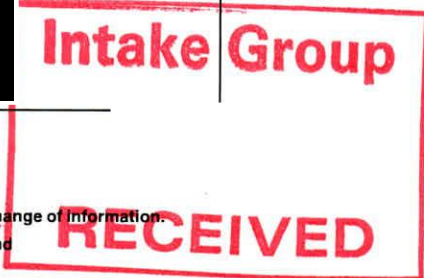
Town / City or Township / County Markham Province Ontario Postal Code L3R 0L6

Name of Licence Holder 2356723 Ontario Ltd. o/a Old Kennedy Road Gas Bar and Convenience

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). Zdzislaw Dral ROT type Temp. ROT - 100 - 11

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

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-mmm-yyyy)
Name of Licence Holder <u>2356723 Ontario Ltd. o/a Old Kennedy Road Gas Bar and Conve</u>	<u>Zdzislaw Dral</u>	<u>26-01-2017</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Zdzislaw Dral</u>	<u>Zdzislaw Dral</u>	<u>26-01-2017</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.
 2003 None

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

	PSIG	Serial Number
Tank 1:	250	392-8
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: 2,000 USWG Portable: 0 Mobile: 0

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Name of person completing this form (please print) Robert Dral	Official Title Sales Associate	
Signature Robert Dral	Telephone No. 2899238675	Date (dd-mmm-yyyy) 26-01-2017



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) Superior General Partner Inc. o/a Superior Propane			For Office Use - Party No.		
Street No. 251	Street Name / 911 Number / Address, if applicable Woodlawn Road West, Unit 217				
Town / City or Township / Country Guelph			Province Ontario	Postal Code N1H 8J1	
Telephone No. 613-391-9604	Fax No.	Contact Name Ken Gillis, Safety and Technical Specialist, Ontario			
E-mail GillisK@SuperiorPropane.com					

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>			For Office Use - Party No.		
Superior General Partner Inc. o/a Superior Propane					
Street No. 6722	Street Name / 911 Number / Address, if applicable Highway 7				
Town / City or Township / Country Peterborough			Province Ontario	Postal Code K9J 6X5	
Telephone No. 705-927-2234	Fax No. 519-836-7766	Contact Name Mark Wakeford			
E-mail wakeform@SuperiorPropane.com					

Off-site Cylinder and/or Mobile Storage None		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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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 - 2 x 50,000 litre & 1 x 25,000 litre storage Underground tanks (see-site map) for a total of 75,000 litres.

Diesel - 25,000 litre storage - underground tank (see site map)

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

A-B-C Fire Extinguishers (Dry Chemical)

1 at Propane tank

2 at Store

2 at Island pumps

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 on ISC - isolation valve between the tank and the downstream propane dispensing equipment.

2. Emergency Shut Off - at propane tank. This shuts down the pump and closes a solenoid valve upstream of hoses

3. Power supply breaker inside the gas bar building. This cuts all power to the propane system. shuts down pump and closes solenoid valve.

Maintenance and testing schedule for fire protection controls and devices.

1 - Pumps - (pumps every 3 months; pump motor: check belts monthly; grease pump every 6 month)

2. ISC valve (test for closure every 6 months)

3 Storage tank Relief Valves - inspected every 2 years; replacement schedule as per provincial regulations

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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 Zdzislaw Dral		For Office Use - Party No.		Name Zdzislaw Dral		For Office Use - Party No.	
Official Title Manager				Official Title Manager			
Telephone No. 416-523-7273		Fax No.		Cell No. 416-523-7273		Fax No.	
E-mail zdkyokushin@yahoo.com				E-mail zdkyokushin@yahoo.com			
Role and responsibilities in emergency Identify Emergency, follow emergency response plan, phone 911				Role and responsibilities in emergency Identify emergency, follow emergency response plan, call 911			
2. Facility Contact Personnel - Alternate Contact				6. Name of Facility Manager			
Name Manjit Singh		For Office Use - Party No.		Name Zdzislaw Dral		For Office Use - Party No.	
Official Title Manager				Official Title Manager			
Telephone No. 416-419-1987		Fax No.		Telephone No. 416-523-7273		Fax No.	
E-mail				E-mail zdkyokushin@yahoo.com			
Role and responsibilities in emergency Identify emergency, follow emergency plan, call 911				Role and responsibilities in emergency Identify emergency, follow emergency response plan, call 911			
3. Local Fire Services - Key Contact				7. Propane Supplier Key Contact Person			
Name Dave Decker		For Office Use - Party No.		Name Superior Propane Hotline		For Office Use - Party No.	
Official Title Fire Chief		E-mail ddecker@markham.ca		Official Title		E-mail	
Telephone No. 905-477-7000 ext 5983		Fax No. 905-479-7700		Telephone No. 1-877-873-7467		Fax No.	
Role and responsibilities in emergency Coordinate Emergency Response. Advise on Fire Services Response Liaise with police services				Role and responsibilities in emergency Identify and dispatch Superior Propane and or LPERGC emergency response personal as required.			
Fire Services Address 7300 Birchmount Road, Markham, Ontario 101 Town Centre Blvd L3R 9W3				Propane Supplier Address 251 Woodlawn Road West, Unit 217, Guelph, Ontario			
4. Local Fire Services - Alternate Contact				8. Municipal Contact			
Name Glenn Dick		For Office Use - Party No.		Name Brad Roberts		For Office Use - Party No.	
Official Title Chief Fire Provention Officer		E-mail gdick@markham.ca		Official Title Supervisor of Zoning			
Telephone No. 905-477-7000 ext 5983		Fax No. 905-477-7700		Telephone No. 416-477-7000 ext 2800		Fax No.	
Role and responsibilities in emergency Coordinate Emergency Response. Advise on Fire Response when key contact is not available and liaise with police services.				E-mail broberts@markham.ca			
Fire Services Address 101 Town Centre Blvd., Markham, ON, L3R 9W3				Municipality Name and Address City of Markham - 101 Town Centre Blvd., Markham, ON, L3R 9W3			

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Signature Robert Dral		Telephone No. 289-923-8675	Date (dd-mmm-yyyy) 26-01-2017



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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 Response Plan and Procedures provided to facility key contacts.

Training Date (dd-mmm-yyyy) February 2017	Print Name of Training Provider: Zdzislaw Dral	Please note: Course PTI 911 - 02 to be completed
	Print Name of Instructor: Zdzislaw Dral	February 2017
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 Emergency Management Procedures provided to staff.

Training Date (dd-mmm-yyyy) February 2017	Print Name of Training Provider: Zdzislaw Dral
	Print Name of Instructor: Zdzislaw Dral
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 provided to certificate holders / persons with Records of Training.

Training Date (dd-mmm-yyyy) 09-12-2016	Print Name of Training Provider: Superior General Partner Inc o/a Superior Propane
	Print Name of Instructor: Reg Adamson
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:

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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-mmm-yyyy) February 2017	Print Name of Training Provider: Zdzislaw Dral Please note: PTI 911 - 02 to be completed by Feb 2017
	Print Name of Instructor: Zdzislaw Dral
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 Emergency Management Procedures provided to staff.

Target Date (dd-mmm-yyyy) February 2017	Print Name of Training Provider: Zdzislaw Dral
	Print Name of Instructor: Zdzislaw Dral
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:

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

Target Date (dd-mmm-yyyy) 09-12-2016	Print Name of Training Provider: Superior General Partner Inc. o/a Superior Propane
	Print Name of Instructor: Reg Adamson
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:

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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

Warnings and Actions

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). It is safe to do so this could involve advising neighbours 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. Staged 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.
 Action 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, an ROT person will be on duty and be in the propane tank area. This person will be able to visually ascertain any abnormal/accidental 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 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 Zdzislaw Dral or alternate

How long will it take the facility liaison person to respond to the site.
 Key contact hour to arrive at the facility in the event of an emergency

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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"/> |

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) | | <u>40 m fire hydrant</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>30 m</u> |

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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.

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:

UPDATES PROVIDED TO CONTACT INFO ON PG. 5 OF 15.

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-mmm-yyyy)

LOCAL FIRE SERVICES

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

Local Fire Services Name	Print name JASON SCOVELL	Signature <i>Jason Scovell</i>	Date (dd-mmm-yyyy) 27-02-2017
--------------------------	------------------------------------	-----------------------------------	-----------------------------------------

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Signature	Telephone No.	Date (dd-mmm-yyyy)



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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-mmm-yyyy) <u>03 Feb - 2017</u>	Capacity of single largest propane storage vessel (USWG) <u>2000</u>
Tank setback coordinates. Indicate placement on the map.	
Front: <u>10.4 m</u>	Right side property line: <u>3.7 m</u>
Rear: <u>42.1 m</u>	Left side property line: <u>58.1 m</u>
GPS coordinates of single largest vessel: <u>43.826125 - 79.300008</u>	

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Name of person completing this form (please print) <u>Robert Dral</u>	Official Title <u>Associate</u>
Signature <u>Robert Dral</u> 	Telephone No. <u>289-923-8675</u>
	Date (dd-mmm-yyyy) <u>26-01-2017</u>



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SECTION C: SUBMISSIONS (cont'd)

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

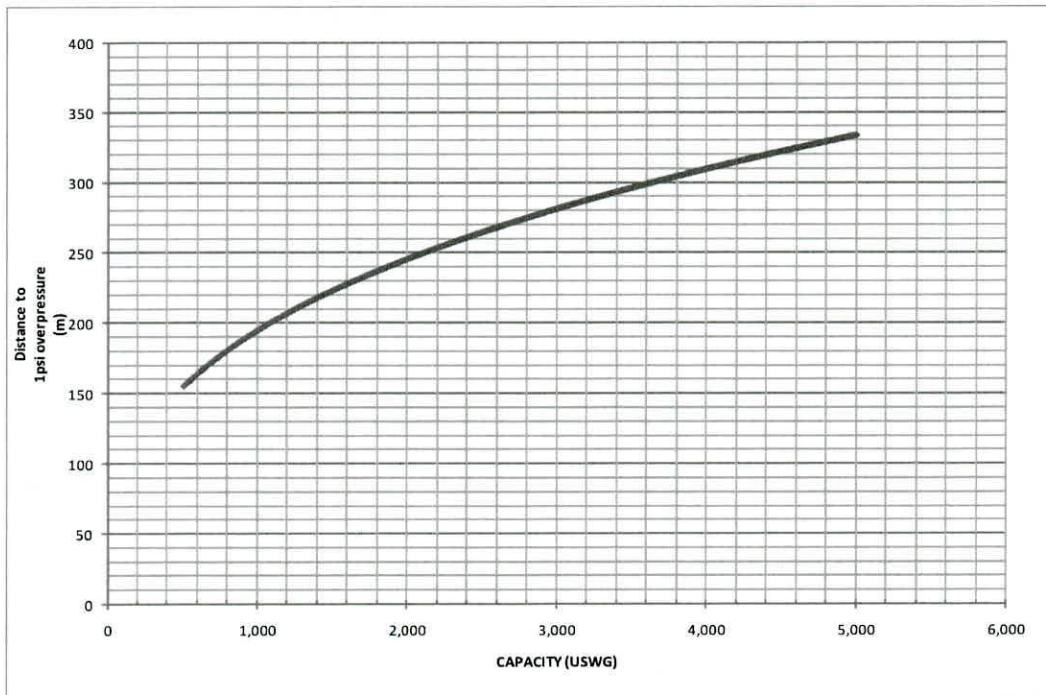
Table 1: Distance Table

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

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>Deck Depot Ltd.</u> Address: <u>58 Old Kennedy Road</u> City: <u>Markahm</u> Province <u>Ontario</u> Postal Code <u>L3R 0L6</u>				x	<u>71</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: [REDACTED] Address: [REDACTED] City: [REDACTED]			x		<u>227</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Kenny's Noodle Restaurant</u> Address: <u>4733 Steeles Avenue East</u> City: <u>Toronto</u> Province <u>Ontario</u> Postal Code <u>M1V 5N3</u>			x		<u>142</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>****Retirement Home****</u> Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m

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

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>Robert Dral</u>	Official Title <u>Associate</u>
Signature <u>Robert Dral</u> 	Telephone No. <u>289-923-8675</u> Date (dd-mmm-yyyy) <u>26-01-2017</u>



Technical Standards and Safety Authority
 345 Carlingview Drive
 Toronto, Ontario M9W 6N9
 Fax: 416.231.4078
 Customer Service: 1.877.682.8772
 www.tssa.org

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

WORKSHEET

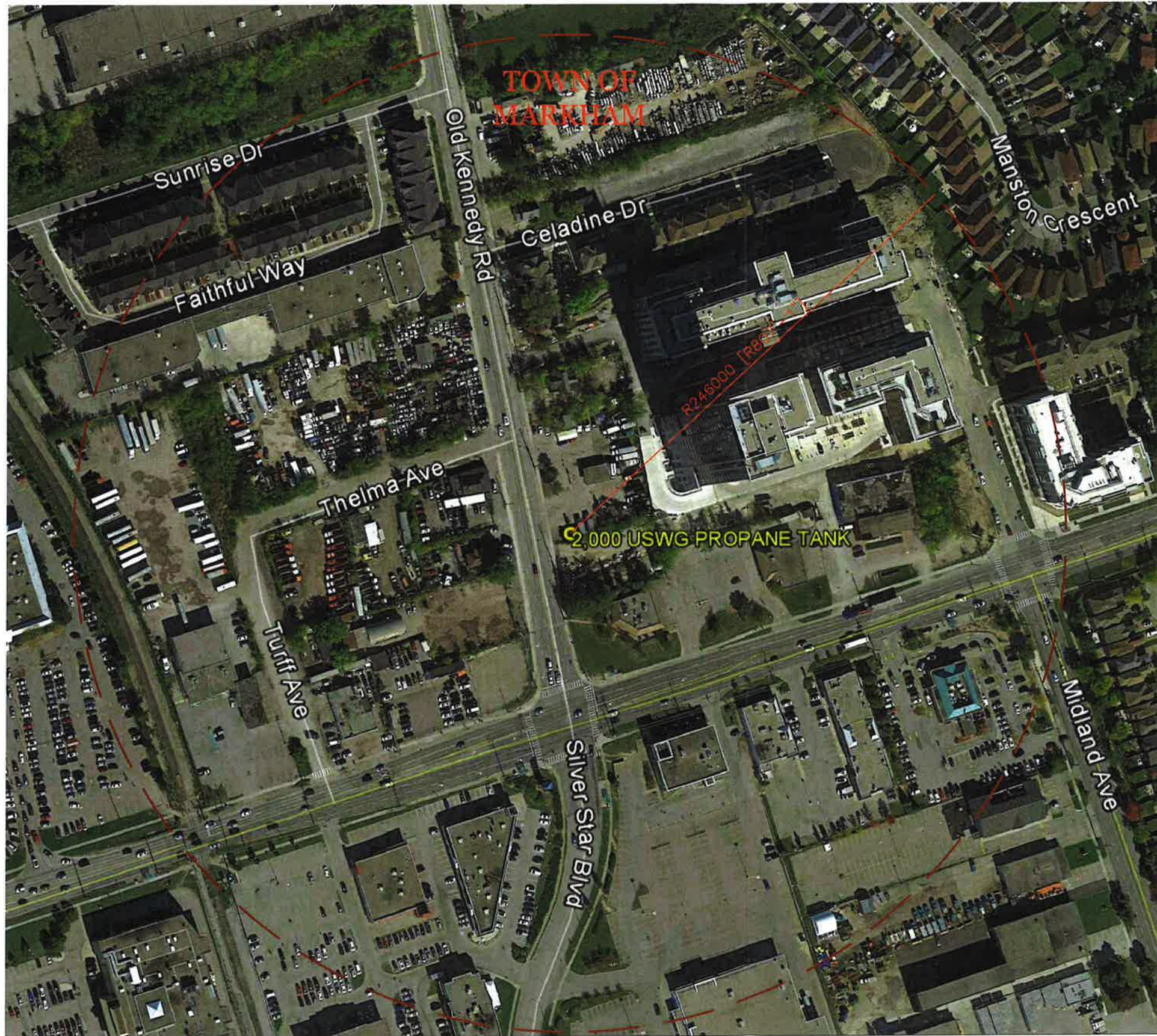
Portable Storage Additional Information Worksheet

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
Total Cylinder Capacity			

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
0	0	0
Total Tank Capacity		

Total Cylinder Capacity	0
Total Tank Capacity	2,000 USWG
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	0



NOTES:
CONSEQUENCE DISTANCE TO AN OVERPRESSURE LEVEL OF 1 psi BASED ON TNT-EQUIVALENCY METHOD, AS PER T.S.S.A. GUIDELINES FOR THE IMPLEMENTATION OF THE RISK AND SAFETY MANAGEMENT PLAN

$$D = 17 \times \left(0.1 \times W_p \times \frac{HC}{HC_{TNT}} \right)^{1/3} = 246m$$

PROPERTY LINE SETBACKS FOR PROPANE TANK	
NORTH	58.3m
SOUTH	3.5m
EAST	42.7m
WEST	8.4m

GPS COORDINATES	
LATITUDE	LONGITUDE
43°49'34.07"N	79°18'0.16"W

AS PER TSSA GUIDELINES FOR THE IMPLEMENTATION OF THE RISK AND SAFETY MANAGEMENT PLAN, THIS FACILITY ONLY REQUIRES A LEVEL 1 RSMF SUBMISSION.

PLANNING ADVISORY INFORMATION:

AS PER TSSA GUIDELINES FOR THE IMPLEMENTATION OF THE RISK AND SAFETY MANAGEMENT PLAN, THIS FACILITY ONLY REQUIRES A LEVEL 1 RSMF SUBMISSION.

TOWN OF MARKHAM
101 TOWN CENTRE BOULEVARD
MARKHAM, ON.
L3R 9W3

ATTN: MS. KIMBERLY KITTERINGHAM, CITY CLERK
PH#: 905.475.4729
FAX#: 905.479.7770
EMAIL: kkitteringham@morkham.ca

No.	Date	Description	By
0	FEB. 04, '17	ISSUED FOR RSMF	JRK

REVISIONS

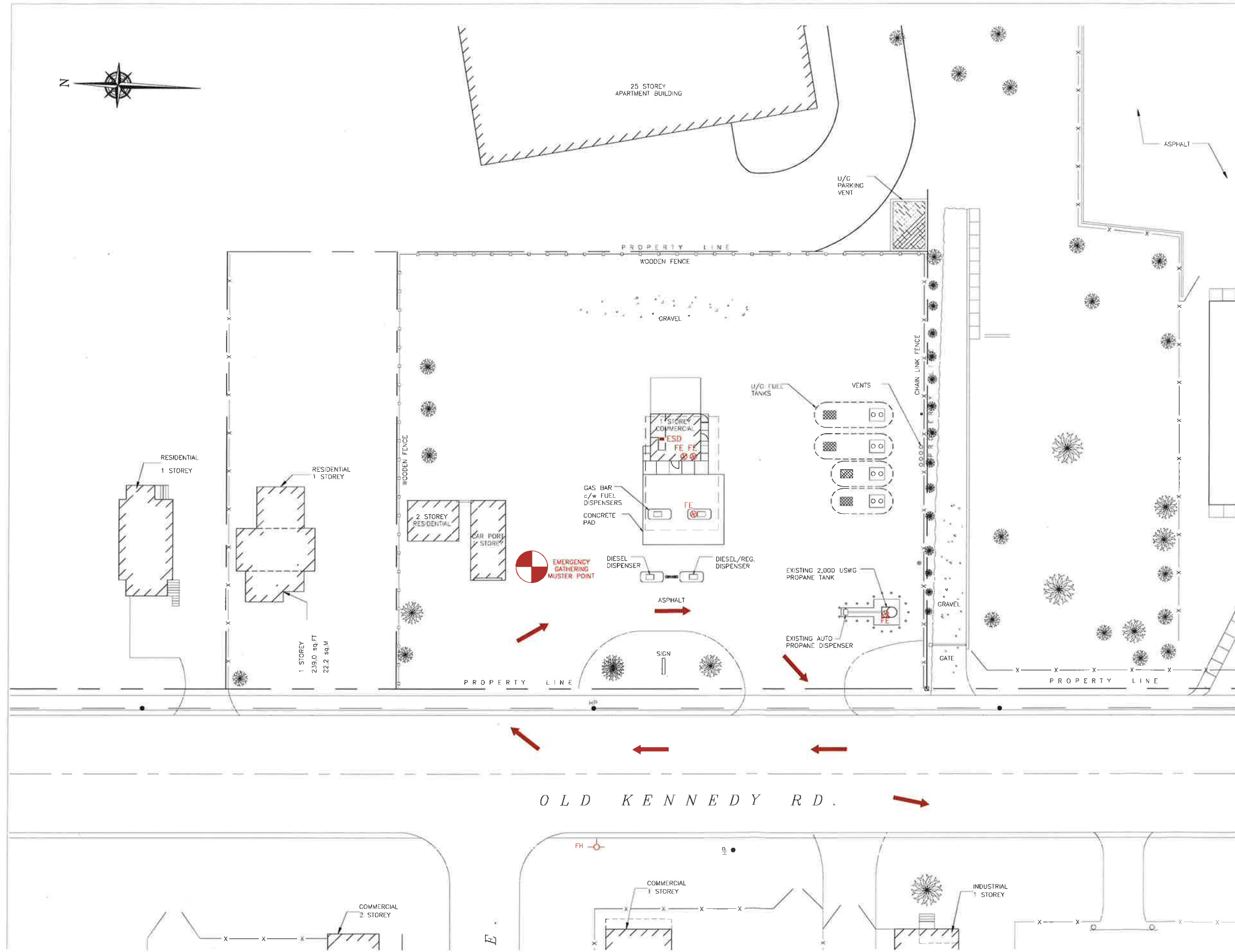
ALTENG Inc.
Alternative Energy Consulting
126 Holm Crescent, Thornhill, Ontario L3T 5J3
Telephone: (905)764-1644 Fax: (905)764-5986

Project: 2356723 Ontario Inc. (o/a XTR ENERGY) 35 Old Kennedy Road Markham, Ontario	Drawn By: D.F. Checked By: J.R.K. Date: FEB 03, 2017
----------------------------------------------------------------------------------------------	------------------------------------------------------------

Drawing Title: BLAST RADIUS LAYOUT FOR EXISTING 2,000 USWG VERTICAL	Drawing Scale: 1:1000
---------------------------------------------------------------------------	-----------------------

Drawing Number: P-200	File Number: 170100
--------------------------	------------------------

ACAD INFORMATION	
Drawing File:	170100-P-200
Drawing Size:	D
Plotting Scale:	1=1



ZONING INFORMATION:

LOT AREA:	4,309 sq.m.
BUILDING AREA:	1,016 sq.m.
LOT COVERAGE OF BUILDING:	2.3%

PROPERTY LINE SETBACKS FOR PROPANE TANK

NORTH	58.3m
SOUTH	3.5m
EAST	42.7m
WEST	8.4m

GPS COORDINATES

LATITUDE	LONGITUDE
43°49'34.07"N	79°18'0.16"W

- LEGEND:**
- FE ⊕ FIRE EXTINGUISHER
 - FH ⊕ FIRE HYDRANT
 - ESD ⊠ EMERGENCY SHUT-DOWN
 - ➔ FIRE ROUTE
 - ⊕ MUSTER POINT (OPTION BASED ON WIND DIRECTION)

EXISTING LICENSE: 000276231

No.	Date	Description	By
0	FEB 04, '17	ISSUED FOR RSMP	JRK



ALTENG Inc.
Alternative Energy Consulting
126 Halm Crescent, Thornhill, Ontario L3T 5J3
Telephone: (905)764-1644 Fax: (905)764-5986

Project: 2356723 Ontario Inc. (o/a XTR ENERGY) 35 Old Kennedy Road Markham, Ontario	Drawn By: D.F. Checked By: J.R.K. Date: FEB 03, 2017
Drawing Title: EXISTING 2000 USWG VERTICAL PROPANE TANK c/w AUTO AND CYLINDER REFILLING	Drawing Scale: 1:200
Drawing Number: P-101	File Number: 17010D
	ACAD INFORMATION Drawing File: 17010D-P-101 Drawing Size: D Plotting Scale: 1=1