



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
2200 Bloor Street West
Toronto Ontario M6E 1B4
Fax: (416) 231-9902
Customer Service: (416) 231-9970

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

This Level 1 RSMP applies to:
- a facility with a total propane storage capacity of 3,000 USWG or less;
- a facility with a total propane storage capacity of a facility 3,000 USWG and no more than 300 USWG in partial propane storage capacity on site.

<p>Please be fully compliant with this form until you receive a written statement of non-compliance from the TSSA.</p> <p>License Number: 0076563279-c</p> <p>Check appropriate type of propane operations:</p> <p><input checked="" type="checkbox"/> Cylinder <input type="checkbox"/> Water Fill <input type="checkbox"/> Filling Plant <input type="checkbox"/> Gas Delivery</p> <p>Submit along with the completed application a Facility Site Plan and a Flow and Sounding Line</p>	<p>For Office Use Only</p> <div style="background-color: black; width: 100%; height: 100%;"></div>
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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.

Company Name Grace Centre		Ontario Corporate No. (if applicable)	
Operator Name (if different from above) Seung-Won Yun			
Telephone No. 705-689-2192	Fax No. 705-689-2192	E-Mail sunnyyun@msn.com	
Street No. 10955	Street Name / Box Number / Address / Applicable highway#11 N		
Town / City or Township / County Severn Bridge	Province Ontario	Postal Code POE 1N0	
Mailing address if different from above:			
Street No. 10955	Street Name / Box Number / Address / Applicable highway#11 N		
Town / City or Township / County Severn Bridge	Province Ontario	Postal Code POE 1N0	
Information on Container, Refill Centre or Filling Plant			
Location of facility:			
Street No. 10955	Street Name / Box Number / Address / Applicable Highway#11 N		Nearest Major Intersection Severn Street
Town / City or Township / County Severn Township	Province Ontario	Postal Code POE 1N0	

Name of License Holder Seung-Won Yun	
Name of Senior Management person as defined in the regulation holding the Record of Training (ROT) Seung-Won Yun	ROT type 100-08
Municipality (or municipalities if the facility or the hazard distance crosses multiple borders) severn township	
Hours of operation: <div style="background-color: black; width: 100%; height: 50px;"></div>	

This document is valid until the next inspection cycle. You are required by law to notify TSSA if any change of information. Declaration: I am aware that it is my duty to give true information in this document and I hereby declare that the information I have given here is true and complete.

Signature Seung-Won Yun	Date (dd-mm-yyyy) 24-05-2011
Name of License Holder Seung-Won Yun	
Name of Senior Management person as defined in the Regulation holding the Record of Training Seung-Won Yun	



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SECTION A: GENERAL INFORMATION (cont'd)

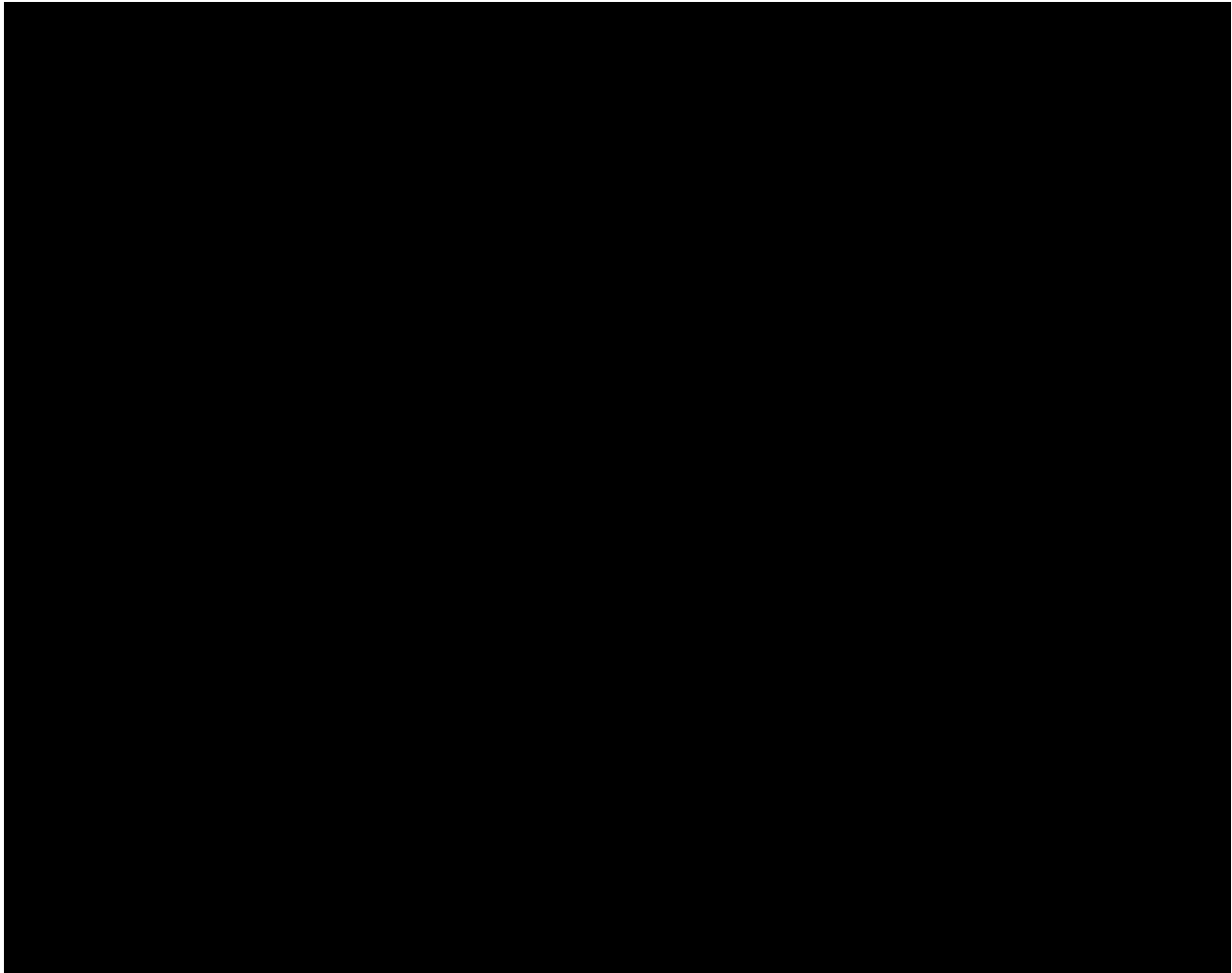
Indicate the year the facility was established. 2000 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. N/C

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

	PSIG	Serial Number
Tank1:	<u>250</u>	<u>281-0</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: U.S.W.G 2000 Portable: 174 Mobile: N/C



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>Seung-Won Yun</u>	Official Title <u>owner & operator</u>	
Signature 	Telephone No. <u>705-689-2192</u>	Date (dd-mm-yyyy) <u>24-05-2011</u>



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

Name of Propane Supplier(s) budget propane		For Office Use - Party No. [REDACTED]	
Street No. 1011	Street Name Lot / Concession No. Beiers RD. RR1		
Town / City or Township / Country Gravenhurst		Province ontario	Postal Code P1P 1R1
Telephone No. 705-687-5608	Fax No. 705-687-9452	Contact Name Mark Larson	
E-mail Mark@budgetpropane.net			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		For Office Use - Party No. [REDACTED]	
Street No.	Street Name Lot / Concession No.		
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	
E-mail			

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

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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.
under ground fuel tank 45500L, 36500L, 22700L, 22700L(diesel).

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

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.
emergency shutdown switch stop propane pump.
internal safety control (isc) valve on tank to shutoff propane flow not in use.
internal safety control (isc) valve on tank to shutoff propane flow if isc is open and hose breaks. excess flow valve on piping to shutoff propane flow if hose breaks. fusible link on isc valve operating cable will melt in case of fire and close isc valve.
Maintenance and testing schedule for fire protection controls and devices.
inspection and maintain by budget regularly.

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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact

Name Seung-Won Yun For Office Use - Party No.

Official Title
owner & operator

Telephone No. 705-689-2192 Fax No. 705-689-2192

E-mail
sunnyyun@msn.com

Role and responsibilities in emergency
call 911, and evacuate customers and employees to safe area.

5. Facility 24-Hour Contact Person

Name Seung-Won Yun For Office Use - Party No.

Official Title
owner & operator

Cell No. 705-305-3503 Fax No. 705-689-2192

E-mail
sunnyyun@msn.com

Role and responsibilities in emergency
call 911, and evacuate customers and employees to safe areas.

2. Facility Contact Personnel - Alternate Contact

Name Michelle Yun For Office Use - Party No.

Official Title
owner & operator

Telephone No. 705-689-2192 Fax No. 705-689-2192

E-mail
sunnyyun@msn.com

Role and responsibilities in emergency
call 911, and evacuate customers and employees to safe area.

6. Name of Facility Manager

Name Seung-Won Yun For Office Use - Party No.

Official Title
owner & operator

Telephone No. 705-689-2192 Fax No. 705-689-2192

E-mail
sunnyyun@msn.com

Role and responsibilities in emergency
call 911, and evacuate customers and employees to safe area.

3. Local Fire Services - Key Contact

Name Eric Dowell For Office Use - Party No.

Official Title
Director of fire & Emergency Service

Telephone No. 705-325-9131 ext 249 Fax No.

E-mail
edowell@townshipofsevern.com

Role and responsibilities in emergency

7. Propane Supplier Key Contact Person

Name Mark Larson For Office Use - Party No.

Official Title
project engineer

Telephone No. 705-687-5608 Fax No. 705-687-9452

E-mail
Mark@budgetpropane.net

Role and responsibilities in emergency

4. Local Fire Services - Alternate Contact

Name Tim Cranney For Office Use - Party No.

Official Title
Deputy fire chief

Telephone No. 705-325-2315 ext.247 Fax No. 705-327-5818

E-mail
tcranney@townshipofsevern.com

Role and responsibilities in emergency

8. Municipal Contact

Name Henry Sander For Office Use - Party No.

Official Title
Chief Administrative Officer

Telephone No. 705-325-2315 et227 Fax No. 705-327-5818

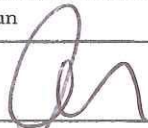
E-mail
hsander@townshipofsevern.com

Municipality

Township of Severn

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Name of person completing this form (please print)
Seung-Won Yun

Signature 

Official Title
owner & operator

Telephone No.
705-689-2192

Date (dd-mm-yyyy)
24-05-2011



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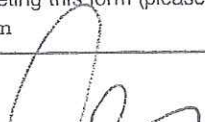
SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

2. Additional Safety Measures

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

N/C

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Signature 	Telephone No. 705-689-2192	Date (dd-mm-yyyy) 24-05-2011



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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) 17-05-2011	Print Name of Training Provider: Seung-Won Yun
	Print Name of Instructor: Seung-Won Yun
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) 17-05-2011	Print Name of Training Provider: Seung-Won Yun
	Print Name of Instructor: Seung-Won Yun
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) 17-05-2014	Print Name of Training Provider: Budget Propane
	Print Name of Instructor: James Callow
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:

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	Date (dd-mm-yyyy) 24-05-2011



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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)	Print Name of Training Provider: Seung-Won Yun
17-05-2012	Print Name of Instructor: Seung-Won Yun
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)	Print Name of Training Provider: Seung-Won Yun
17-05-2012	Print Name of Instructor: Seung-Won Yun
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: Budget Propane
17-05-2014	Print Name of Instructor: James Callow
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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Seung-Won Yun	Owner & Operator	
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	705-689-2192	24-05-2011



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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).

By Owner- See evacuation plan

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).

See evacuation plan

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).

See evacuation plan

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

No restricted access


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

Owner lives on site

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

Owner lives on site

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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 type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Are weighing systems validated for accuracy? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Is the schedule of maintenance and testing activities retained on site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

7. Water Supply

The propane licence holder should work with the local fire department to determine water supply capabilities that are available based on the propane facility's location.

- | | Yes | No |
|---|--------------------------|-------------------------------------|
| 1. Is a pressurized water system available at the propane facility site? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only) | | |
| 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) | | |

300 METRES TO SEVERN RIVER.
300 METRES TO SEVERN RIVER.

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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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If not, please explain (e.g., no fire services).		
Fire services comments, if any:		
COMBUSTIBLE WASTE MATERIALS IN AND AROUND BUILDING SHALL NOT BE PERMITTED THAT WILL CONSTITUTE A FIRE HAZARD.		
VEGETATION SHALL BE KEPT, CUT, DOWN ON PROPERTY		
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 ERIC DOWELL.		

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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.
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) 24-05-2011	Capacity of single largest propane storage vessel (USWG) 2000
Tank setback coordinates. Indicate placement on the map.	
Front: 36.9m	Right side property line: 39.3m
Rear: 57.60m	Left side property line: 110.5m
GPS coordinates of single largest vessel: 44.773768°N 79.334001°W	

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SECTION C: SUBMISSIONS (cont'd)

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

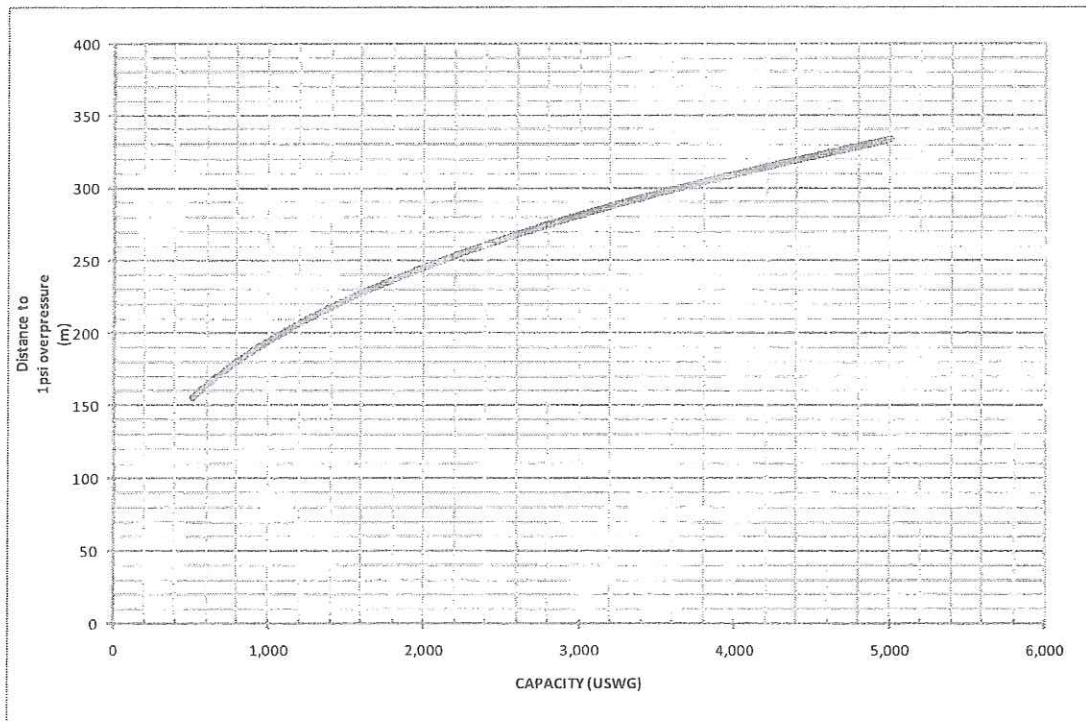
Table 1: Distance Table

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: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted]				X	69 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Blaines Auto Repair Shop</u> Address: <u>10950 Hwy#11</u> City: <u>Severn Bridge</u> Province <u>Ontario</u> Postal Code <u>P0E 1N0</u>			X		96.5 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>Seung-Won Yun</u>	Official Title <u>Owner & Operator</u>
Signature 	Telephone No. <u>705-689-2192</u> Date (dd-mm-yyyy) <u>25-05-2011</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

SECTION C: SUBMISSIONS (cont'd)

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

Portable Storage Additional Information Sheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5		
# 40	11.75		
# 33.3	9.62		
# 30	8.8		
# 20	5.8	30	174
# 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
N/C		
Total Tank Capacity		

Total Cylinder Capacity	174
Total Tank Capacity	0
Total Portable Capacity	174

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) Seung-Won Yun	Official Title Owner & Operator
Signature 	Telephone No. 705-689-2192
	Date (dd-mm-yyyy) 25-05-2011

DISSEMINATED
UNCLASSIFIED
DATE 05/24/2012

2,000 USWG Horizontal Tank
44.773768°N 79.334001°W
10955 Hwy 11N
Severn Bridge, ON., POE 1N0
County of Simcoe

246 m Hazard
Distance

Grace Centre

11



Prepared: 5/4/11

1. 45500 L Undergrnd Tank
 2. 26,500 L
 3. 22,700
 4. 22,700 (Diesel)

HIGHWAY

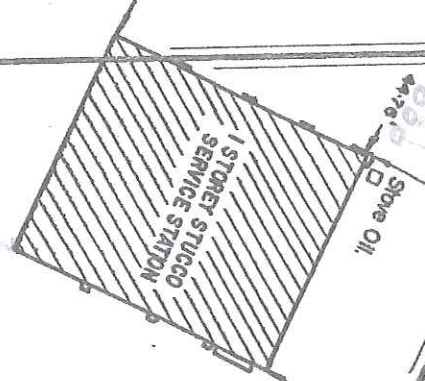
No. 11

BY INST. No. 24334
 PLAN PART 2, PLAN 201677
 491.00'

BEARING)
 MICHAEL
 AND WILLA
 OWNER
 382.44'

PART 1
 PLAN 201677

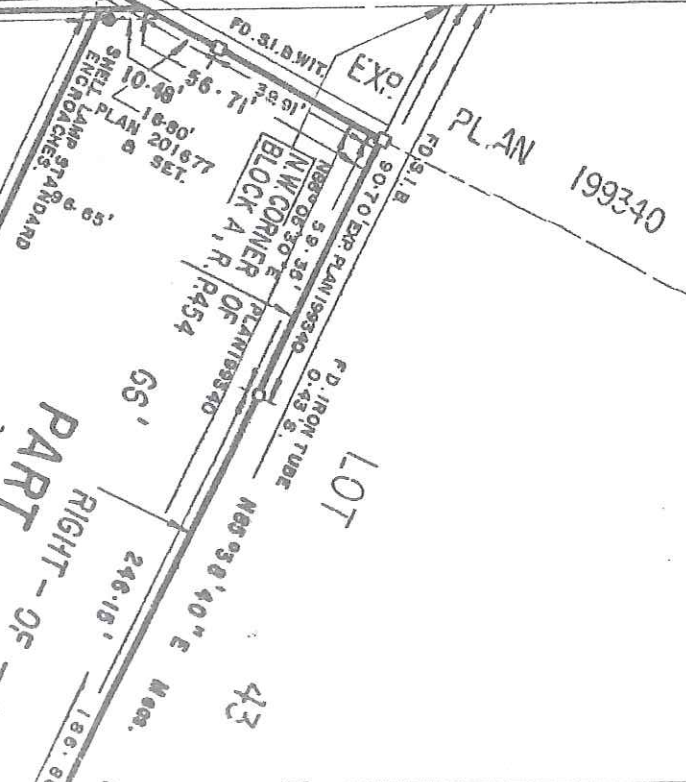
PUMP ISLAND
 134.55'
 80.03'

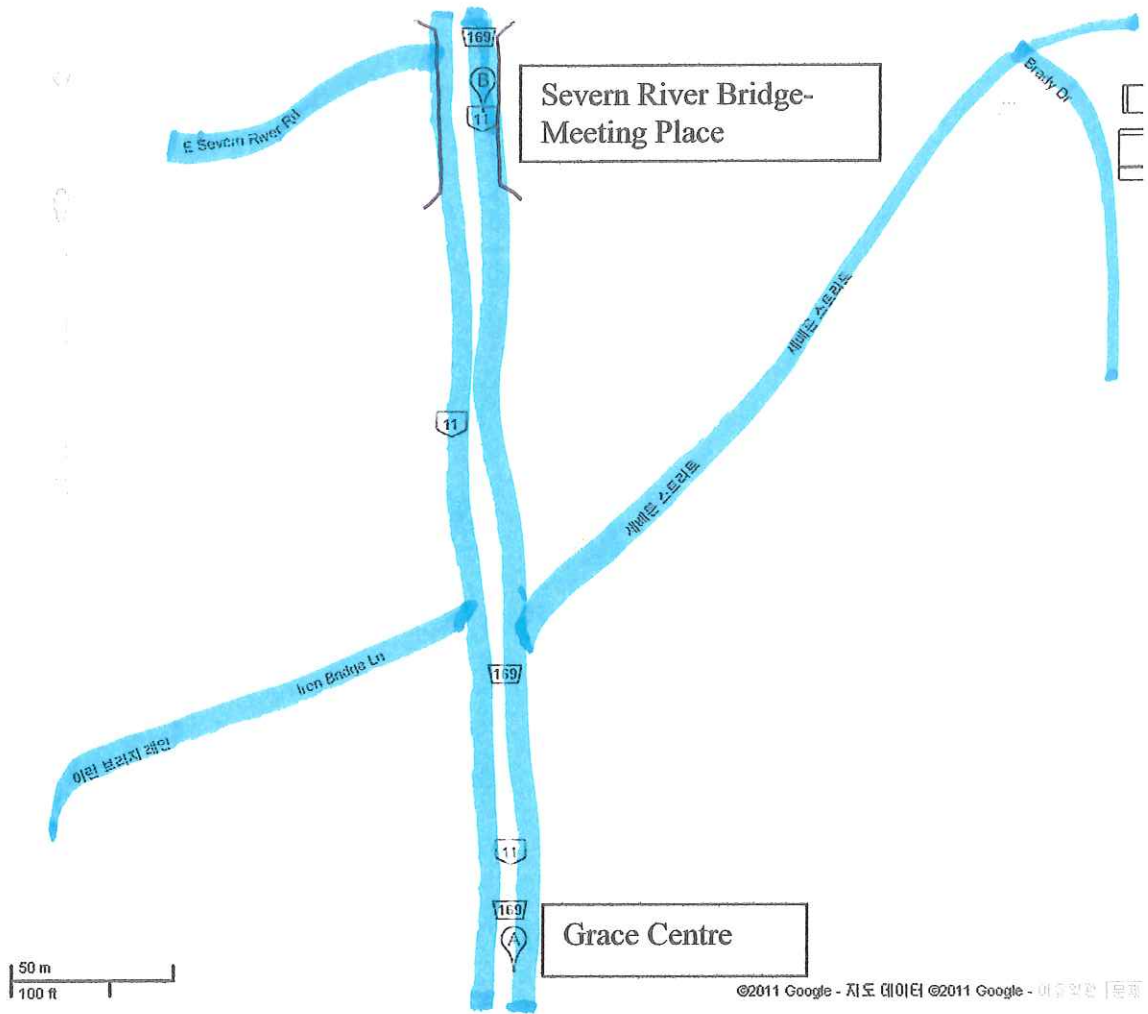


JOYCE

125 FT
 35 FT

PART RIGHT-OF-WAY
 LANDS STILL REGISTERED TO
 H.U. and H.I. WHITE
 INST. No. 23613
 246.70'





Ⓐ	ON-11 N/Regional Road 169 N
Ⓑ	ON-11 N/Regional Road 169 N
길찾기	

ON-11 N/Regional Road 169 N까지의 운전경로

ON-11 N Regional Road 169 N	14초
270 m	

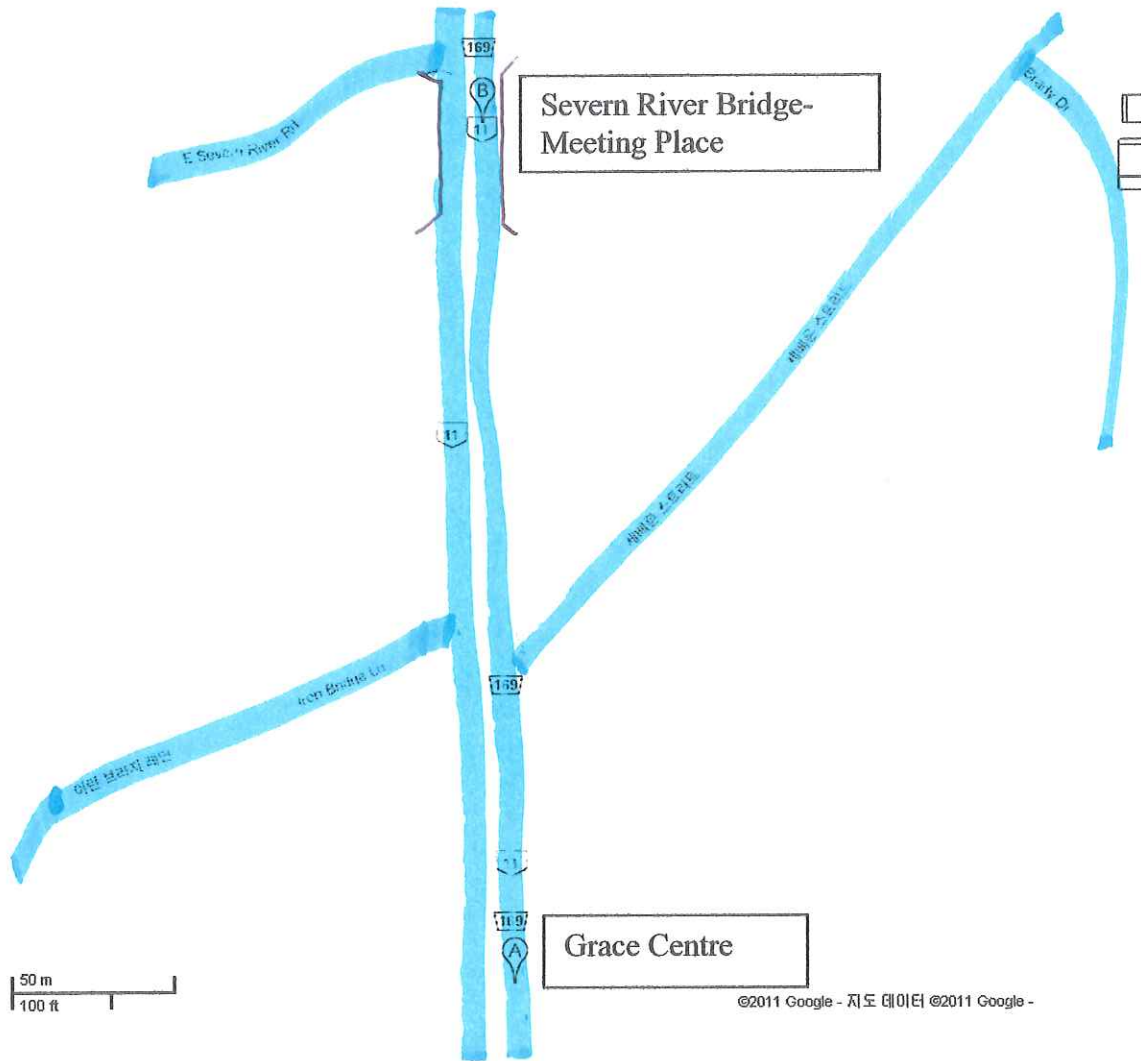
또는 3분

Ⓐ ON-11 N Regional Road 169 N

1. ON-11 N Regional Road 169 N에서 Severn St
 방면 북쪽으로 출발

270 m

Ⓑ ON-11 N Regional Road 169 N



- Ⓐ ON-11 N/Regional Road 169 N
 - Ⓑ ON-11 N/Regional Road 169 N
- 길찾기

ON-11 N/Regional Road 169 N까지의 운전경로

ON-11 N Regional Road 169 N	14초
270 m	

또는 3분

- Ⓐ ON-11 N Regional Road 169 N
- 1. ON-11 N Regional Road 169 N에서 Severn St
방면 북쪽으로 출발
- 270 m
- Ⓑ ON-11 N Regional Road 169 N