



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.

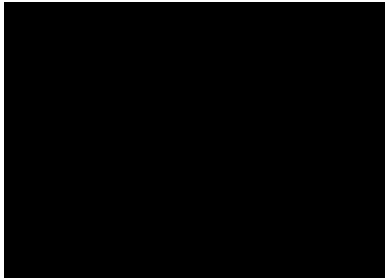
Failure to fully complete this form may result in rejection.
 Making a false statement may result in a fine or prosecution
 under the *Technical Standards and Safety Act*

Licence Number 000076646181

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 United Rentals of Canada Inc. Ontario Corporation No., if applicable

Operator Name (if different from above)
Brian Linn

Telephone No. (905) 664-5007 Fax No. (905) 643-1008 E-mail blinn@ur.com

B Street No. 45 Street Name / 911 Number / Address, if applicable Oriole Avenue

Town / City or Township / County Hamilton Province Ontario Postal Code L8E 5E4

Mailing address if different from above.

C Street No. Same as Above 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. 45 Street Name / 911 Number / Address, if applicable Oriole Avenue Nearest Major Intersection Fifty Road & The Queensway

Town / City or Township / County Hamilton Province Ontario Postal Code L8E 5E4

Name of Licence Holder United Rentals of Canada Inc.

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). Piero Galassi ROT type Cert. No. 88404, course 100-01

Municipality (or municipalities if the facility or its hazard distance touches multiple borders)
City of Hamilton

Hours of operation

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

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

Printname	Signature	Date (dd-mm-yyyy)
Name of Licence Holder <u>Brian Linn</u>		<u>27-04-2012</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Piero Galassi</u>		



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established. 2006 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. NIL

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

	PSIG	Serial Number
Tank1:	<u>250</u>	<u>6970</u>
Tank2:	_____	_____
Tank3:	_____	_____

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: 1300 USWG Portable: 1502.7 USWG Mobile: 0

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Name of person completing this form (please print) <u>Brian Linn</u>	Official Title <u>Branch Manager</u>
Signature 	Telephone No. <u>905-643-5456</u>
	Date (dd-mm-yyyy) <u>27-04-2012</u>



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) Superior Propane - Ontario Regional Operations Centre			
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. 1-877-873-7467	Fax No. 519-836-7766	Contact Name Mike Mullins	
E-mail mullinsm@superiorpropane.com			

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>			
Superior Propane - Smithville Bulk Propane yard			
Street No. 3089	Street Name / 911 Number / Address, if applicable Regional Road 12		
Town / City or Township / Country Smithville		Province Ontario	Postal Code L0R 2A0
Telephone No. 1-877-873-7467	Fax No.	Contact Name Tom Aimes	
E-mail amiest@superiorpropane.com			

Off-site Cylinder and/or Mobile Storage N/A	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
Telephone No.	Fax No.	Contact Name

Note: Customer storage is not considered off-site storage.

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Signature <i>Brian Linn</i>		Date (dd-mm-yyyy) 27-04-2012
Telephone No. 905-643-5456		



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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.

Clear Diesel fuel = 4163 litre on-ground tank; Dyed Diesel fuel = 4163 litre on-ground tank; Gasoline Unleaded = 1892 litre on-ground tank. All tanks located at refuel station situated in south section of yard.

Diesel fuel 450 litre fuel truck parked alongside the south entry fence (in the yard). Waste oil and antifreeze storage area outside at south section of yard.

Oil & antifreeze stored at truck inspection bay. Portable gas can & compressed O2, Argon & CO2 gas stored outside east of hydrant on south side of shop.

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

Fire extinguishers located throughout the Shop and corporate office, and at fixed vertical propane storage tank.

Fire Hydrant at Wash Bay door (SW corner) and at SE corner (natural gas main shutoff). Hydrant located at SE corner of main parking lot entrance located at East side of Oriole Avenue close to both of United's main parking lot entrances are additional City of Hamilton fire hydrant locations.

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.

Sprinkler system, emergency lighting system, fire extinguishers located throughout the repair shop and corporate offices.

Maintenance and testing schedule for fire protection controls and devices.

Annual inspection and testing performed by Classic Fire Protection Inc., 4380 South Service Road, Unit 13, Burlington, ON L7L 5Y6

T: 905-631-6100 F: 905-631-9558. The 2011 annual inspection and testing of emergency light units and exit light units, portable fire extinguishers, automatic sprinkler systems, fire hydrants completed effective March 4, 2011.

Security cameras on premises.

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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 Brian Linn	[Redacted]	Name Troy Stubbert	[Redacted]
Official Title Branch Manager		Official Title Manager	
Telephone No. 905-961-3682	Fax No. 905-643-1008	Cell No. 905-961-3682	Fax No. 905-643-1008
E-mail blinn@ur.com		E-mail tstubber@ur.com	
Role and responsibilities in emergency Coordinate site response		Role and responsibilities in emergency Coordinate site response	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Michael Perry	[Redacted]	Name Brian Linn	[Redacted]
Official Title Service Manager		Official Title Branch Manager	
Telephone No. 905-971-9073	Fax No. 905-643-5442	Telephone No. 905-961-3682	Fax No. 905-643-1008
E-mail mperry@ur.com		E-mail blinn@ur.com	
Role and responsibilities in emergency Coordinate site response		Role and responsibilities in emergency Coordinate site response	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Frank Biancucci	For Office Use - Party No.	Name Superior Propane Hotline	For Office Use - Party No.
Official Title Assistant Chief - Fire Prevention	E-mail	Official Title	E-mail
Telephone No. 905-546-2424 Ext. 7762	Fax No.	Telephone No. 1-877-873-7467	Fax No.
Role and responsibilities in emergency Approves fire plan in Level 1 RSMP. Also coordinate fire service response and liaise with police		Role and responsibilities in emergency Identify and dispatch Superior Propane and/or LPERGC emergency response personnel as required.	
Fire Services Address 189 King Street East, Dundas, ON. L9H 7P8		Propane Supplier Address	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Dave Cuncliffe	For Office Use - Party No.	Name Rose Caterini	[Redacted]
Official Title Deputy Chief (Director - Fire Services)	E-mail	Official Title City Clerk	
Telephone No.	Fax No.	Telephone No. 905-546-2489	Fax No. 905-546-2095
Role and responsibilities in emergency Coordinate fire service response and liaise with police		E-mail clerk@hamilton.ca	
Fire Services Address 189 King Street East, Dundas, ON. L9H 7P8		Municipality Name and Address City of Hamilton, 71 Main Street West, Hamilton, ON. L8P 4Y5	

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Signature 	Telephone No.
	Date (dd-mm-yyyy) 27-04-2012



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

2. Additional Safety Measures

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

The fixed vertical propane storage tank complies with the provisions of the Propane Storage and Handling Code, CSA B149.2-05.

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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-mm-yyyy)	Print Name of Training Provider: NONE
	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)	Print Name of Training Provider: <i>None</i>
	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) 18-05-2010	Print Name of Training Provider: FSN Safety & Compliance Training
	Print Name of Instructor: Michael Farah
Training Date (dd-mm-yyyy) 15-04-2010	Print Name of Training Provider: FSN Safety & Compliance Training
	Print Name of Instructor: Michael Farah
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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Signature <i>Brian Linn</i>	Telephone No. 905-643-5456 Date (dd-mm-yyyy) 27-04-2012



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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-mm-yyyy) 30-05-2011	Print Name of Training Provider: Bullivant & Associates
	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) 01-08-2011	Print Name of Training Provider: United Rentals Inc. Safety Awareness Trainers
	Print Name of Instructor: Gord Nokes and Jack Travale
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)	Print Name of Training Provider: Certificate valid for 3 years. First issued in 2010, expires April & May 2013
	Print Name of Instructor: Training for newly hired employees is provided as required.
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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Signature 	Telephone No. 905-643-5456
	Date (dd-mm-yyyy) 27-04-2012



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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 Emergency Operations Coordinator (EOC) will direct the implementation of the Emergency Response Plan. The EOC will direct the Emergency Response

Team (ERT) members based upon the EOC's assessment of the situation and will determine whether to implement the Emergency Response Plan, and

whether to contact the Emergency Services. Public notification will be in concert with the local municipality Emergency Services. SEE ATTACHED "FIRE

AND/OR PROPANE EMERGENCY RESPONSE PROCEDURE"

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).

When the EOC determines that the Emergency Response Plan must be implemented the ERT will, where appropriate, be directed to evacuate the building

and to have personnel immediately proceed to the designated assembly area. A head count will take place to ensure all personnel have safely exited. An

ERT member will be assigned to each entry/exit gate provided it is safe to do so. The EOC will set up an Incident Command Centre in a safe location

whereby the emergency response can be safely monitored and directed, in concert with the local municipality Emergency Services.

Communication with Emergency Response Authorities

Describe when and how the licence holder will give early warning to emergency response authorities (including a process to ensure that a call is placed to 911).

The Emergency Operations Coordinator (EOC) will immediately assess the (emergency) situation to determine if the local municipality Emergency Services are required. If this assessment is affirmative, the EOC will affect an immediate 911 call in order to secure emergency assistance.

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

There is an identified "Facility 24 Hour Contact Person" in Section B (page 5).

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

The United Rentals Emergency Operations Coordinator (EOC) is charged with the responsibility to provide updated information to the authorities.

How long will it take the facility liaison person to respond to the site.

About 10 to 15 minutes.

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Signature 	Telephone No. 905-643-5456	Date (dd-mm-yyyy) 27-04-2012



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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 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>approx 50 metres</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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Signature 	Telephone No. 905-643-5456
	Date (dd-mm-yyyy) 27-04-2012



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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:

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 Frank Biancucci		12-05-2012

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) Brian Linn	Official Title Branch Manager	
Signature <i>x Brian Linn</i>	Telephone No. 905-643-5456	Date (dd-mm-yyyy) 27-04-2012



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SECTION C: SUBMISSIONS

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

Facility Site Plan.

The licence holder will submit a copy of the original facility site plan updated with the following information:

1. The storage location of fixed, portable, and mobile vessels.
2. The maximum volume, types and storage location of hazardous materials.
3. Location of permanent structures on site.
4. Access and egress points and location of barriers.
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) 28-04-2012	Capacity of single largest propane storage vessel (USWG) 1300 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 178.2m	Right side property line: 15.1m
Rear: 19.0m	Left side property line: 154.7m
GPS coordinates of single largest vessel: Lat: 43°13.7'23"N Long: 79°39'6.76"W	

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Name of person completing this form (please print) J. Ross Keys	Official Title Consultant
Signature 	Telephone No. 416.526.1405
	Date (dd-mm-yyyy) 29-04-2012



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SECTION C: SUBMISSIONS (cont'd)

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

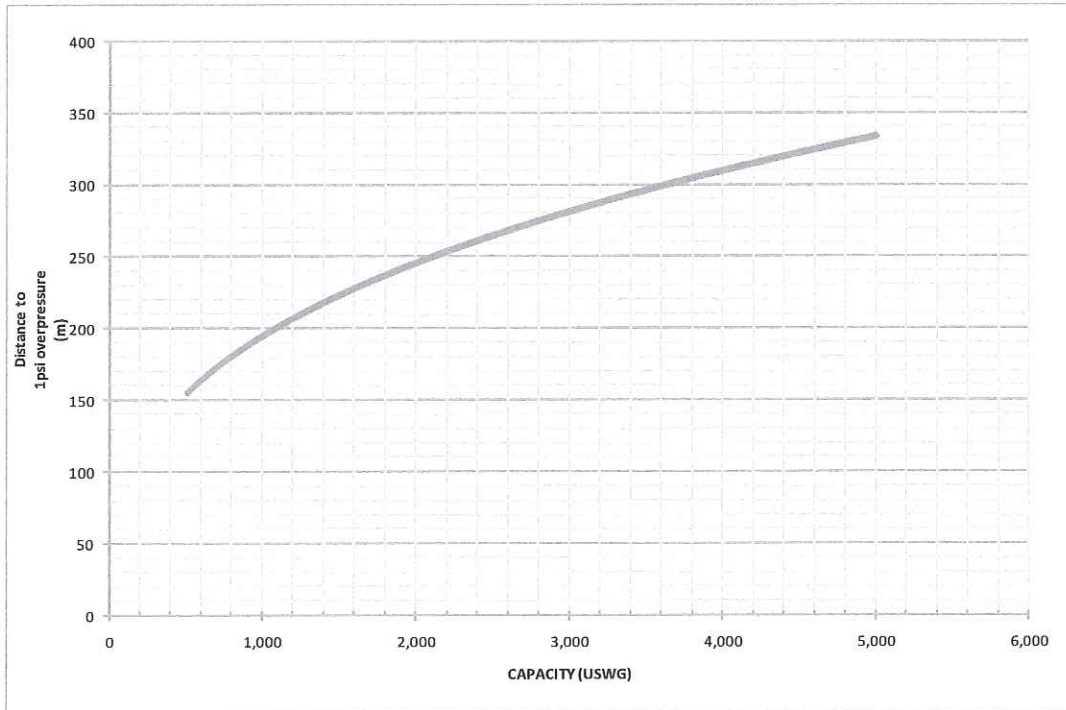
Table 1: Distance Table

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

Formula: $D = 16.94 \times (1.524 \times C)^{1/3}$
 D = Distance to overpressure of 1 psi (meters)
 C = Tank Total Capacity in USWG

Parameters: Density of Propane is 0.5033 kg per litre @ 15 C
 Assume all vessels are 80% full
 1 gallon [US, liquid] = 0.003785411784 cubic meter
 1 cubic metre = 264.17 USWG

Hazard Distance Chart (EPA-TNT model)





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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>Fabris Inc.</u> Address: <u>1216 South Service Road</u> City: <u>Stoney Creek</u> Province <u>ON</u> Postal Code <u>L8E 5C4</u>			X		<u>46.6</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ 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: _____ Province _____ Postal Code _____	X				_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ 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>J. Ross Keys</u>	Official Title <u>Consultant</u>
Signature 	Telephone No. <u>416-526-1405</u> Date (dd-mm-yyyy) <u>29-04-2012</u>



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

WORKSHEET

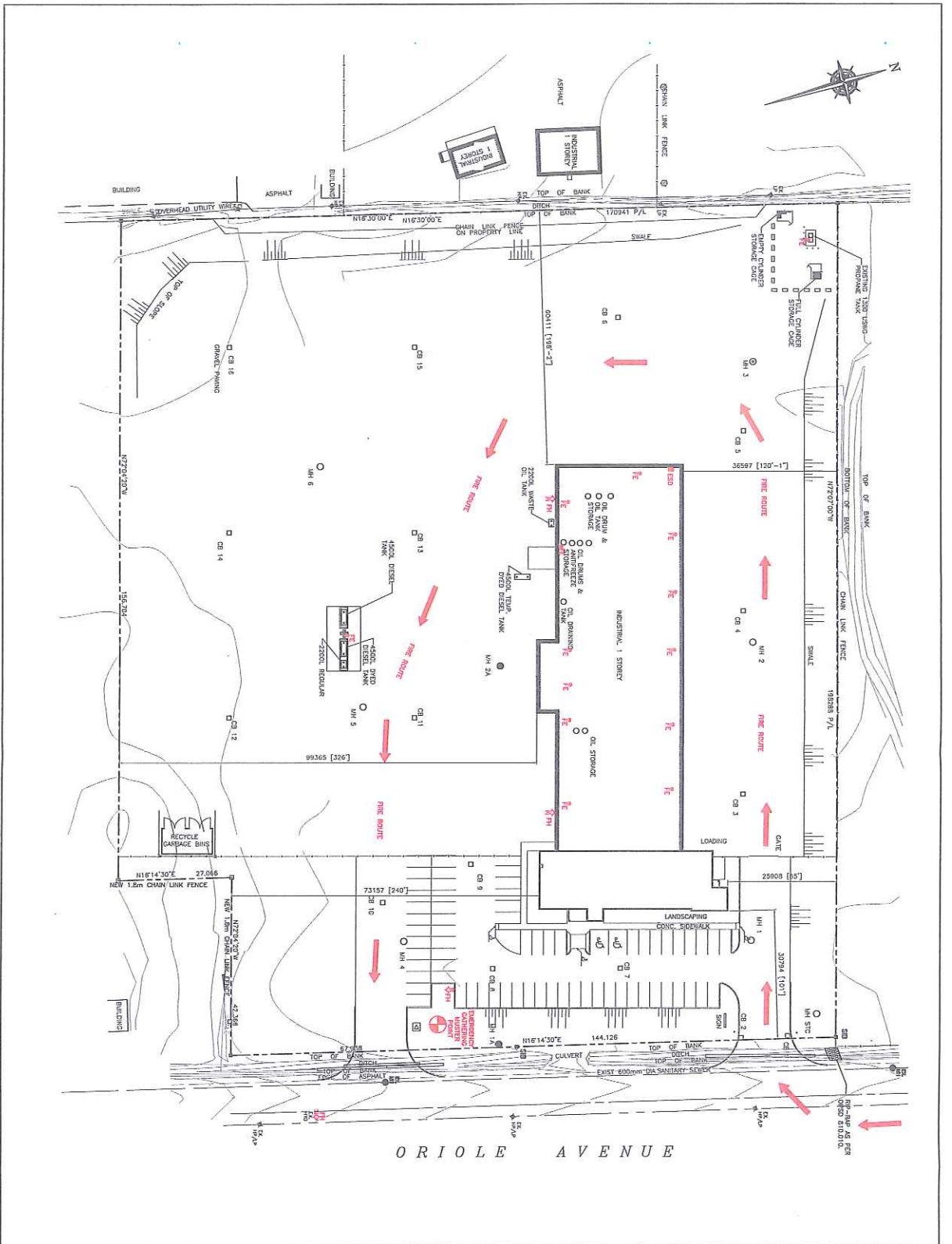
Portable Storage Additional Information Worksheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5	100lbs=29.33USWG 10 tanks	293.3 USWG
# 40	11.75		
# 33.3	9.62		
# 30	8.8	30lbs=8.85USWG 130 tanks	1150.741 USWG
# 20	5.8	20lbs=5.87USWG 10 tanks	58.65 USWG
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			

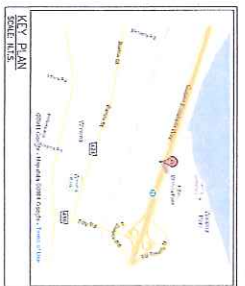
Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
1300 USWG	1	1300 USWG
Total Tank Capacity 1300 USWG		

Total Cylinder Capacity	1502.7 USWG
Total Tank Capacity	1300 USWG
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	2802.7 USWG



ORIOLE AVENUE



KEY PLAN

ZONING INFORMATION:

Zone is Industrial Commercial (IC) Zone
 Lot Area: 2231 Sq.m.
 Building Area: 2084 sq.m.
 Lot Coverage of Building: 85%

NOTES:

1. Approval is subject to TSSA approval.
2. Facility used for fire response training only.

PROPERTY LINE SETBACKS	FRONT	REAR	SIDE	DIAGONAL
NORTH	6.1m			
SOUTH	10.5m			
EAST	10.5m			
WEST	7.1m			

USE	COVERAGE
INDUSTRIAL	200%
RETAIL	200%
OFFICE	500%
RESIDENTIAL	400%

DATE	DESCRIPTION	BY
1. June 20, 11	PLAN, STORED AND WAREHOUSE	JMK
2. June 14, 11	ISSUED FOR TISSA	JMK
3. June 14, 11	ISSUED FOR TISSA	BY

LEGEND:

- FP - FIRE POST
- PH - FIRE HYDRANT
- ESD - EMERGENCY SHUT-DOWN
- WATER POINT

United Rentals

ALTENG Inc.
 Alternative Energy Consulting
 128 Neen Crescent, Toronto, Ontario M7S 1S3
 Telephone: (416) 794-1844 Fax: (416) 794-5885

Project: **UNITED RENTALS OF CANADA**
 128 Neen Crescent, Toronto, Ontario M7S 1S3
 Drawing No: **LE 024**

Drawn By: **D.T.**
 Checked By: **J.M.K.**
 Date: **MAY 10, 11**

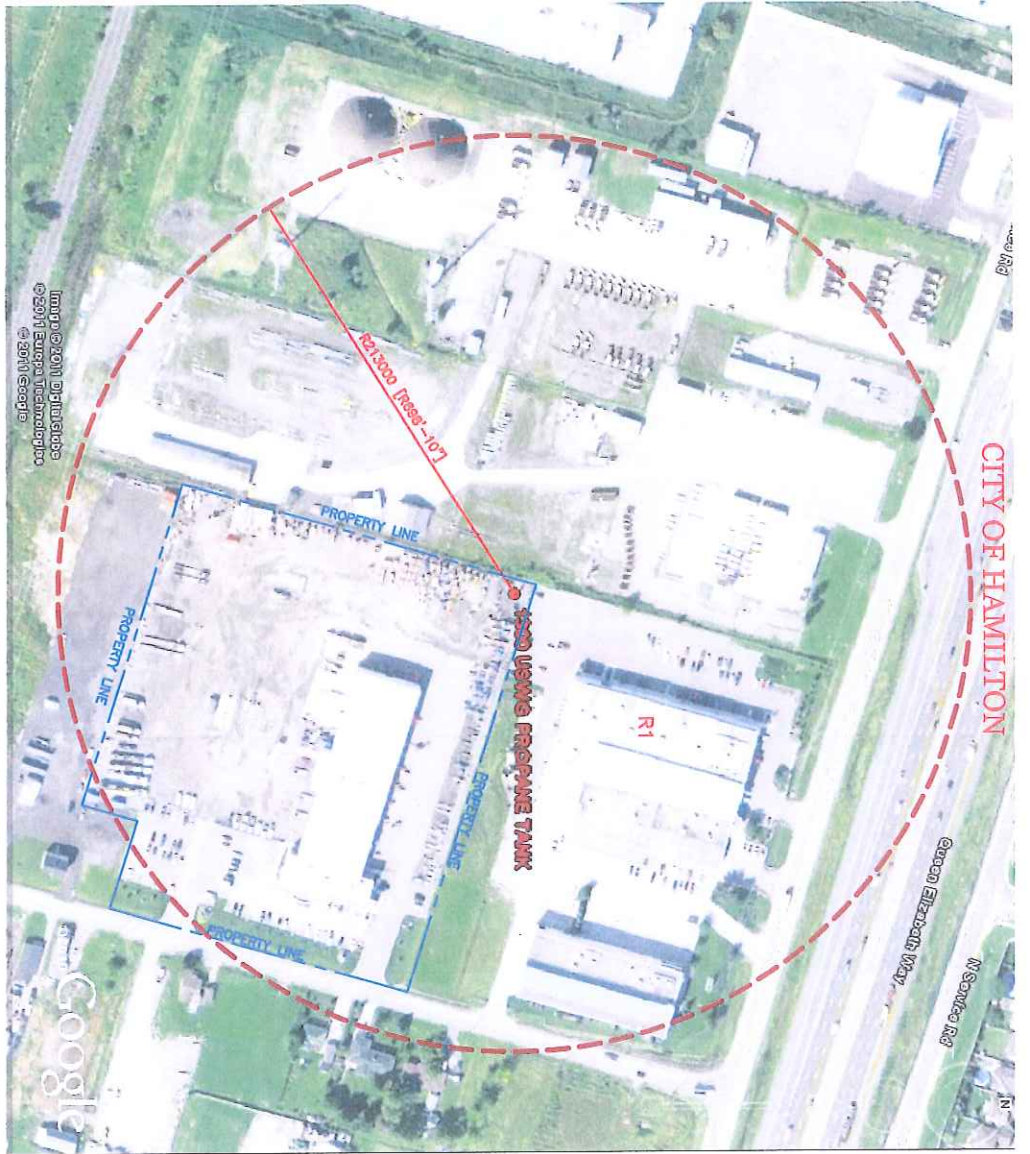
Drawing Title: **EMERGENCY FIRE PLAN**
 Drawing No: **061900**
 Revision: **P-101**

REVISIONS

No.	Date	Description
1	June 20, 11	PLAN, STORED AND WAREHOUSE
2	June 14, 11	ISSUED FOR TISSA
3	June 14, 11	ISSUED FOR TISSA

Scale: **AS SHOWN**

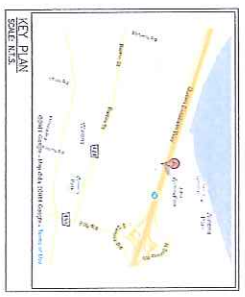
Sheet No: **1 of 1**



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CITY OF HAMILTON

Green Elizabeth Way
 N Service Rd



NOTES:

CONFORMANCE DISTANCE TO AN OCCUPANCY LOAD OF 1.0 PL
 BASED ON THE FOLLOWING HEIGHTS AS PER 15.3.3.3. DISTANCES
 FROM THE OCCUPANCY OF THE ROOM TO THE

$$D = 17 \times \left(\frac{101 \times 9}{100} + \frac{HC}{100} \right) \times \frac{100}{100} = 215m$$

PROPERTY LINE SETBACKS	
NORTH	15.0m
SOUTH	154.27m
EAST	170.20m
WEST	10.00m

PROPOSED OCCUPANCY	SETBACK FROM THE
R-1	INDUSTRIAL
	48.6m

AS PER 15.3.3.3. DISTANCES FOR THE IMPLEMENTATION OF THE PERM AND
 ROAD DEMONSTRATION

GPS COORDINATES	
UTM	18QUC 723000
NAD 83	18QUC 723000

PLANNING ADVISORY INFORMATION:

CITY OF HAMILTON
 71 MAIN STREET WEST
 HAMILTON, ONTARIO L8N 3R5
 TEL: 905.546.4881
 WWW.CITYOFHAMILTON.CA

NO.	DATE	DESCRIPTION	BY
1	JAN. 27, 12	PROPOSED SHED CONSTRUCTION & CITY INFO	D.T.
2	MAR. 14, 11	ISSUED FOR PERM	D.T.



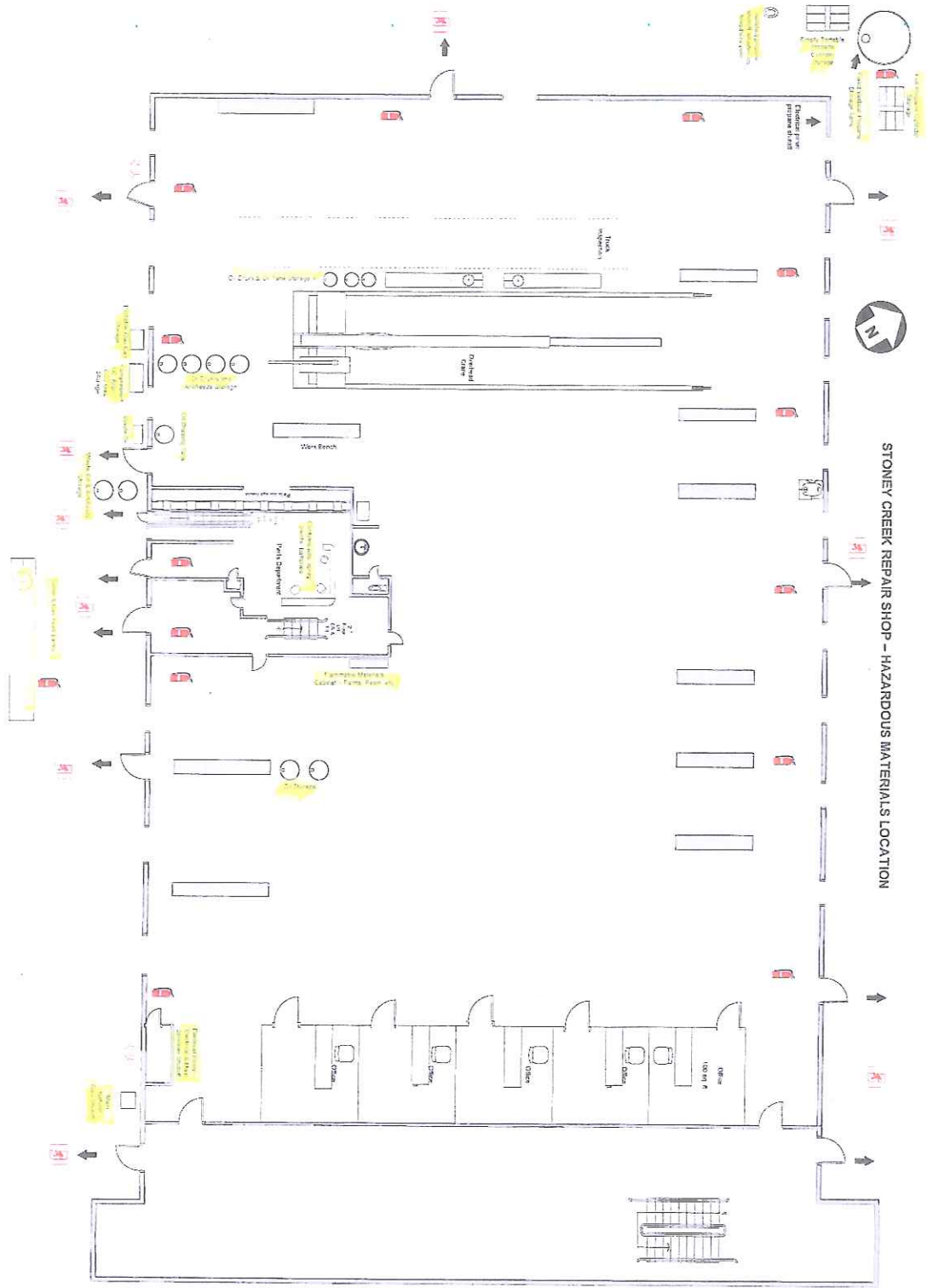
ALTENG Inc.
 Alternative Energy Consulting
 126 West Beaver Creek, Toronto, Ontario L7T 4J2
 Telephone: (905) 944-4144
 Fax: (905) 944-4098

Project: **PROPAANE TANKS AT DEXTRA INC.**
 46 Dufferin St. L7T 4J2
 Hamilton, ON

Drawn By: D.T.
 Checked By: M.D.C.
 Date: JAN. 10, 11
 Drawing Scale: 1:1000

EAST BOUND PLAN LAYOUT
 Drawing Number: P-200
 File Number: 06190D
 Drawing Scale: 1:1
 Drawing Sheet: 1/1

STONEY CREEK REPAIR SHOP - HAZARDOUS MATERIALS LOCATION



ORLE AVENUE