Technical Standards and

14th Floor - Centre Tower 3300 Bloor Street West Standards and Safety Authority Fax: 416.231.4903
www.lssa.org 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.

	Sovia or portable proparite of		
	Failure to fully complete this form may result in rejection. laking a false statement may result in a fine or prosecution under the <i>Technical Standards and Safety Act</i>		
Licence Number	0032970001-C		
Check applicable type	of propane operations.		
Cylinde	r Motor Fill Filling Plant Ca	ard/Keylock	
Submit along with this	completed application a Facility Site Plan and a Map of the Surrounding	g Area.	
	SECTION A: GENERA	L INFORMATION	
	ed applies to TSSA for a review for an RSMP u	nder Ontario's Technical Stand	dards and Safety Act,
Company Nam	e	Oi	ntario Corporation No., if applicable
A OL	O CUT BOAT LIVERY	/	NIA
Operator Name	e (if different from above)		
KA	V FERRIS		
Telephone No.	Fax No. E-mail Address		I -
519-5		RIS @EXCULINIA	. com
B Street No.	Street Name, Lot / Concession No.		
J 7	ROGER'S HIVE	Province	Postal Code
1	Township County BEACH	Province	NOF IMO
LONG Mailing adds	ess if different from above.	UNI	1102 11110
	Street Name, Lot / Concession No.		w.
C Street No.	RK#3		
Town / City or T	ownship / County	Province	Postal Code
/	OPT ROWAN	ONT	NOE IMO
	Container Refill Centre or Filling Plant		
Location of fa Street No.	scility. Street Name, Lot / Concession No.	Nearest major intersection	
D 39			No Con Con Born
	ROCER'S HVE	ERIE AVE A	Postal Code
	ownship / County	Province	F + 1
LON	G POINT DEACH	ONT	NOE IMO
Name of Licence	e Holder		
F /)	V FERRIS		
	or Management person as defined in the regulation holding the Record	of Training (BOT) BC	OT type
1		1	100-1 PTI
	municipalities if the facility or its hazard distance touches multiple bor	rdore)	100-11.
C	3	1000	1
	OUTH WALSINGHAM		
Hours of operati	on.	10000	
1170-000-000-00-000-00-00-00-00-00-00-00-0			
			v.)

This document is valid until the next licence renewal date. You are required by law to notify TSSA of any change of information.

Print name	Signature	Date (dd-mm-yyyy)
Name of Licence Holder	My Lern	n 28/05/11
Name of Senior Management person as defined in the	111 4	1 20/05/11
Regulation holding the Record of Training	Mulerr	0 20100/11



Technical Standards and

14th Floor - Centre Tower 3300 Bloor Street West Toronto Ontario M8X2X4 Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

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	SECTION A: GENERAL INFORMATION (cont'd)			
ndicate the year the facility was established. $29 \text{ YERRS } 1912$	Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.			
lentify the psig rating and serial number for ea	ach fixed propane storage tank on site.			
PSIG	Serial Number			
Tank 1:	026662			
Tank2:				
Tank3:				
	table, and mobile, and provide detailed inventory that includes the number of tank/vessel for			
	e capacity of each tank/vessel, on a separate document.			
Fixed: 1000 115.46				
Fixed: _/CCC Z/J:W: G!	Portable: Mobile: NA			

Name of person completing this form (please print)	Official Title	
DUE FERRIS	MANAGER	
Signature	Telephone No.	Date (dd-mm-yyyy)
There Ferris	519-586-3302	28/05/11
FS 09195 (11/10) Page 2 of 15		7



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Technical Standards and Safety Act Propane Storage and Handling Regulation

SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established.		nt modifications, as defined in s.1, O.Reg 211/01, since esta	ablishment.
28 yra 1982			
Identify the psig rating and serial number for	each fixed propane storage tank on s	site.	
PSIG	Serial Number		
Tank1:			
	25.		
Tank2:			
Tank3:	The control of the same of the	an en re en en en en	
Enter capacity of propane in USWG, fixed, po	ortable, and mobile, and provide deta	ailed inventory that includes the number of tank/vessel for	or
each type (fixed, portable, and mobile) and th	ne capacity of each tank/vessel, on a	separate document.	
Fixed: 1662 41 J. 41 G.	Portable:	Mobile: 14 14	
Declaration: I am	aware that it is an offence to give	false information in this document and	
і пегеру ас	eclare that the information I have	Arren nare is a ne and combiere.	
Name of person completing this form (please pr	int)	Official Title	
Dan FERRY		18 tolar direct	

Telephone No.

319.326.3302

Date (dd-mm-yyyy)

Signature



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Fax: 416.231.4903

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

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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) Contact Name Conta
Town / City or Township / Country Town / City or Township / Country Town / City or Township / Country Province Province Postal Code N/16 343
Town / City or Township / Country Town / City or Township / Country Town / City or Township / Country Province Province Postal Code N/16 343
Town / City or Township / Country Town / City or Township / Country Town / City or Township / Country Province Province Postal Code N/16 343
Town / City or Township / Country STRATHROY Contact Name Contact Name
Talanhara Na Fay No Contact Name
Telephone No. Fax No. Contact Name
E-mail T driff GER. (a) mcrobert Fuels, com.
E-mail
rdRIEDGERICO MOROBERT FUELS, Com.
Name of Propane Transporter. If same as above, please check box.
Street No. Street Name Lot / Concession No.
Town / City or Township / Country Province Postal Code
Telephone No. Fax No. Contact Name
E-mail
Consider the standard of the impulgion of the Party No.
Off-site Cylinder and/or Mobile Storage Capacity stored off-site, in USWG
NA
Street No. Street Name Lot / Concession No.
Town / City or Township / Country Province Postal Code
Telephone No. Fax No. Contact Name
Note: Customer storage is not considered off-site storage.

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

Name of person completing this form (please print)	Official Title	
SUE FERRIS	MANAGER	
Signature /	Telephone No.	Date (dd-mm-yyyy)
Die Lerro	519-586-3302	28/05/11

FS 09195 (11/10) Page 3 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 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. UNDERCROUND GASOLINE STORAGE TANKS 2 - 9000 LTTRES REFER TO LICENCE NUMBER 0076462811- C
Description of fire and emergency equipment indicated on facility site map. 20 B.C. RATING AT DISPENSER (PROPANE)
AND MSIDE BUILDING
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. ISC VALVE CONNECTED BY CABLE TO 212 FUSE ASLE LINKY SPRING SYSTEM (PROPANE), EMERGENCY SHUF OFF AT STORE. AUTOMOTIC SOLENOID SHUT OFF VALVE LOCATED ON THE CYLINDER LINE WHICH SHUTS OFF PUMP AND FLOW OF GAS. Maintenance and testing schedule for fire protection controls and devices. CHECKED MAINT BY OPERATORS CHECKED ANNUALLY BY PROPANE SUPPLIFER AS REQUIRED. FIRE EXTINGUISHERS ARE INSPECTED ANNUALLY

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

Name of person completing this form (please print)	Official Title	
SUE FERRIS	MANAGER	
Signature /	Telephone No.	Date (dd-mm-yyyy)
Que Telsus	519-586-3302.	28/05/11

FS 09195 (11/10) Page 4 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 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 STAY FERRIS	For Office Use - Party No.	Name SUE FERRIS	For Office Use - Party No.	
Official Title PROPRIETOR	e e	Official Title PROPRIETOR		
Telephone No. Fax No.	-586-3433	Cell No.	x No. 519-586-3433	
E-mail SUE FERRIS (Q) EXECUTAINED	com	E-mail SUF FERRIS @ EXECULIN	A. Com	
Role and responsibilities in emergency	ICABLE PARTIES	Role and responsibilities in emergency		
INIT PATE EMERGENCY CAN	LS AND ADVISE	ADVISE APPLICABLE	PARTIES	
2. Facility Contact Personnel - Alternate C	ontact)	6. Name of Facility Manager		
Name RAY FERRIS	For Office Use - Party No.	Name SLIE FERRIS.	For Office Use - Party No.	
Official Title		Official Title		
Telephone No. Fax No.	586-3302	Telephone No.	x No. 519-586-3433	
E-mail		E-mail		
SUE FERRIS (Q EXECULINA).	com	Role and responsibilities in emergency	UNK, Cam	
Role and responsibilities in emergency IN ITIATE EMERGENCY CALL	S AND CONTA	VINITIATE EMERGENCY	CALL AND	
ADVISE APPROPRIPIE PAR	,	AND ADVISE APPLICA		
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person		
Name ED VAN HIMME	For Office Use - Party No.	Name BRIAN MACKEN	For Office Use - Party No.	
Official DISTRICT FIRE CHIEF - POP	LY ROWAN	Official Title		
Telephone No. Sig \$86-3984 Fax No.		Telephone No. 519-246-1019	x No.	
E-mail ed Vanhayme & norfolklou	pully - ca	E-mail BMRIKENZIE @ MCRO		
Role and responsibilities in emergency	•	Role and responsibilities in emergency		
See attacked commentary		OFFICE CONTAC	,7 .	
4. Local Fire Services - Alternate Contact		8. Municipal Contact)	
Name KALLY DICKS	For Office Use - Party No.	Name BEV WOOD	For Office Use - Party No.	
Official Title VILLE CHIEF	/	Official Title , CL4RX	/ /	
Telephone No. (19 426-411) Fax No.	519 426-4140	Telephone No. 519 426-5870 Fa	× No. 519 426-8573	
E-mail firechiet enorfolkcounty. c	a	E-mail Dev-Hood Onorfolke	ounly.a	
Role and responsibilities in emergency		Municipality /	\	
See attached commentary	1	Norbolk Count	1	
		9.42 (0.43) - 10°.	1	

Name of person completing this form (please print)	Official Title	
Signature	Telephone No.	Date (dd-mm-yyyy)
Touc Ferris	519-586-3302	28/05/11



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

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

2. Additional Safety Measures

Describe any other measures in place at the facility that exceed the minimum Code and Standards requirements.	
	with a local plant for their self-and, time streamed and believes entered
\	

Name of person completing this form (please print)	Official Title	
SUE FERRIS	MANIA	CEP
Signature T. I. b. b. i. o.	Telephone No. 5/9-586-33	Date (dd-mm-yyyy)
FS 09195 (11/10) Page 6 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 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: PROPANE, IRRINING INSTITUTE
8/9/08	Print Name of Instructor: RON DRIED GER
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 Em	ergency Management Procedures provided to staff.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: PROPANE TRAINING INSTITUTE
8/9/08	Print Name of Instructor: Roy Deifder.
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 pro	ovided to certificate holders / persons with Records of Training.
Training Date (dd-mm-yyyy)	Print Name of Training Provider: PROPANE TRAINING INSTITUTE
8/9/08	Print Name of Instructor: RON DRIEDGER
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:

Name of person completing this form (please print)	Official Title	
SUE FERRIS	MANAGEB	·
Signature	Telephone No.	Date (dd-mm-yyyy)
Sur Firms	519-586-3302	28/05/11



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

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

4. Emergency Training Plan for Coming Year

Training on Emergency Res	sponse Plan and Procedures provided to facility key contacts.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: DROPANE TRAINING INSTITUTE
1/08/11	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 Em	ergency Management Procedures provided to staff.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: PROPANE TRAINING INSTITUTE
1/08/11	Print Name of Instructor: 7. B. A.
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 pro	vided to certificate holders / persons with Records of Training.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: PRODANE IRBUNING INSTITUTE
1/08/1	Print Name of Instructor: $\mathcal{T}.B.A$.
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:

Name of person completing this form (please print)	Official Title	
SUE FERRIS	Manager)	
Signature	Telephone No.	Date (dd-mm-yyyy)
Sur Fishin	519-586-3302	28/05/11
ES 09195 (11/10) Page 8 of 15		

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

	-17 XUI	
	SECTION B: EMERGENCY AND PREPAREDNESS RETURN The licence holder will complete Section B in consultation with the 6. Building and Site Security and Procedures	e local Fire Services.
		Yes No
1.	Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)?	
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?	
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?	
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?	
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)	
9.	Is the schedule of maintenance and testing activities retained on site?	
	7. Water Supply	
	propane licence holder should work with the local fire department to determine water ply 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?	
2.	Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?	口
3.	What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metresonly)	26
ii.	What is the unobstructed distance to the closest approved water supply with year	No 11 Allo 11

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

Name of person completing this form (please print)	Official Title	
SUF FERRIS	MANACER	
Signature	Telephone No.	Date (dd-mm-yyyy)
Sur Ferris	519-586-3362	06/08/2011

round access if there are no hydrants? (distance in metres only)



Warnings and Actions

Technical Standards and Safety Authority Fax: 416.231.4903 www.tssa.org

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

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

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

5. Emergency Response Communications Plan

ETTHERY AND PROPERTIES, OR IN HIS RESERVE. AND DIABLES. SHELL CAPTOR ENERGY STEVENS. VIB. 91. IN THE EVENT OF BY ENERGY. PLAN THE DEOPRIESTED OF AN HIS RESERVED. SERVICES VIB. 91. IN THE EVENT OF BY ENERGY. PLAN THE DEOPRIESTED OF AN HIS RESERVED. THE SET DEAD LOCATED TO A HEWEST, BLSO WERNING BRY ONE TO THE EAST. 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 PROPERTIES OF IN HIS RESERVED THE INDIVIDUAL NOTIFY TO CRILLY TO EVEN DESCRIBE AREA, WHAT CRILL EMERGENCY SERVICES BY CELL PHONE OR DIVINGATED BY THE SOLE AREA, WHAT CRILL EMERGENCY SERVICES BY CELL PHONE OR DIVINGATED BY THE SOLE AREA, WHAT CRILL EMERGENCY SERVICES BY CELL PHONE OR DIVINGATED BY THE SOLE AREA, WHAT CRILL EMERGENCY SERVICES BY CELL PHONE OR DIVINGATED BY THE SOLE AREA, WHAT CRILL EMERGENCY SERVICES BY CELL PHONE OR DIVINGATE AND ACCOUNTS OF THE PROPERTY OF ANY HEXADO THAT DIVINGATE PROPERTY SERVICES AND PROPERTY OF ANY HEXADO THAT DIVINGATE AND ACCOUNTS OF THE PROPERTY OF ANY HEXADO THAT DIVINGATED BY THE SAFE DEPROPERTY OF ANY HEXADO THAT DIVINGATED BY THE SAFE DEPROPERTY OF ANY HEXADO THAT DIVINGATED BY THE SAFE DEPROPERTY OF ANY HEXADO THAT DIVINGATED BY THE SAFE DEPROPERTY OF ANY HEXADO THAT DIVINGATED BY THE SAFE DEPROPERTY OF ANY HEXADO THAT DIVINGATED BY THE SAFE DEPROPERTY OF ANY HEXADO THAT DIVINGATED BY THE SAFE DEPROPERTY. THE EVENT EMECRETY SERVICE WERD TO RECESS THE BURNOW OF WHEN IT IS ACCOUNTS OF THE GENERAL SUPERIOR OF THE EMERGENCY. THE LIVERING WARLAND OF WHEN IT IS ACCOUNTS. BY THE PROPERTY OF THE SAFE DEPROPERTY OF THE EMPLOYED ON THE BURNOW OF WHEN IT IS ACCOUNTS. BY THE PROPERTY OF THE SAFE DEPROPERTY OF THE EMPLOYED ON THE BURNOW OF WHEN IT IS ACCOUNTS. BY THE EMPLOYED ON THE BURNOW OF WHEN IT. DESCRIBE PROVIDED ON THE BURNOW OF THE EMPLOYED OF THE BURNOW OF	Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).
DESCRIBE BY A LOCATED TO THE FACULATY IS EVACUATED AND DEPSONS BLE DIRECTED TO A THE SOFE PREA LOCATED TO THE WEST. 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 PROPERETOR OF MEMORY SERVICES THE INDACAGES, WHE MOTIFY TO CALLY TO EVERY DEPSON ON THE GROWNS TO SYNCUPTE TO THE BRED INDICATED AS THE SOLE AREA, WHE CALL CALL EMERGENCY SERVICES BY CELL INDICATED AS THE SOLE AREA, WHE EMERGENCY SERVICES BY CELL INDICATED AS THE SOLE AREA, WHE EMERGENCY SERVICES BY CELL INDICATED AS THE SOLE AREA, WHE EMERGENCY WARNING to emergency response authorities (including a process to ensure that a call is placed to 911). THE PLOPELETOR OF MEMORY PROPERTY OF ANY HAZARD THAT DISKY RESULT IN A MEMORY DISCONSERY OF ANY HAZARD THAT DISKY RESULT IN A MEMORY DISCONSERY OF ANY HAZARD THAT DISKY RESULT IN A MEMORY DISCONSERY OF ANY HAZARD THAT DISKY RESULT IN A MEMORY DISCONSERY OF ANY HAZARD THAT DISKY RESULT IN A MEMORY DISCONSERY OF ANY HAZARD THAT DISKY RESULT IN A MEMORY DISCONSERY OF ANY HAZARD THAT DISKY RESULT IN A MEMORY DISCONSERY OF ANY HAZARD THAT DISKY RESULT IN A MEMORY DISCONSERY OF ANY HAZARD THAT DISKY RESULT IN A MEMORY DISCONSERY OF ANY HAZARD THAT DISKY RESULT IN A MEMORY DISCONSERY OF ANY HAZARD THAT DISKY RESULT IN A MEMORY DISCONSERY DISKONS TO THE BUILDING WHEN IT IS A CALLED AND THE SAFE DEPOSATED IN THE SAFE DEPOSATED AND THE SAFE DEPOSATED IN THE SAFE DEPOSATED AND THE BUILDING WHEN IT IS A CALLED AND THE ADDITION OF THE BUILDING WHEN IT IS A CALLED AND THE ADDITION OF THE BUILDING WHEN IT IS A CALLED AND THE ADDITION OF THE EMERGENCY, THE LIGENCE HOLDED SHOW IN DISCONSE BY JULIE HOLDED SHOW IN THE SAFE DEPOSATED AND THE BUILDING WAR HAVE HOLDED SHOW IN THE SAFE DEPOSATED BY JULIE BUILDING WAR HAVE HOLDED SHOW IN THE SAFE DEPOSATED BY JULIE BUILDING WAR HAVE HOLDED SHOW IN THE BUILDING WAR HAVE HOLDED SHOW IN THE BUILDING WAR HAVE HOLDED BY JULIE BUILDING WAR HA	EITHER THE PROPRIETOR, OF IN HIS ABSENCE THE MAKAGER SHALL CONTACT EMERGENCY
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	How long will it take the facility liaison person to respond to the site.

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

Name of person completing this form (please print)	Official Title	
SUE FERRIS	MANACER	
Signature	Telephone No.	Date (dd-mm-yyyy)
Sue Forris	519-586-3302	28/05/11

FS 09195 (11/10) Page 9 of 15

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Level 1 Risk and Safety Management Plan (R.3MP) 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 I 6. Building and Site Security and Procedures	local Fire Serv	vices.	
		Yes	No	
1.	Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)?			
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?	W		
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?			
5.	Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?	1		
6.	Are weighing systems validated for accuracy?	W		
7.	Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?	V		
8.	Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves)	4		
9.	Is the schedule of maintenance and testing activities retained on site?			
	7. Water Supply			
The sup	propane licence holder should work with the local fire department to determine water ply 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?			
2.	Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?		凶	
3.	What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)	26	<u></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)	NowIN 6	+ AllRovEI)	

Name of person completing this form (please print)	Official Title		
Signature	Telephone No.	Date (dd-mm-yyyy)	



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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.

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: (ad-mm-yyyy)	8. Licence holder and local Fir	
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: (ad-mm-yyyy)	Has the local fire service had an opportunity to review the Emergency Respon	<u></u>
In response to the above comments, the following action(s) is required: The Licence holder will respond to the Local Fire Services comments by: Cocal Fire Services	Fire services comments, if any: \$\frac{\f	4
Date (dd-mm-yyyy) LOCAL FIRE SERVICES The undersigned has reviewed Section B of the Risk and Safety Management Plan Fire Services. Signature Date (dd-ntm-yyyy) R 06 261 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.	To be completed by the Licence Holder In response to the above comments, the following action(s) is required:	
Date (dd-r/m-yyyy) Cocal Fire Services Name Declaration: I am aware that it is an offence to give false information in this document and Thereby declare that the information I have given here is true and complete.	The Licence holder will respond to the Local Fire Services comments by:	(dd-mm-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.		
I hereby declare that the information I have given here is true and complete. Official Title	Local Fire Services Name Frint name Class Signate ERRU Frint name Signate Signate Frint name Signate Signa	
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I hereby declare that the information I have given here is true and complete. Official Title		
	Declaration: I am aware that it is an offence to give fa I hereby declare that the information I have gi	lse information in this document and ven here is true and complete.
	lame of person completing this form (please print)	Official Title

Name of person completing this form (please print)	Official Title	_o O
Signature .	Telephone No. 5/9-586-330	Date (dd-mm-yyyy) 0 6/08/2811

FS 09195 (11/10) Page 11 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 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?
If not, please explain (e.g., no fire services).
Fire services comments, if any:
SEE SUPERIO COMMERIMEN
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.
Local Fire Services Name Print name ERRY R. J. W. Signature 3 V. W. B. 06 201

Name of person completing this form (please print)	Official Title	
Signature	Telephone No.	Date (dd-mm-yyyy)



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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 (cont'd)

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.
- Location of emergency shut off/shut down switches/valves.

Map of Surrounding Area.

The licence holder will submit a scaled aerial map of the surrounding area showing the following information:

- 7. The capacity and placement of the single largest propane storage vessel, including its setback from the front, rear and side property lines.
 - 8. GPS co-ordinates of the single largest vessel.
- 9. Visual indication of the single largest fixed vessel and a circle made using the distance in Table 1 as the radius from the single largest fixed vessel.
- 10. Clear indication of the municipality or municipalities present within the circle.
- 11. Visual indication of property line information.
- 12. The location and name of roads within or abutting the site.
- 13. Key note to the drawing indicating the facility's municipal address, municipal lot number(s) and concession lines as applicable, and the date the map was prepared.
- 14. Address and contact information for each municipality (municipal clerk or secretary-treasurers of planning board). (Refer to page 5.)
- 15. Complete "Required Mapping Information from Updated Site Plan" in table below .

Required Mapping Information from Updated Site Plan

Date Map Prepared (dd-mm-yyyy)	Capacity of single largest propane storagevessel (USWG)
Tank setback coordinates. Indicate place Front: 58 Rear: 399	17.67m Right side property line: 91 27.7m
GPS coordinates of single largest vesse	1: N 42° 35,204' W 080° 23.686.

Name of person completing this form (please print)	Official Title	
DIE FERRIS	MANACER	
Signature	Telephone No.	Date (dd-mm-yyyy)
Luc Ferrie	519-586-3362	28/05/18
FS 09195 (11/10) Page 12 of 15		



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Technical Standards and Safety Act

Propane Storage and Handling Regulation

SECTION C: SUBMISSIONS (cont'd)

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

Table 1: Distance Table

Water Capacity (litres)	Nominal Water Capacity (USWG)	Distance to 1 psi overpressure (m)
1,890	500	155
3,780	1,000	195
4,920	1,300	213
6,620	1,750	235
7,130	1,885	241
7,560	2,000	246
18,900	5,000	333

Formula:

 $D = 16.94 \times (1.524 \times C)^{1/3}$

D = Distance to overpressure of 1 psi (meters)

C= Tank Total Capacity in USWG

Parameters:

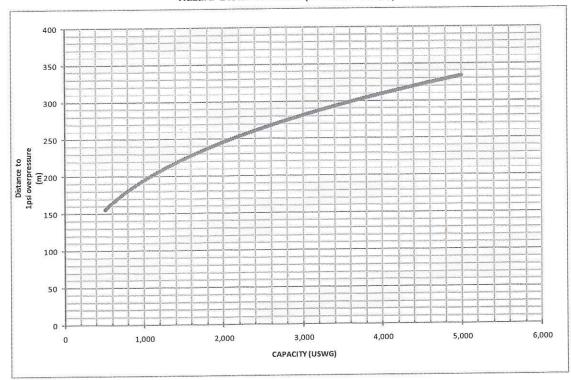
Density of Propane is 0.5033 kg per litre @ 15 C

Assume all vessels are 80% full

1 gallon [US, liquid] = 0.003785411784 cubic meter

1 cubic metre = 264.17 USWG

Hazard Distance Chart (EPA-TNT model)



Name of person completing this form (please print)	Official Title	
SUE FERRIS	MANAGER	
Signature	Telephone No.	Date (dd-mm-yyyy)
Aus Firis	519-586-3302	28/05/11



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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		and Fe	of Build eatures th an ") 2-10	(")	Distance from Tank to Closest Building or Feature
Industrial buildings or parks or golf courses Name: Address: City: Province Postal Code	χ				m
Residential building units specifically permanent single family dwellings, condominiums, and apartments.			X		<u>40</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: Address: City: Province Postal Code	X				m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: Address: City: (FORGE THOMSON)	X				m
Sensitive institutions institutions, and prisc Name: PORT ROWAN NOEIMO Address: City: BOB NEWMAN					m
Emergency responde 34 ROCER'S AVE, R.R. #3 65 M Name: PORT ROWAN, ONT NOEIMO) .				m
* For multi-unit buildir PORT POWLDA) NOF 1000					

Name of person completing this form (please print)	Official Title	
SINF FERRIS	MANAGER	
Signature	Telephone No.	Date (dd-mm-yyyy)
Luc. Ferrio	519-586.3302	28/05/11



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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	and the state of t	
# 100	29.5		
# 40	11.75		
# 33.3	9.62		
# 30	8.8	3	26,4
# 20	5.8	6	34,8
# 10	2.9		
# 5	1.5		

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
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	and account of the first first first first first first section and the section of	
Total Tank Capacity		
Compression of the Compression o		
Total Cylinder Capacity		
Total Tank Capacity 1000 //	S. W.G. 1000 4.5	WG.
Total Portable Capacity	hington from the transfer of the second of t	

Name of person completing this form (please print)	Official Title	
Signature	Telephone No.	Date (dd-mm-yyyy)
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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

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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	1				
Total Portable Capacity					

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

Name of person completing this form (please print)	Official Title	
SUF FFRRIS	MANAGEP	
Signature	Telephone No.	Date (dd-mm-yyyy)
August Francis	519-586-3302	28/05/11
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FS 09195 (11/10) Page 15 of 15

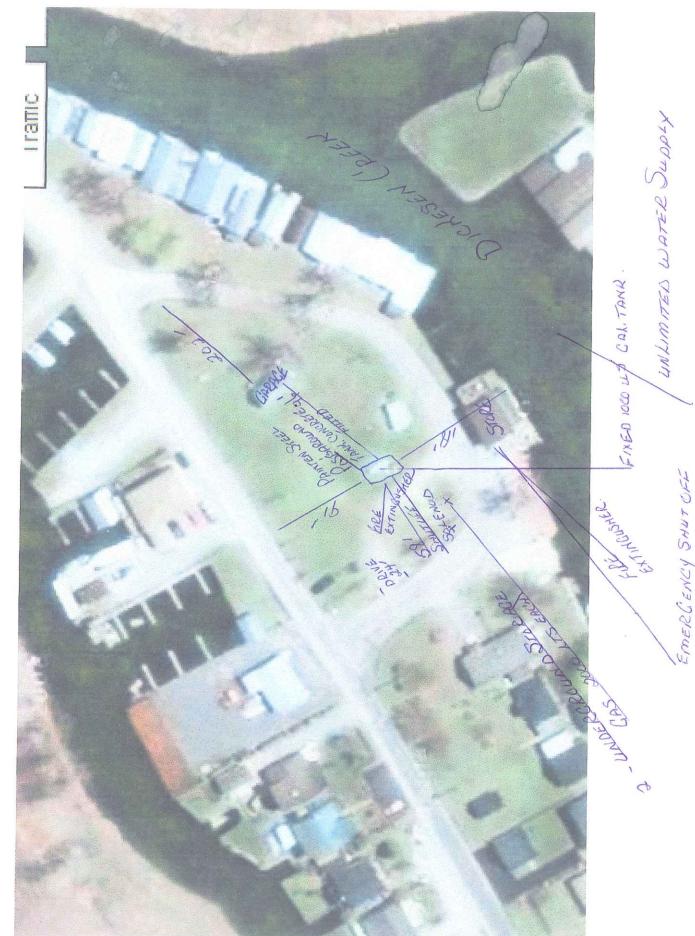


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GPS N 420 35, 204 1 W 0800 23. 686 SCALE 1 CM- 100'

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