



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X2X4
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 000076639937

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
1435568 ONTARIO

Operator Name (if different from above)
BRANT FUELS & VARIETY

Telephone No. 519-484-2850 Fax No. 519-484-2307 E-mail l_shoker@hotmail.com

B Street No. 259 Street Name / 911 Number / Address, if applicable COCKSHUTT ROAD

Town / City or Township / County BRANTFORD Province ONTARIO Postal Code N3T 5L6

Mailing address if different from above.

C Street No. _____ Street Name / 911 Number / Address, if applicable _____

Town / City or Township / County _____ Province _____ Postal Code _____



Information on Container Refill Centre or Filling Plant

Location of facility.


D Street No. 259 Street Name / 911 Number / Address, if applicable COCKSHUTT ROAD Nearest Major Intersection WAR ROAD

Town / City or Township / County BRANTFORD Province ONTARIO Postal Code N3T 5L6

Name of Licence Holder
MANDEEP SHOKER

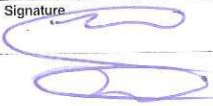
Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT) ROT type
MANDEEP SHOKER 100-08

Municipality (or municipalities if the facility or its hazard distance touches multiple borders)
BRANTFORD

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.

Print name Name of Licence Holder <u>MANDEEP SHOKER</u>	Signature 	Date (dd-mm-yyyy) <u>07-11-2011</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>MANDEEP SHOKER</u>		<u>07-11-2011</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 A: GENERAL INFORMATION (cont'd)

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

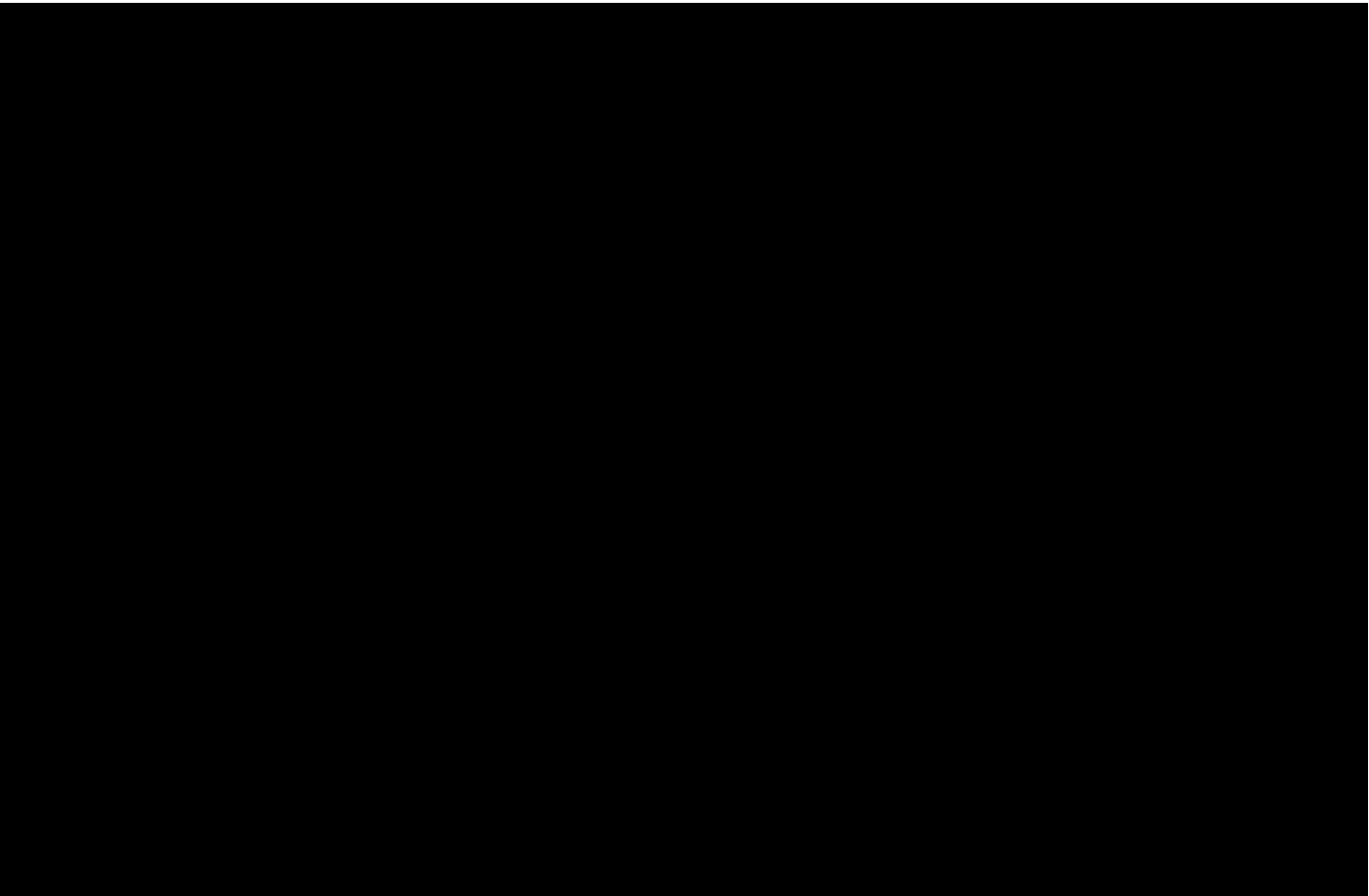
2004	NONE
------	------

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

	PSIG	Serial Number
Tank1:	250	369_02
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: 2000 Portable: 0 Mobile: 0



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) MANDEEP SHOKER	Official Title MANAGER
Signature 	Telephone No. Date (dd-mm-yyyy) 519-484-2307 07-11-2011



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 A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) MCROBERT FUELS			
Street No. 4755	Street Name / 911 Number / Address, if applicable EGREMONT ROAD		
Town / City or Township / Country		Province ONTARIO	Postal Code N7G 3H3
Telephone No. 519-246-1019	Fax No. 519-246-1160	Contact Name RAYMOND MCROBERT	
E-mail			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>			
Street No.	Street Name / 911 Number / Address, if applicable		
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	
E-mail			

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.

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) MANDEEP SHOKER	Official Title MANAGER	
Signature 	Telephone No. 519-484-2307	Date (dd-mm-yyyy) 07-11-2011



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 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 - 50,000 L

- SUPER - 15,000L

- DIESEL - 25,000L

- STORED IN UNDERGROUND TANK FOR RETAIL DISTRIBUTION

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

- FIRE EXTINGUISHER LOCATED IN THE BUILDING, ONE AT THE STORAGE TANK AND TWO AT THE GAS PUMPS


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 SHUT OFF IS LOCATED OUTSIDE THE BUILDING AND IS USED TO SHUT OFF THE POWER TO THE TANK. ANOTHER EMERGENCY SHUT OFF IS LOCATED INSIDE THE BUILDING AND IS ALSO USED AS A POWER SHUT OFF. THERE IS ALSO THE FUSIBLE LINK WHICH IS LOCATED ON THE BOTTOM OF THE TANK. IN CASE OF FIRE, THE LINK IS SEVERED ULTIMATELY SHUTTING OFF THE VALVE LOCATED IN THE TANK. AUTOMATIC SHUT OFF VALVE LOCATED ON THE CYLINDER FILL AND METER WHICH SHUTS OFF PUMP AND FLOW OF GAS.

Maintenance and testing schedule for fire protection controls and devices.

THE EMERGENCY SHUT OFF LOCATED IN THE BUILDING IS TESTED DAILY, WHILE THE EXTERNAL SHUT OFF IS TESTED YEARLY. MOREOVER, THE FUSIBLE LINK IS VISUALLY INSPECTED MONTHLY FOR SIGNS OF DAMAGE. FINALLY, FIRE EXTINGUISHERS ARE INSPECTED MONTHLY AND THE AUTOMATIC SHUT OFF VALVES ARE INSPECTED ANNUALLY

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

Name of person completing this form (please print) MANDEEP SHOKER	Official Title MANAGER	
Signature 	Telephone No. 519-484-2307	Date (dd-mm-yyyy) 07-11-2011



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 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 MANDEEP SHOKER		Name BAKHSHISH SHOKER	
Official Title MANAGER		Official Title OWNER	
Telephone No. 519-484-2850	Fax No. 519-484-2307	Cell No. 519-865-7830	Fax No. 519-484-2307
E-mail l_shoker@hotmail.com		E-mail	
Role and responsibilities in emergency INITIATE EMERGENCY CALLS AND ADVISE APPLICABLE PARTIES OF EMERGENCY		Role and responsibilities in emergency INITIATE EMERGENCY CALLS AND ADVISE APPLICABLE PARTIES	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name BAKHSHISH SHOKER		Name MANDEEP SHOKER	
Official Title OWNER		Official Title MANAGER	
Telephone No. 519-484-2850	Fax No. 519-484-2307	Telephone No. 51-484-2850	Fax No. 519-484-2307
E-mail		E-mail l_shoker@hotmail.com	
Role and responsibilities in emergency INITIATE EMERGENCY CALLS AND ADVISE APPLICABLE PARTIES OF EMERGENCY		Role and responsibilities in emergency INITIATE EMERGENCY CALLS AND ADVISE APPLICABLE PARTIES	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name PAUL BOISSONNEAULT	For Office Use - Party No.	Name RON DRIEDGER	For Office Use - Party No.
Official Title FIRE CHIEF AND CEMC		Official Title SALES REPRESENTATIVE	
Telephone No. 519-442-4500	Fax No. 519-442-4590	Telephone No. 519-246-1019	Fax No. 519-246-1160
E-mail Paul.boissonneault@brant.ca		E-mail	
Role and responsibilities in emergency		Role and responsibilities in emergency WORK WITH LOCAL FIRE SERVICES WHEN REQUESTED	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name GEOFF HAYMAN	For Office Use - Party No.	Name LORI WOLFE	
Official Title DEPUTY FIRE CHIEF		Official Title CITY CLERK	
Telephone No. 519-442-4500	Fax No. 519-442-4590	Telephone No. 519-759-4150 x2201	Fax No. 519-759-7840
E-mail geoff.hayman@brant.ca		E-mail LWOLFE@BRANTFORD.CA	
Role and responsibilities in emergency		Municipality CITY OF BRANTFORD 100 WELLINGTON SQUARE P.O. Box 818 BRANTFORD, ONT N3T 5R7	

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) MANDEEP SHOKER	Official Title MANAGER
Signature	Telephone No. 519-484-2307
	Date (dd-mm-yyyy) 07-11-2011



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 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.

NONE

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) MANDEEP SHOKER	Official Title MANAGER	
Signature 	Telephone No. 519-484-2307	Date (dd-mm-yyyy) 07-11-2011



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 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) 20-09-2011	Print Name of Training Provider: F.S.N
	Print Name of Instructor: MIKE FARAH
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) 20-09-2011	Print Name of Training Provider: F.S.N
	Print Name of Instructor: MANDEEP SHOKER
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) 20-09-2011	Print Name of Training Provider: F.S.N
	Print Name of Instructor: MANDEEP SHOKER
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:

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) MANDEEP SHOKER	Official Title MANAGER
Signature 	Telephone No. 519-484-2307
	Date (dd-mm-yyyy) 07-11-2011



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario MBX 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 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) 07-11-2011	Print Name of Training Provider: F.S.N
	Print Name of Instructor: TBA
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) 07-11-2011	Print Name of Training Provider: F.S.N
	Print Name of Instructor: TBA
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) 07-11-2011	Print Name of Training Provider: F.S.N
	Print Name of Instructor: TBA
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:

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) MANDEEP SHOKER	Official Title MANAGER
Signature 	Telephone No. 519-484-2307
	Date (dd-mm-yyyy) 07-11-2011



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 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).
IN THE EVENT OF AN EMERGENCY, EITHER THE OWNER OR THE MANAGER WILL CONTACT EMERGENCY SERVICES VIA A 911 CALL. THE OWNER OR MANAGER WILL ENSURE THE FACILITY IS EVACUATED AND THAT ALL PERSONS ARE DIRECTED TO THE SAFE AREA LOCATED ON THE LEFT SIDE OF THE BUILDING. MOREOVER, THE OWNER/MANAGER WOULD NOTIFY NEIGHBOURING OCCUPANTS ON THE SOUTH SIDE OF THE POTENTIAL DANGER AND DIRECT THEM TO THE SAFE ZONE.

Describe what action is to be taken and by whom when a warning is issued (including details of a meeting place in a safe identified area and activating the evacuation plan, if necessary).
THE OWNER OR MANAGER WILL VERBALLY NOTIFY ALL PERSONS ON THE GROUNDS TO EVACUATE TO THE AREA DESIGNATED AS THE SAFE ZONE. THEY WILL THEN PROCEED TO CALL EMERGENCY SERVICES EITHER BY MOBILE DEVICE OR TELEPHONE LOCATED IN THE SAFE ZONE. ALSO, RESIDENTIAL NEIGHBOURS LOCATED TO THE SOUTH OF THE BUILDING WOULD BE PERSONALLY NOTIFIED AND ALSO DIRECTED TO THE SAFE AREA. IF MAIN CONTACT IS UNAVAILABLE, THE GAS STATION WOULD BE CLOSE.

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 OWNER OR THE MANAGER SHALL CALL EMERGENCY SERVICES VIA TELEPHONE IMMEDIATELY UPON DISCOVERY OF ANY HAZARD THAT MAY RESULT IN AN IMMINENT DANGEROUS SITUATION. EITHER THE TELEPHONE LOCATED IN THE SAFE ZONE OR A PERSONAL MOBILE DEVICE SHALL BE USED TO PLACE THE CALL TO EMERGENCY SERVICES. IF THE OWNER AND MANAGER ARE UNAVAILABLE, THE GAS STATION WOULD BE CLOSE.

Describe provisions for fire department entry when there are no operations or staffing at the propane site.
ACCESS TO THE SINGLE PRESSURE VESSEL IS OPEN TO TWO ACCESSIBLE ROADS AND ARE NOT GATED AT ANY TIME. HOWEVER, IN THE EVENT EMERGENCY SERVICES NEEDS ACCESS TO THE BUILDING AND IT IS LOCKED, THERE IS A WINDOW IN THE ENTRY DOOR THAT MAY BE BREACHED WITH MINIMAL EFFORT, THUS ALLOWING EMS ACCESS TO THE BUILDING. IN THE EVENT EMS REQUIRES TO SHUT DOWN POWER TO THE REFILLING STATION, AN EMERGENCY SHUT OFF IS LOCATED OUTSIDE THE BUILDING AND IS IDENTIFIABLE.

Describe how the licence holder will ensure continual flow of updated information to authorities.
DEPENDING ON THE NATURE OF THE EMERGENCY, THE LICENSE HOLDER SHALL NOTIFY AUTHORITIES BY TELEPHONE. IF LICENSE HOLDERS ARE UNAVAILABLE, THE GAS STATION WOULD BE CLOSE.

How long will it take the facility liaison person to respond to the site.
IT WOULD TAKE APPROXIMATELY 5 MINUTES FOR THE FACILITY LIAISON PERSON TO RESPOND TO THE SITE.

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

Name of person completing this form (please print) MANDEEP SHOKER	Official Title MANAGER	
Signature 	Telephone No. 519-484-2307	Date (dd-mm-yyyy) 07-11-2011



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 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 type="checkbox"/>	<input checked="" 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)	1000 m _____	
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)	1000 m _____	

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) MANDEEP SHOKER	Official Title MANAGER	
Signature 	Telephone No. 519-484-2307	Date (dd-mm-yyyy) 07-11-2011



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 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:

- * Provide site map.
- * Show safe meeting place.
- * Provide information on staff to act in manager/owner's absence.
- * Provide information on training, etc.

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: 07-11-2011
(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 <u>Paul Boissonneault</u>	<u>Paul Boissonneault</u>	<u>17/06/2011</u>

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>MANDEEP SITOGER</u>	Official Title <u>MANAGER</u>
Signature 	Telephone No. <u>519 484 2307</u>
	Date (dd-mm-yyyy) <u>07-11-2011</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

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) 29-10-2011	Capacity of single largest propane storage vessel (USWG) 2000
Tank setback coordinates. Indicate placement on the map.	
Front: 42.50M NORTH	Right side property line: 35.3M WEST
Rear: 8.25M SOUTH	Left side property line: 10.14M EAST
GPS coordinates of single largest vessel: Latitude 43.074432, longitude -80.26391	

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) MANDEEP SHOKER	Official Title MANAGER
Signature 	Telephone No. 519-484-2307
	Date (dd-mm-yyyy) 07-11-2011



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

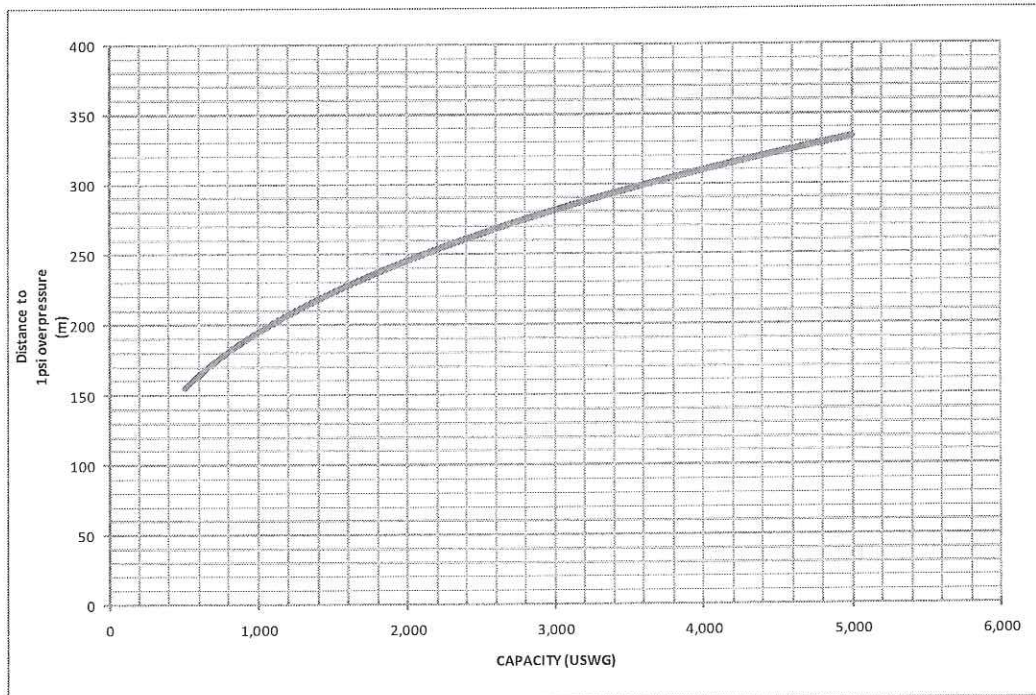
Table 1: Distance Table

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)



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) MANDEEP SHOKER		Official Title MANAGER
Signature 	Telephone No. 519-484-2307	Date (dd-mm-yyyy) 07-11-2011



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

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 <u>RESIDENTIAL</u> Name: <u>BOYD</u> Address: <u>8 WAB ROAD</u> City: <u>BRANTFORD</u> Province <u>ONTARIO</u> Postal Code <u>N3T 5L6</u>			X		<u>48.5</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted]			X		<u>10.19</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: _____ Address: <u>N/A</u> City: _____ Province _____ Postal Code _____	X				<u>0</u> m
Commercial building units - continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>Jim SCHMIOT</u> Address: <u>251 COCKSHUTT ROAD</u> City: <u>BRANTFORD</u> Province <u>ONTARIO</u> Postal Code <u>N3T 5L6</u>		X			<u>102.1</u> m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: <u>N/A</u> City: _____ Province _____ Postal Code _____	X				<u>0</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: <u>N/A</u> City: _____ Province _____ Postal Code _____	X				<u>0</u> 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) MANDEEP SHOKER	Official Title MANAGER	Date (dd-mm-yyyy) 07-11-2011
Signature 	Telephone No. 519-484-2307	



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		
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			

Tanks Stored On-site Not Connected for Use

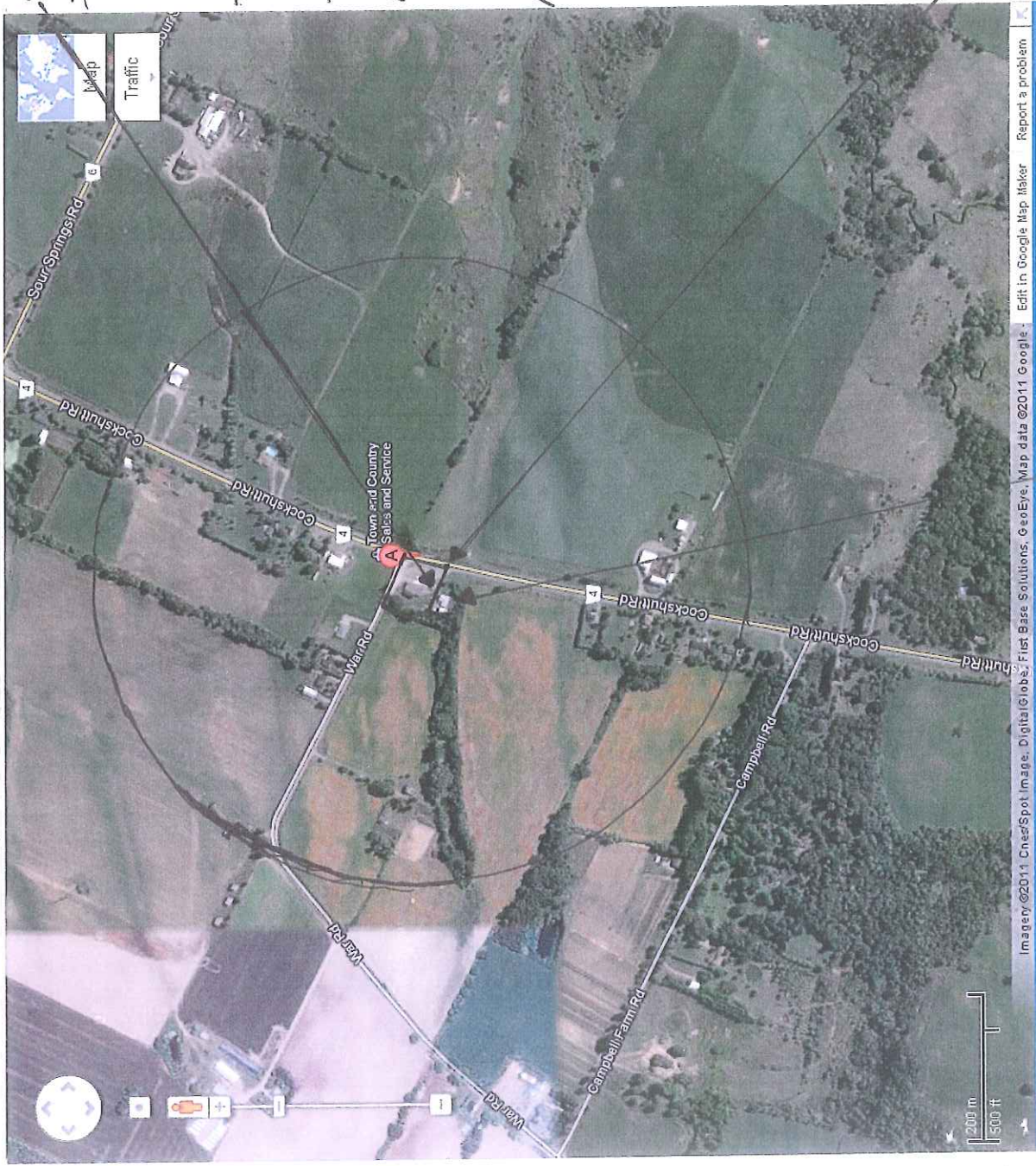
Tank Size In USWG	Quantity	Total Volume in USWG
Total Tank Capacity		

Total Cylinder Capacity	
Total Tank Capacity	
Total Portable Capacity	

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

Name of person completing this form (please print) MANDEEP SHOKER	Official Title MANAGER	
Signature 	Telephone No. 519-484-2307	Date (dd-mm-yyyy) 07-11-2011

Location: 259 Cockshutt RD
Brantford, ONT
Prepared: Jan 04, 2012



Residential

- 2000 USWS horizontal Tank
- Tank setbacks: 42.5m North
10.14m East, 8.25 South
35.3m West
- GPS coordinates: 43°07'44.32"N
80°26'39.1 W
- Radius = 246m

Municipality: City of Brantford
City clerk: Lori Wolfe

Address: 100 Wellington Square
P.O. Box 818
Brantford, ONT
N3T 5P7

Phone: (519) 759-4150 x2001

Property line

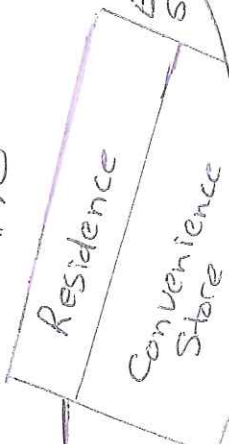


WEST

Residential

Grassed

Water well →



Concrete Pad

Propane Tank

Sepsic Tank

Grave

Storage Tanks

Fire extinguisher

Shut off Valve

Residential

Pump Island

Gas Pumps

Diesel Pumps

2 Fire extinguishers

Commercial building

War Road

Meeting place

Emergency Shut off

SOUTH

Cocksbutt Road

Agricultural

EAST

NORTH