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

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 14th Floor - Centre Tower

 Standards and
 3300 Bloor Street West

 Safety Authority
 Toronto Ontario M8X 2X4

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Thi	s Level 1 RSMP applies to: • a facility with a total propane storage capacity of 5, • a facility with a fixed propane storage capacity of USWG of portable propane storage capacity on s
	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	Application for change of Licence Holder for Licence 194086
Check applicable type	of propane operations.
Cylinde Submit along with this	t Motor Fill Filling Plant Card/Keylock completed application a Facility Site Plan and a Map of the Surrounding Area.

SECTION A: GENERAL INFORMATION

A	Company Name Cambridge Rigging C	Central Limited			Corporation No. 576559		
2,124	Operator Name (if differe	- And the second second second					
	Telephone No. (519)623-4000	Fax No. (519)740-6006	E-mail jimf@cambridgerigging.com	1	-		
В	Street No. 60	Street Name / 911 Number / Wanless Court	Address, if applicable				
	Town / City or Township	/ County		Province	Postal Code		
	Ayr			ON	NOB 1E0		
c	Mailing address if d StreetNo.	lifferent from above. Street Name / 911 Number /	Address, if applicable				
	Town / City or Township	/ County		Province	Postal Code		
Ini 	formation on Conta Location of facility. Street No.	iner Refill Centre or F Street Name / 911 Number / Wanless Court		and the second se	Nearest Major Intersection Industrial Road and Wanless Court		
	Town / City or Township / County			Province	Postal Code		
	Ayr / Township of Nor	rth Dumfries / Region of W	laterioo	ON	NOB 1E0		
	Name of Licence Holder Cambridge Rigging Ca Name of a Senior Manag John Ryan Fitzpatrick	gement person as defined in t	he regulation holding the Record o	f Training (ROT).	ROT type PTI 100-8		
	Municipality (or municipalities if the facility or its hazard distance touches multiple borders) Township of North Dumfries (in the Region of Waterloo)						
h							



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.

Print name	Signature	Date (dd-mmm-yyyy)
Name of Licence Holder Cambridge Rigging Central Limited	The	18 Aug 2016
Name of Senior Management person as defined in the	ρ -	
Regulation holding the Record of Training John Ryan Fitzpatrick		

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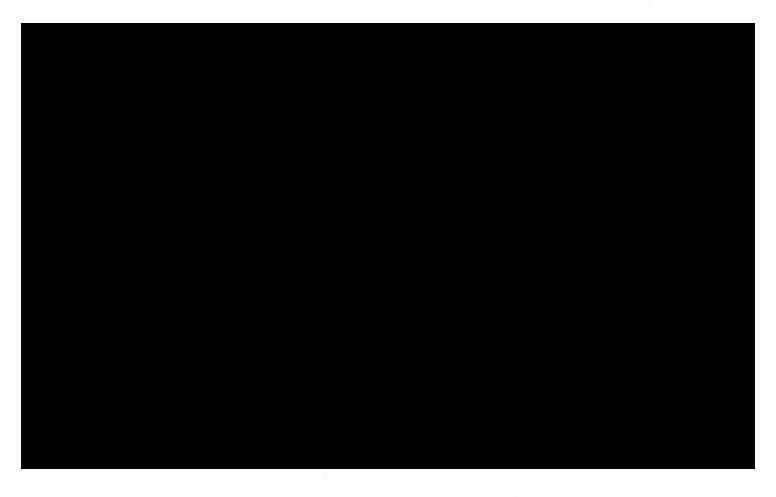
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ndicate the year the	e facility was established.	Indicate the year of None to report	of any significant	modifications, as def	ined in s.1, O.Reg 211/01, since establishment
dentify the psig ration	ng and serial number for ea	ach fixed propane sto	orage tank on si	e.	
Tank 1:	PSIG 250	Serial Nu 400-J	umber		
Tank2: Tank3:					
inter capacity of pro	opane in USWG, fixed, por	table, and mobile, a	nd provide deta	led inventory that in	cludes the number of tank/vessel for
ach type (fixed, po	rtable, and mobile) and the	e capacity of each ta	nk/vessel, on a	separate document.	
Fixed: 1,0	000 USWG	Portable:	856.9	Mobile:	nil



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) John Ryan Fitzpatriek	Official Title Facility Manager	
Signature	Telephone No. (519)623-4000	Date (dd-mmm-yyyy) 18 Aug 2014
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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propar	lame of Propane Supplier(s)					For Office Use - Party No.	
Waterloo County P	Vaterloo County Propane						
Street No.	Street N	lame / 911 Number / Ad	dress, if applicable				
1507 Clyde Road							
Town / City or Township / Country				Province	8	Postal Code	
Cambridge				ON		N1R 5S7	
Telephone No.		Fax No.	Contact Name				
(519)622-3720 (519)623-1702 Donny Chaves			Donny Chaves				
E-mail							
donny@waterloocd	ountypropa	ane.com					

Name of Propa	ne Transporter. If same as ab	ove, please check box. 🖌	For Of	ice Use - Party No.
Street No.	Street Name / 911 Number / A	ddress, if applicable		
Town / City or	Fownship / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name		
E-mail				

Off-site Cylinde	r and/or Mobile Storage	Capacity stored off-site, in	n USWG	For Office Use - Party No.
Street No.	Street Name / 911 Number / Address, if a	oplicable		
Town / City or T	ownship / 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) John Ryan Fitzpatrick	Official Title Facility Manager	
Signature	Telephone No. (519)623-4000	Date (dd-mmm-yyyy) 18 Aug 2016

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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. 1000 liters 15W30 motor oil, 205 liters 10W30 motor oil, 205 liters windshield washer fluid, 205 liters transmission oil, 55 kg SAE 50 grease, 205 liters

Anti-freeze fluid, 1,000 liters AW32 hydraulic fluid, 205 liters mineral oil, 205 liters 80W90 oil, 205 liters 75W90 oil, 2,270 liters used oil storage.

2,200 liters regular gasoline, 4,500 diesel, bottled gases (11 acetylene, 7 oxygen, 9 argon)

Description of fire and emergency equipment indicated on facility site map. Please refer to site maps.

Standpipe fire sprinkler system, two 100 ft hose racks, two 1,000 gallon water tanks. Fire department connection with booster pump.

Numerous hand held fire extinguishers

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 - if propane transfer system is exposed to fire the link will melt and automatically close the tank valve.

1 - Excess flow tank - will automatically close if propane flow exceeds maximum flow rate of 50 gallons per minute.

Maintenance and testing schedule for fire protection controls and devices.

Annual third party inspection of all fire extinguishers.

Annual tank inspection.

Inspection completed daily by ROT holder.

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) John Ryan Fitzpatrick	Official Title Facility Manager	
Signature	Telephone No. (519)623-4000	Date (dd-mmm-yyyy) 13 Aug 2016

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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 Contac	t Person	
Name John Ryan Fitzpatrick		For Office Use - Party No.	Name Paul Weiler		For Office Use - Party No.
Official Title Facility Manager			Official Title Shop Manager		
Telephone No. (519)623-4000	Fax No. (519)740-	6006	Cell No. (519)240-3494	Fax No. (519)623-939	97
E-mail jrfitzpatrick@cambridgerigging.com			E-mail paul@cambridgerigging.com		
Role and responsibilities in em			Role and responsibilities in e	mergency	
See Schedule 1 - Supervisor responsibilities for complete listing of roles and responsibilities.			See Schedule 1 - Supervisor re responsibilities.		lete listing of roles and
2. Facility Contact Personne	el - Alternate Co	Intact	6. Name of Facility Manage	er	
Name Kevin Pellatt		For Office Use - Party No.	Name John Ryan Fitzpatrick	C	For Office Use - Party No.
Official Title Dispatcher/Health & Safety			Official Title Facility Manager		
Telephone No. (519)501-5357	Fax No. (519)740	6006	Telephone No. (519)623-4000	Fax No. (519)740-600	6
E-mail			E-mail		
kevin@cambridgerigging.com			jrfitzpatrick@cambridgerigging.com		
Role and responsibilities in err			Role and responsibilities in emergency		
Alternate Supervisor. See Schedule 1 - Supervisor responsibilities for complete listing of roles and responsibilities.			See Schedule 1 - Supervisor responsibilities for complete listing of roles and responsibilities.		
3. Local Fire Services - Key	Contact		7. Propane Supplier Key Co	ontact Person	
Name Robert Shantz		For Office Use - Party No.	Name Donny Chaves		For Office Use - Party No.
Official Title Fire Chief	E-mail rshantz@	northdumfries.ca	Official Title Vice President	E-mail donny@wate	rloocountypropane.com
Telephone No. (519)632-7956	Fax No. (519)632-	3595	Telephone No. (519)622-3720	Fax No. (519)623-170	2
Role and responsibilities in em Coordinating of emergency respon			Role and responsibilities in emergency Activate ERAP if necessary - See Schedule 1		
Fire Services Address 501 Scott Street, Ayr ON NOB 1E	0		Propane Supplier Address 1507 Clyde Road, Cambridge ON N1R 5S7		
4. Local Fire Services - Alter	nate Contact		8. Municipal Contact		
Name Steve Gladstone/Mark Smuck		For Office Use - Party No.	Name Andrew McNeely		For Office Use - Party No.
Official Title Deputy Chiefs	E-mail		Official Title Chief Administration Officer		
Telephone No. (519)632-7956	Fax No. (519)632-	3595	Telephone No. (519) 632-8800 x121	Fax No. (519)632-870	0
Role and responsibilities in em		and a second sec	E-mail		
Coordinating of emergency respon	se in the event the I	Fire Chief is unavailable	amcneely@northdumfries.ca		
Fire Services Address			Municipality Name and Address		
501 Scott Street, Ayr ON NOB 1	IE0		Township of North Dumfries, 2958 Greenfield Road, Ayr ON N0B 1E0		

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	
John Ryan Fitzpatrick	Facility Manager	
Signature	Telephone No. (519)623-4000	Date (dd-mmm-yyyy) 18 Ang 2014

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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.
Alliance Alarm System
2 x 1,000 gallon water tank standpipe system for fire fighting

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		
John Ryan Fitzpatrick	Facility Manager	Facility Manager	
Signature	Telephone No.	Date (dd-mmm-yyyy)	
412	(519)623-4000	18 Aug 2016	



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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 Date (dd-mmm-yyyy)	Print Name of Training Provider: Beatty Petroleum Consulting Inc.
19-Nov-2014	Print Name of Instructor: Alex Beatty
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 Eme	ergency Management Procedures provided to staff.
Training Date (dd-mmm-yyyy)	Print Name of Training Provider: Cambridge Rigging Central Limited
3-Aug-2016	Print Name of Instructor: Paul Weiler
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 prov	vided to certificate holders / persons with Records of Training.
Training Date (dd-mmm-yyyy)	Print Name of Training Provider: Cambridge Rigging Central Limited
3-Aug-2016	Print Name of Instructor: Paul Weiler
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:

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	
John Ryan Fitzpatrick	Facility Manager	
Signature	Telephone No. (519)623-4000	Date (dd-mmm-yyyy) 18 Ang 2016

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

4. Emergency Training Plan for Coming Year

Target Date (dd-mmm-yyyy)	Print Name of Training Provider: Cambridge Rigging Central Limited
3-Aug-2016	Print Name of Instructor: Paul Weiler
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 Emerg	gency Management Procedures provided to staff.
Target Date (dd-mmm-yyyy)	Print Name of Training Provider: Cambridge Rigging Central Limited
3-Aug-2016	Print Name of Instructor: Paul Weiler
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 provid	led to certificate holders / persons with Records of Training.
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
Certificates valid until Nov 2019	Print Name of Instructor:
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:

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	
John Ryan Fitzpatrick	Facility Manager	
Signature	Telephone No. (519)623-4000	Date (dd-mmm-yyyy) 18 Ang 2016

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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). Please see Schedule 1

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).

Please see Schedule 1

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). Please see Schedule 1 Describe provisions for fire department entry when there are no operations or staffing at the propane site. Access control cage is locked with a chain and padlock. Fire Services to use bolt cutter or other equipment to cut the chain to access the property. Describe how the licence holder will ensure continual flow of updated information to authorities. Please see Schedule 1 How long will it take the facility liaison person to respond to the site. John Ryan Fitzpatrick - 10 minutes / Paul Weider - 10 minutes / Kevin Pellatt - 20 minutes

> 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	
John Ryan Fitzpatrick	Facility Manager	
Signature	Telephone No. (519)623-4000	Date (dd-mmm-yyyy) 18 Aug 2014

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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)?	\checkmark		
2.	Is there adequate night lighting at the site?	1		
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?	\checkmark		
6.	Are weighing systems validated for accuracy?	\checkmark		
7.	Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?	✓		
8.	Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves)	\checkmark		
9.	Is the schedule of maintenance and testing activities retained on site?	✓		
	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.

- Is a pressurized water system available at the propane facility site? 1.
- 2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?
- 3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)
- What is the unobstructed distance to the closest approved water supply with year 4. round access if there are no hydrants? (distance in metres only)

Yes	No
	\checkmark
✓	
260 met	ers
260 met	ers

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

Name of person completing this form (please print)	Official Title	
John Ryan Fitzpatrick	Facility Manager	
Signature	Telephone No. (519)623-4000	Date (dd-mmm-yyyy) 12 Aug 2016

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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 Yes No 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:				
There is an 50,000 gallon underground water supply located at the end of Wanless Court. There is an additional 50,000 gallon underground water	er supply			
between Cedar Creek Developments and Grower's Choice. Located at 1058 Industrial Road.				
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
ned has reviewed Section B of the Risk and Safety Management Plan Fire Services.
Print name Signature Date (dd-mmm-yy) Des Name ROBERT SHAMTZ BIJ Ly B/08/2012
es Name KOBERO SHAMTZ THAT LY

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) John Ryan Fitzpatrick	Official Title Facility Manager		
Signature	Telephone No. (519)623-4000	Date (dd-mmm-yyyy) 18 Ang 2016	
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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

SECTION C: SUBMISSIONS

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

Facility Site Plan.

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

- 1. The storage location of fixed, portable, and mobile vessels.
- 2. The maximum volume, types and storage location of hazardous materials.
- 3. Location of permanent structures on site.
- 4. Access and egress points and location of barriers.
- 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) 11-Aug-2016		Capacity of single largest propane storage vessel (USWG) 1000 USWG		
Tank setback coordinates. Front: Rear:	Indicate placement on the 105 meters (345') 151 meters (495')	e map. Right side property line: Left side property line:	245 meters (805') 42 meters (138')	
GPS coordinates of single	largest vessel: 43°20	0'07.38"N 80°26'57.28"W		

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.

ity Manager	
phone No.)623-4000	Date (dd-mmm-yyyy) 18 Aug 2016



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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

Table 1: Distance Table

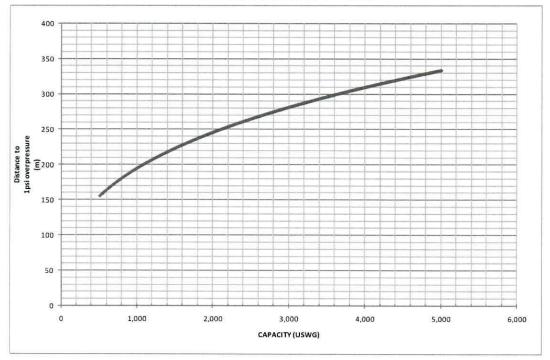
Water Capacity (litres)	Nominal Water Capacity (USWG)	Distance to 1 psi overpressure (m)
1,890	500	155
3,780	1,000	195
4,920	1,300	213
6,620	1,750	235
7,130	1,885	241
7,560	2,000	246
18,900	5,000	333

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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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

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")		
	And have and Address of Ordest Building of Feature	0	1	2-10	11+	Building or Feature
Industrial Name: Address:	buildings or parks or golf courses Stage Door Transportation 1074 Industrial Road			×		<u>146</u> m
City:	Ayr Province ON Postal Code NOB 1E0					
Residenti Name: Address:	al building units specifically permanent single family dwellings, condominiums, and apartments. None	x				m
City:	Province Postal Code					
Commerc Name:	ial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Koehler Transport					120
Address:	35 Wanless Court		X			<u> 129 </u> m
City:	Ayr Province ON Postal Code NOB 1E0					
Name:	al building units – continuous occupancy specifically hotels, campgrounds, and resorts.	x				m
Address: City:	ProvincePostal Code					
	institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health s, and prisons. None	x				m
City:	Province Postal Code					
Name:	y responders specifically fire stations, ambulance stations, and police stations. None	С				m
Address: City:	Province Postal Code	5				
					_	

* 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) John Ryan Fitzpatrick	Official Title Facility Manager	
Signature	Telephone No. (519)623-4000	Date (dd-mmm-yyyy) 16 Aug 2016
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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act Propane Storage and Handling Regulation

WORKSHEET

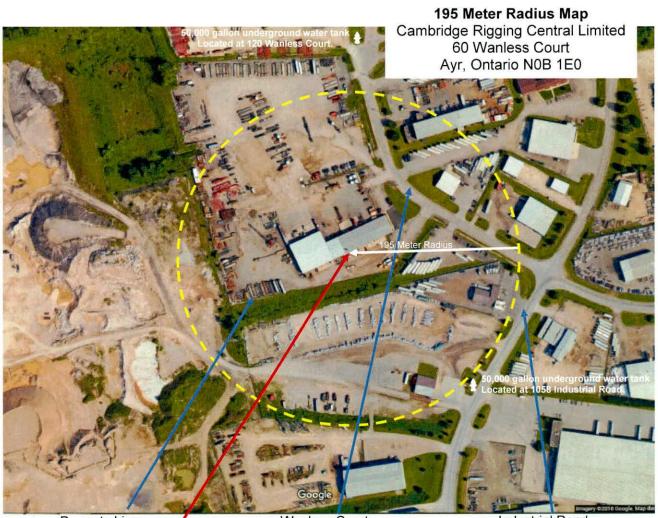
Portable Storage Additional Information Worksheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5	4	118.0
# 40	11.75		
# 33.3	9.62	75	721.5
# 30	8.8		
# 20	5.8	3	17.4
# 10	2.9		
#5	1.5		57 E

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
		-

Total Cylinder Capacity	856.9 USWG
Total Tank Capacity	nil
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	856.9 USWG



Property Line

1

Wanless Court

Industrial Road

Location	60 Wanless Court, Ayr, Ontario, NOB 1EO	
Prepared	July 31, 2016	
Largest Tank	1000 USWG Horizontal Propane Tank	
Tonk Sot Packs	Front = 345' / Back = 495'	
Tank Set Backs	Left = 138' / Right = 805'	
Radius	195 Metre Radius	
GPS Coordinates	43°20'07.38"N 80°26'57.28"W	
Municipality 1	Municipality of North Dumfries	
CAO	Andrew McNeely	
Address	2958 Greenfield Rd., Ayr, Ontario, N0B 1EO	
Phone	519-632-8800	
FAX	519-632-8700	
Municipality 2	Region of Waterloo	
CAO	Mike Murray	
Address	150 Frederick Street, Kitchener, Ontario, N2G 4J3	
Phone	519-575-4400	
Fax	519-575-4481	

