

Technical Standards and

14th Floor - Centre Tower 3300 Bloor Street West Toronto Ontario M8X 2X4 Safety Authority
www.tssa.org

Toronto Unitario .....
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 storag	e capacity on site.				
	Making a	o fully complete this form may result in rejection. false statement may result in a fine or prosecution der the <i>Technical Standards and Safety Act</i>					
	No.	I have provided in the second of the second					
	ce Number	- appretions					
neck	applicable type of propa						
	✓ Cylinder	Motor Fill Filling Plant Card/Ker ad application a Facility Site Plan and a Map of the Surrounding Area					
ıbmı	it along with this complete	ad application a racincy one right and a map a map					
		SECTION A: GENERAL I	NFORMATION				
_		olies to TSSA for a review for an RSMP unde	v Ontario's Technical	Standards and Safety Act,			
he ro	Undersigned app pane Storage an	d Handling Regulation.	, ontained	Ontario Corporation No., if applicable			
	Company Name	000 MON E000					
A	1143294 Ontario Inc						
	Operator Name (if different M&M ESSO	ent nom above)	5333	and the second s			
	Telephone No.	, Fax No. E-mail					
	613-332-5474	613-332-5998 Jagdish_Moondi@hotmail.co	m				
В	Street No.	Street Name / 911 Number / Address, if applicable					
	27523	HWY 62 south RR# 1	D-vilves	Postal Code			
	Town / City or Townshi	p / County	Province	KOL 1CO			
	Bancroft		Ontario				
		different from above.					
C	Street No. Street Name / 911 Number / Address, if applicable						
	Town / City or Township	n / County	Province	Postal Code			
		,					
In	formation on Cont	ainer Refill Centre or Filling Plant					
	Location of facility.	Street Name / 911 Number / Address, if applicable	Nearest Major Intersect	tion			
D	Street No.	Î.	Mill Street & Bay Lake				
	27523	HWY 62 south RR# 1	Province	Postal Code			
	Town / City or Townshi		Ontario	KOL 1CO			
	Town of Bancroft /	TWSP Dungannon Ward / CTY. of Hastings	Toman Toman				
_	Name of Licence Holder						
	Name of Licence Holder  1143294 Ontario Inc 0/A M&M ESSO						
		agement person as defined in the regulation holding the Record of	Training (ROT).	ROT type			
	Igbal S. Moondi	agement person as some a series		PP0-3			
	Municipality (or municipalities if the facility or its hazard distance touches multiple borders)						
	Municipality (or munic	Municipality (or municipalities if the facility or its nazaro distance fouches intuitiple colores)  Part of Lots 49 & 50 East Hastings Road Town of Bancroft (Geographic Township of Dungannon County of Hastings)					
	Part of Lots 49 & 50	East Hastings Road Town of Bancroft (Geographic Towns	WE AND THE THE THE TANK TO THE TANK TO THE	The second secon			
	Hours of operation.						
	nous or 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.

I nereby declare that the information is	idvo giron in	
Printname	Signature	Date (dd-mm-yyyy)
Name of Licence Holder Iqbal S. Moondi	is grante	014340
Name of Senior Management person as defined in the		
Regulation holding the Record of Training Iqbal S. Moondi		Alternative Management of the Control of the Contro

# TSSA WATERY AUTHOR

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

## SECTION A: GENERAL INFORMATION (cont'd)

	.911.011		
Indicate the year the facility was established. 1987	2002	nt modifications, as defined in s.1, O.Reg 211/	01, since establishment.
Identify the psig rating and serial number for ea	ach fixed propane storage tank on	site.	
PSIG	Serial Number		
Tank1: 250	5.483274	many, along days and many man hope	
Tank2:			
Tank3:			tank/vessel for
Enter capacity of propane in USWG, fixed, por	rtable, and mobile, and provide de	stailed inventory that includes the number of	talk/vessel lol
each type (fixed, portable, and mobile) and the	e capacity of each tank/vessel, or	a separate document.	
	Portable: 139 USWG	Mobile: No	
Fixed: 1000 USWG	Portable:	Mobilo.	

Name of person completing this form (please print)	Official Title Owner Operator		
Signature Aglest Moondi	Telephone No. 613-332-5474	Solp 6	

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# Level 1 Risk and Safety Management Plan (RSMP)

Technical Standards and Safety Act Propane Storage and Handling Regulation

## SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

			Activi	ity Information			
Name of Propar							
Street No.	Street N	ame / 911 Number / A					
251	Woodland	d Road East Unit 217			Province		Postal Code
Town / City or T Guelph	ownship /	Country			Ontario		N1H 8J1
Telephone No.		Fax No.	Contact Nar	me			
877-873-7467		519-836-7766	Mike Mullins	The second secon			
E-mail mullinsm@superi	orpropane.	com	www.superiorpropane.	com			
Superior Propane Street No.	Street N	Name / 911 Number /	bove, please check bo:	х. 🗌			
29508  Town / City or Bancroft	HWY 28				Province Ontario		Postal Code KOL 1C0
Telephone No. 613-962-9151	962-9153	Fax No. 613-962-6117	Contact Na Jeff Easton	amé		4	
E-mail eastonj@superio	orpropane.c	com	www.superiorpropane.	com			
Off-site Cylind	er and/or	Mobile Storage		Capacity stored off-site	, in USWG	For Office Use -	Party No.
Street No.	Street	Name / 911 Number /	Address, if applicable				
Town / City or	Township	/ Country			Province		Postal Code
Telephone No.		Fax No.	Contact Na	ame			
		- t sansidarad off-	elte eterago				

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

Official Title Owner/Operator	
Telephone No. 613-332-5474	Date (dd-mm-yyyy) Seb 6
	Owner/Operator Telephone No.



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## SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN

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

Description of the maximum volume, types and storage location of other hazardous materials on site, if any.  Gasoline Regular 2 underground tanks of 22,700 Litres each total = 45,400 litres Gasoline Premium 1 underground Tanks of 22,700 Litres
Diesel 1 underground tank of 22,700 Litres
Clear Diesel 1 underground tank of 50,000 Litres
Portable cylinder cage @ front of store 24 x 20 lb = 427 ltitres. (Automotive batteries (Dry) in parts department inside store)
Description of fire and emergency equipment indicated on facility site map.  ABC Fire extinguishers located through out the facility
1 x 20 ABC Fire extinguisher located @ the propane dispenser
3 - ABC fire extinguishers located inside store
List of fire protection controls (e.g., fire detection systems, fire notification systems, alarm systems, automatic shut off devices, fusible links, etc.) and describe their function, use and operation.  1- Fusible link on ISC valve - isolation valve between the tank and down stream propane dispensing equipment (in case of fire melts @ 212 * F shut ISC off)
Internal Safety Control valve(ISC) will be in the closed position when the propane refill centre is left unattended or business closed cabinet locked power off.
2- Emergency stop push button - located on post @ propane tank. This shuts down the electrical to pump and closes the solenoid valve stop flow of propane.
3- Emergency Shutoffs (Electrical) installed @ Propane Dispenser (E-Stop) & Fuse Panel (Identified)
Maintenance and testing schedule for fire protection controls and devices.  Maintenance and testing is undertaken by Superior Propane according to Superior Propane's Maintenance Standards. Schedule for key equipment is:
1- Pumps (check pump every 3 months; Pump motor- check shaft for tightness monthly; grease pump every 6 months.)
2- ISC valve (test for closure every 6 months).
C. L. Land and the conditions

3- Storage tank relief valves - inspect every 2 years; replacement schedule as per provincial regulations.

Name of person completing this form (please print)	Official Title Owner/Operator		
Signature Lel Moond	Telephone No. 613-332-5474	Date (dd-mm-yyyy) Sel 5 6	



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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

For Offi	ce Use - Party No.	5. Facility 24-Hour Contact Personal Name		For Office U	Ise - Party No.
1010111	50 500 1 dity 1101	I		1	
		Iqbal S. Moondi / Jagdish Moondi			
		Official Title Owner/Operator			
No. -332-5998		Cell No. 613-334-0256	Fax No. 613-332-2598		
002 000		E-mail jagdish_Moondi@hotmail.com	E-mail		
		Role and responsibilities in emergency			
ned		Co-ordinate site response plan (ERP) attached			
ate Contact	1,111	6. Name of Facility Manager			
	ice Use - Party No.	Name		For Office	Use - Party No.
		Official Title		Antony disconniction of	
***			Tray No.		
x No. 3-332-5998		Telephone No.	rax No.		
		E-mail			
		Role and responsibilities in emerge	Role and responsibilities in emergency		
hed					
		Control Very Control	Porcon		
	)		reison	For Office	Use - Party N
For Of	ffice Use - Party No.	Name Superior Propane (HOT LINE)			
		Official Title			
No.			Fax No.		
3-332-2222		877-873-7467			
			The second secon		
		Role and responsibilities in emergency			
nse. Liaise w	ith police.				
	1				
	office Use - Party No.	Name			
		Hazel Lambe			and a second
		Official Title Acting Deputy Clerk/ Planning Assis	stant		
ax No.		Telephone No. 613-332-8959	Fax No.		
		E-mail www.town.bancroft.on.ca hlambe	@town.bancroft.o	n.ca	
		Municipality			
		Town of Bancroft / TWSP of Dungannon / CTY. of Hastings			
	For Off  x No. 3-332-5998  med  For Off  x No. 3-332-2222  mse. Liaise with tact  For Co	For Office Use - Party No.  In	For Office Use - Party No.  For Office Use - Party No.  For Office Use - Party No.  Telephone No.  Sana Sabove  Official Title  Telephone No.  For Office Use - Party No.  For Office Use - Party No.  For Office Use - Party No.  Telephone No.  Superior Propane (HOT LINE)  Official Title  Dispatch  Telephone No.  877-873-7467  E-mail  Role and responsibilities in emerge Identify and dispatch Superior Propagates Identify and Deputy Clerk/ Planning Assistant Telephone No.  613-332-8959  E-mail  Www.town.bancroft.on.ca hlamber Municipality	Co-ordinate site response plan (ERP) attached  ate Contact  For Office Use - Party No.  Name Same as above  Official Title  X No. 3-332-5998  E-mail  Role and responsibilities in emergency  Name Superior Propane (HOT LINE)  Official Title  Dispatch  Telephone No.  Telephone N	Co-ordinate site response plan (ERP) attached  Sate Contact  For Office Use - Party No.  Official Title  Telephone No.  Fax No.  3-332-5998  E-mail  Role and responsibilities in emergency  For Office Use - Party No.  Name Superior Propane (HOT LINE)  Official Title  Dispatch  Telephone No.  Fax No.  Fax No.  Fax No.  For Office Use - Party No.  Name Superior Propane (HOT LINE)  Official Title Dispatch  Telephone No.  877-673-7467  E-mail  Role and responsibilities in emergency  Identify and dispatch Superior Propane and or LPERGC emergency Identify and dispatch Superior Propane and or LPERGC emergency Identify and dispatch Superior Propane and or LPERGC emergency Identify and dispatch Superior Propane and or LPERGC emergency Identify and dispatch Superior Propane and or LPERGC emergency Identify and dispatch Superior Propane and or LPERGC emergency Identify and dispatch Superior Propane and or LPERGC emergency Identify and Deputy Clerk/ Planning Assistant Telephone No.  G13-332-8959  E-mail  Www.town.bancroft.on.ca hlambe@town.bancroft.on.ca

	the second secon		
Name of person completing this form (please print)	Official Title		
Igbal S. Moondi	Owner/ Operator		
7	Telephone No.	Date (dd-mm-yyyy)	
Signature File ( ) Werned	613-332-5474	Sep 6	
Man 1 miles			



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

2. Additional Safety Measures

escribe any other measures in place at the facility that exceed the minimum Code and Standards requirements.
escribe any other measures in place at the facility that exceed the finithment of the stacked secretary of the stacked secretary of the secret
the event of an over filled cylinder, the cylinder will be tagged dated and set aside in edge to the shouldn't happen with the new OPD cylinder valves. p to be taken back to supplies facility so the can evacuate down to the proper level. (Note this shouldn't happen with the new OPD cylinder valves.
A Tours to Questions from 1 through
lease refer to Section B - Emergency and Preparedness Response Plan - appendix attached to the end of this form. Answers to Questions from 1 throug
of what the agent and supplier is responsible for.
Of what the egon.

	Thereby decrine	The second secon		
	L'a farm (plages print)	Official Title		
Name of person completing t	his form (piease print)	Owner/ Operator		
Iqbal S. Moondi	7	Telephone No.	Date (dd-mm-yyyy)	
Signature	1/0 Mars 19	613-332-5474	Sielo 6	
d	glas freehold		/	



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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.

	idedte facility kov contacts			
Training on Emergency Res	ponse Plan and Procedures provided to facility key contacts.			
Training Date (dd-mm-yyyy)	Print Name of Training Provider: N/A			
None	Print Name of Instructor:			
Training Date (dd-mm-yyyy)	Print Name of Training Provider: N/A	and the second of the second o		
None	Print Name of Instructor:			
Training Date (dd-mm-yyyy)	Print Name of Training Provider: N/A			
None	Print Name of Instructor:			
Training on the facility's Em	ergency Management Procedures provided to staff.	and the second s		
Training Date (dd-mm-yyyy)	Print Name of Training Provider: N/A			
None	Print Name of Instructor:			
Training Date (dd-mm-yyyy)	Print Name of Training Provider: N/A			
None	Print Name of Instructor:			
Training Date (dd-mm-yyyy)	Print Name of Training Provider: N/A			
None	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: Ontario Propane Association)	Please take note: ROT are valid for 3 years		
06-09-11	Print Name of Instructor: John Deak ID# 1-1019			
Training Date (dd-mm-yyyy)	Print Name of Training Provider:			
2 N	Print Name of Instructor:			
Training Date (dd-mm-yyyy)	Print Name of Training Provider:			
Table No.	Print Name of Instructor:			

Name of person completing this form (please print)	Official Title Owner/ Operator	
Signature Aglical Mandi	Telephone No. 613-332-5474	Date (dd-mm-yyyy)



Technical 3300 Bloor Street W
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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

	Least a resulted to facility key contacts	
Training on Emergency Res	sponse Plan and Procedures provided to facility key contacts.	Please note: Canadian Propane Gas Association
Farget Date (dd-mm-yyyy)	Print Name of Training Provider. Superior repeate of	is currently developing the course
Q4-2011	Print Name of Instructor: to be arranged	content and it and its provider should be available to
Farget Date (dd-mm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	teach in the fourth quarter of this year.
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	and the second s
,,	Print Name of Instructor:	
Training on the facility's En	nergency Management Procedures provided to staff.	
Target Date (dd-mm-yyyy)	Print Name of Training Provider: Key contact to train staff	
Q4-2011	Print Name of Instructor: to be arranged	
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	
Manager → Manager 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Print Name of Instructor:	
Target Date (dd-mm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
Con eite appoific training pr	ovided to certificate holders / persons with Records of Training.	
	Print Name of Training Provider: FSN Training & Development In	c. Please note: ROT are valid for 3 years
Target Date (dd-mm-yyyy)	Print Name of Instructor: Leo Alkenbrack Certificate # T111	Key contact will contact training provider
Q4-2011	Print Name of Training Provider:	if training is required in 2011
Target Date (dd-mm-yyyy)	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 Owner/ Operator	
Signature Tybe Moond;	Telephone No. 613-332-5474	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.

5. Emergency Response Communications Plan

-		
Warnings	and	Actions

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate). The operator or alternate will contact emergency services by calling 911 and will provide warnings outlined in the attached "Propane Emergency Response

Procedures" Placard (to be posted on site and part of the employee training.) If it is safe to do so this could involve advising neighbors to evacuate. The

owner/operator may also contact Superior Propane via the emergency number identified in the ERP

Over filled Cylinders will be set aside tagged/dated in put in a cage minimum 25 feet from the refill tank,cage located front of store - call supplier as per (EPR)

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

The owner / operator or alternate should first follow the actions in the ERP provided herein. Stage evacuation, if the release of propane cannot be stopped by activating the evacuation plan, if necessary).

cutting electrical power may be required. Note a specific muster point will be located across HWY 62 @ Gunter Tire location.

Actions will be taken by a ROT person(s)

Communication with	<b>Emergency</b>	Response	Authorities
Collinianion		The second second second	and the second s

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

When the system is operational A ROT person will be on duty. This person will be able to visually ascertain any abnormal / accident event and implement emergency response actions. When the system is not in operation, the ISC valve (main isolation valve) is closed, and the propane system is unattended. Any

accident involving the propane tank during such times will require the intervention of random, nearby individuals.

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

The propane tank system is located in a wide open area that is easily accessible by emergency response vehicles, by entering off HWY 62 using both access entrances going onto property.

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

The critical information required from the holder is (a) how to shut the system down and (b) the fill level in the tank (if known)

Fill level is relevant from time-to-BLEVE perspective (a near empty tank will BLEEVE sooner than a full tank if there is a fire impingement on the tank).

The information will be provided to the authorities by Owner Iqbal S. Moodie or Alternate.

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

Iqbal S. Moondi / partner Jagdish Moondi is always available to respond within minutes of an emergency (Facility Liaison person listed lives in the residential

home located on the same property attached just south of M&M Esso) (If this changes inform authorities within 7 days)

Name of person completing this form (please print)	Official Title Owner/ Operator	
Signature Sigled Mornels	Telephone No. 613-332-5474	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

01-06-11

613-332-5474

## 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 Ves No Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)? Is there adequate night lighting at the site? Are procedures in place that ensure access routes, aisles, storage area, filling areas 3. and the grounds are kept clear from unwanted materials? 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? Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders? Are weighing systems validated for accuracy? Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)? Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) 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. YAS No ls a pressurized water system available at the propane facility site? Can the municipal fire department pump 375 GPM (1420 LPM) of water at this 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 round access if there are no hydrants? (distance in metres only) 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. Official Title Name of person completing this form (please print) Owner/ Operator lgbal S. Mondl Date (dd-mm-yyyy) Telephone No.

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Signature



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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 Resp  If not, please explain (e.g., no fire services).	Yes nonse and Preparedness Plan? ✓	No
Fire services comments, if any:  Pat Hoover (Fire Chief) mentioned that he would review as soon as he can, but has  Please See affacted documents	s 60 days to response.	
To be completed by the Licence Holder In response to the above comments, the following action(s) is required: Iqbal S. Moondie will forward the local fire service response PAGE 11 immediately All recommendation have been met to satisfy Pat Hoover (Fire Chief)	y to TSSA as soon as he receives it	
The licence holder will respond to the Local Fire Services comments by	: September 2/20 (dd-mm-yyyy)	//
LOCAL FIRES		
The undersigned has reviewed Section B of the Risk and Safety Mar	nagement Plan Fire Services.	S. L. (dd mm 195-2)
Local Fire Services Name Roace of Fire Peet	Signature A A A A A A A A A A A A A A A A A A A	Date (dd-mm-yyyy) Sept 6/20/1
PAT Hover Fire Chief	;	

Name of person completing this form (please print)	Official Title Owner/ Operator	
gbal S. Moondi Signature  Mom	Telephone No. 613-332-5474	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

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.
- The maximum volume, types and storage location of hazardous materials.
- Location of permanent structures on site.
- Access and egress points and location of barriers.
- 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.
- 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-r 14-08-2011	nm-yyyy)	Capaci 1000 U	ty of single largest propane SWG	storagevesser (03WQ)
Tank setback coordinates.	Indicate placeme	nt on the map.	Right side property line:	128.016 meters
1 101n	123.44 meters		Left side property line:	86.868 meters
GPS coordinates of single	largest vessel:	N45* 02. 459'	W0077* 49. 827'	

Operator	
	Date (dd-mm-yyyy)
	one No. 2-5474



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

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:

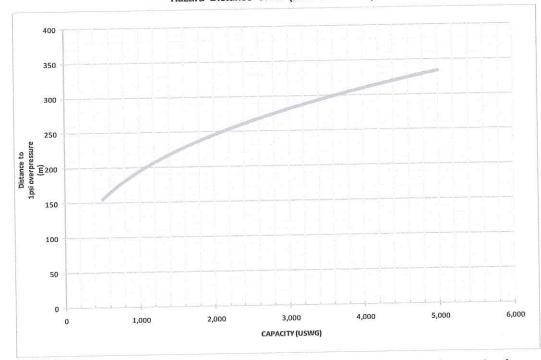
Density of Propane is 0.5033 kg per litre @ 15 C

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 Owner/ Operator	Official Title			
Signature False Morndy	Telephone No. 613-332-5474	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

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") 0 1 2-10 11+			Distance from Tank to Closest Building or Feature
Industrial buildings or parks or golf courses  Name: None  Address:ProvincePostal Code	X				0 m
Pesidential building units specifically permanent single family dwellings, condominiums, and apartments.			X		_100.584 <sub>_</sub> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes.  Name: Towns Service Centre  Address: 27538  City: Bancroft Province Ontario Postal Code KOL 1CO			×		<u>59.51</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts.  Name: None  Address:ProvincePostal Code	X				m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons.  Name: N/one  Address:	×				m
Emergency responders specifically fire stations, ambulance stations, and police stations.  Name: Address: City:  Bancroft Fire Department  Address:  Ontario  Postal Code KOL 1CO					

Name of person completing this form (please print)	Official Title Owner / Operator			
Signature falul Monney"	Telephone No. 613-332-5474	Date (dd-mm-yyyy)		

<sup>\*</sup> For multi-unit buildings, count each unit as "1".



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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

#### Portable Storage Additional Information Sheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5	1	empty (resale)
# 40	11.75		
# 33.3	9.62		
# 30	8.8		
# 20	5.8	24	139.2
# 10	2.9		
# 5	1.5		
al Cylinder Capacity		25	139.2

#### Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
	0	0
All and a second a		
Total Tank Capacity 0		

to Commente and a Commente and a comment of the com			
Total Cylinder Capacity	139.2 USWG 1000 USWG Dispenser		
Total Tank Capacity			
Total Portable Capacity	N/A		

Name of person completing this form (please print) lqbal S. Moondi	Official Title Owner/ Operator			
Signature Sulal Morney	Telephone No. 613-332-5474	Date (dd-mm-yyyy) 17		



Staff GIS

# Gas and Convenience Highway 62 South



**(** 

20km30000049400002008GROUP-EALTA.sid

20km30000049200002008GROUP-

Scale: 1:2,865

20km30000049800002008GROUP-EALTA:sid 20km30000049600002008GROUP-EALTA.sid

20km30000050200002008GROUP-EALTA.sid 20km30000050000002008GROUP. EALTA.sid

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20km32000049600002008GROUP-EALTA.sid 20km240000500000002008GROU-PEA1.img

20km32000049400002008GROUP-EALTA.sid

Provincial Parks

☐ Land Parcel

Almagamated Boundary

Utility Line

Municipal Boundary

Hastings\_AbandonRail

Ontario Road Network

Unaddressed Trail

\* HastingsRail

Legend

**Emergency Services** Provincial Highway

BAYLAKERD

Municipal Office

Map center: 277066, 4991366

Notes: CON EHR PT LOTS 49 AND 50 RP:21R9457 PARTS 1, 2 AND 3 Dungannon Ward, Town of Bancroft

255 m.

This map is a user generated static output from an Internet mapping site and is for general reference only. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable. THIS MAP IS NOT TO BE USED FOR NAVIGATION. County of Hastings GIS Section 2010 (www.hastingsnavigator.ca).

