



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X 2X4
Fax: 416.231.4903
Customer Service: 1.877.682.8772

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

This Level 1 RSMP applies to:

- a facility with a total propane storage capacity of 5,000 USWG or less; or
- a facility with a fixed propane storage capacity of exactly 5,000 USWG and no more than 500 USWG of portable propane storage capacity on site.

<p style="text-align: center;">Failure to fully complete this form may result in rejection. Making a false statement may result in a fine or prosecution under the <i>Technical Standards and Safety Act</i></p> <p>Licence Number 0076400134-C</p> <p>Check applicable type of propane operations.</p> <p> <input checked="" type="checkbox"/> Cylinder <input checked="" type="checkbox"/> Motor Fill <input type="checkbox"/> Filling Plant <input type="checkbox"/> Card/Keylock </p> <p>Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.</p>	<p style="text-align: center;">For Office Use Only</p> <div style="border: 1px solid black; height: 80px; width: 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.

A Company Name M & R Country Store	Ontario Corporation No., if applicable 1382363 Ontario Limited	
Operator Name (if different from above) Davinder S. Agimal		
Telephone No. 519-727-3500	Fax No. 519-727-3500	E-mail ranjit_agimal@hotmail.com
B Street No. 274		Street Name / 911 Number / Address, if applicable County Road #42 R.R. #1
Town / City or Township / County Tecumseh		Province Ontario
Postal Code N8N 2L9		
Mailing address if different from above.		
C Street No. SAME		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. 274	Street Name / 911 Number / Address, if applicable County Road #42 R.R. #1	Nearest Major Intersection County Road #42 & Elmstead Road
Town / City or Township / County Tecumseh		Province Ontario
Postal Code N8N 2L9		
Name of Licence Holder Davinder S. Agimal		
Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). Davinder S. Agimal		ROT type 100-1
Municipality (or municipalities if the facility or its hazard distance touches multiple borders) None		

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

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

Printname	Signature	Date (dd-mm-yyyy)
Name of Licence Holder Davinder S. Agimal		20 - 08 - 2011
Name of Senior Management person as defined in the Regulation holding the Record of Training Davinder S. Agimal		



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SECTION A: GENERAL INFORMATION (cont'd)

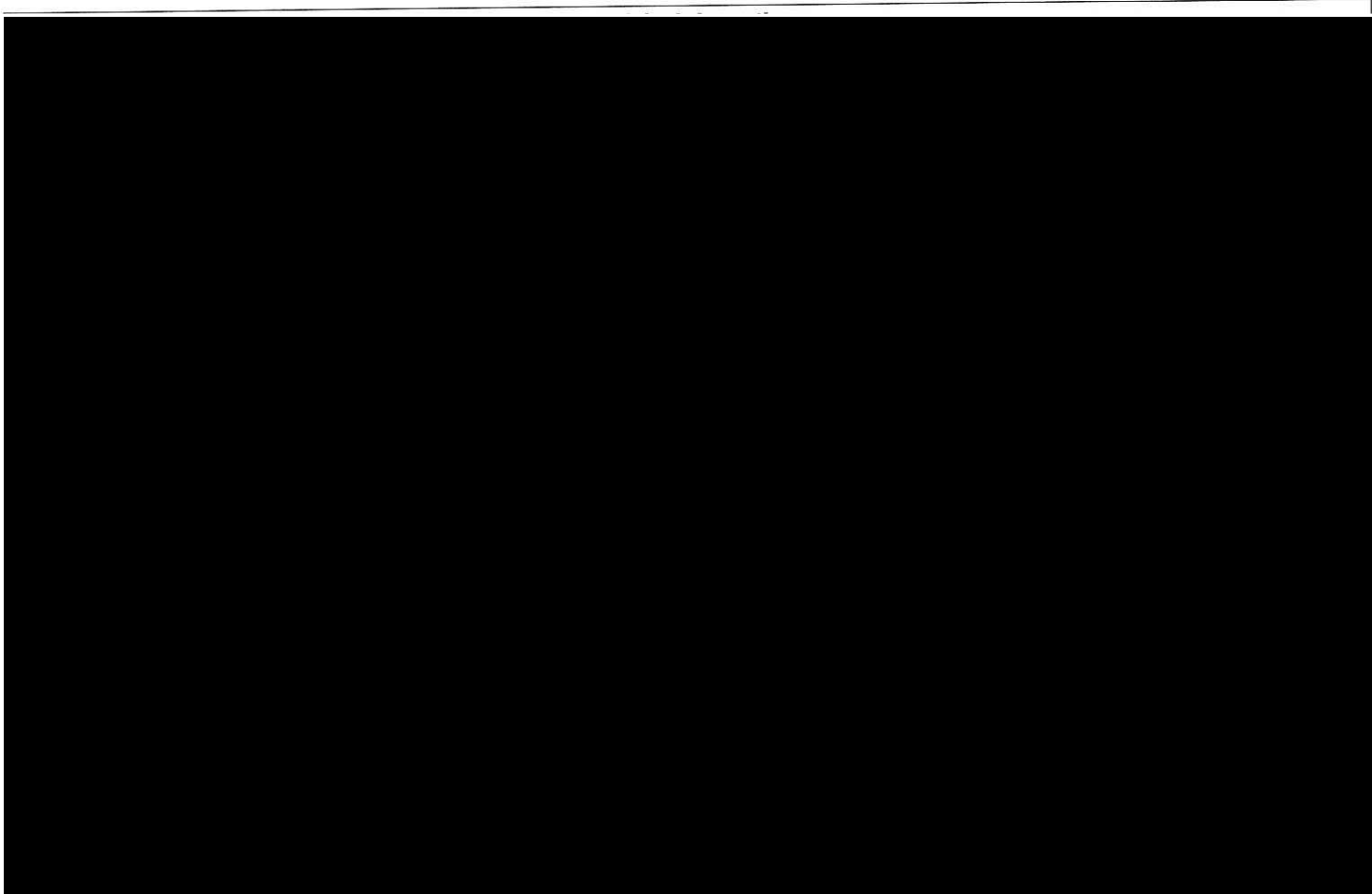
Indicate the year the facility was established. 2005 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.
No modifications

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

	PSIG	Serial Number
Tank1:	<u>250</u>	<u>311-96</u>
Tank2:	<u>0</u>	_____
Tank3:	<u>0</u>	_____

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 USWG Portable: 0 Mobile: 0



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Name of person completing this form (please print) <u>Ranjit Agimal</u>		Official Title <u>Vice President</u>
Signature <u>Ranjit Agimal.</u>	Telephone No. <u>519-727-3500</u>	Date (dd-mm-yyyy) <u>20-08-2011</u>



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) Aabco Propane		For Office Use - Party No. [REDACTED]	
Street No. 5475	Street Name / 911 Number / Address, if applicable DiCocco Court		
Town / City or Township / Country Oldcastle, Canada		Province Ontario	Postal Code NOR 1L0
Telephone No. 519-727-3500	Fax No. 519-727-3500	Contact Name Ranjit Agimal	
E-mail aburton@aabcopropane.com			

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 / 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 NONE		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 Name	

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

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Signature <i>Ranjit Agimal</i>	Telephone No. 519-727-3500	Date (dd-mm-yyyy) 20-08-2011	



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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.

Underground Gasoline Storage - 35000 liters (Gas)

Underground Gasoline Storage - 15000 liters (V Power)

Underground Diesel Storage - 25000 liters (Diesel)

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

Portable Fire Extinguishers throughout facility. (identified on map provided)

Fire Suppression System installed in kitchen facility.(Wet)

Portable Fire Extinguisher located @ Propane Tank

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.

Fusible Link - Fire Suppression System in commercial kitchen range hood. The kitchen facility is located at the east end of this building.

Alarm System installed - Entry, Motion and Intrusion only. Owners are first contact for security services. (519-735-0202)

There are cameras installed throughout this facility and are for security and monitoring purposes only.

Maintenance and testing schedule for fire protection controls and devices.

All maintenance and service is completed by 3rd party contractors. The records of inspection are retained on site and are available for inspection.

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Signature <i>Ranjit Agimal</i>		Telephone No. 519-727-3500	Date (dd-mm-yyyy) 20-08-2011



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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact				5. Facility 24-Hour Contact Person			
Name Davinder Agimal		For Office Use - Party No.		Name Davinder Agimal		For Office Use - Party No.	
Official Title President				Official Title President			
Telephone No. 519-727-3500		Fax No. 519-727-3500		Cell No. 519-567-5268		Fax No. 519-727-3500	
E-mail ranjit_agimal@hotmail.com				E-mail ranjit_agimal@hotmail.com			
Role and responsibilities in emergency Emergency Response Liaison				Role and responsibilities in emergency Emergency Response Liaison			
2. Facility Contact Personnel - Alternate Contact				6. Name of Facility Manager			
Name Ranjit Agimal		For Office Use - Party No.		Name Davinder Agimal		For Office Use - Party No.	
Official Title Vice-President				Official Title President			
Telephone No. 519-727-3500		Fax No. 519-727-3500		Telephone No. 519-727-3500		Fax No.	
E-mail ranjit_agimal@hotmail.com				E-mail ranjit_agimal@hotmail.com			
Role and responsibilities in emergency Alternate Emergency Response Liaison				Role and responsibilities in emergency Emergency Response Liaison			
3. Local Fire Services - Key Contact				7. Propane Supplier Key Contact Person			
Name Chief Don Williamson		For Office Use - Party No.		Name Andy Burton		For Office Use - Party No.	
Official Title Fire Chief CEMC		E-mail dwilliamson@lakeshore.ca		Official Title Owner		E-mail aburton@aabcopropane.com	
Telephone No. 519-728-0550		Fax No. 519-728-2545		Telephone No. 519-737-9635		Fax No. 519-737-9137	
Role and responsibilities in emergency Prevention, Mitigation				Role and responsibilities in emergency Advisor			
Fire Services Address 419 Notre Dame St, Belle River, Ontario				Propane Supplier Address 5475 DiCocco Crt.			
4. Local Fire Services - Alternate Contact				8. Municipal Contact			
Name Robert Mendonca		For Office Use - Party No.		Name Mary Masse		For Office Use - Party No.	
Official Title Assistant Fire Chief		E-mail rmendonca@lakeshore.ca		Official Title Town Clerk		For Office Use - Party No.	
Telephone No. 519-728-0550		Fax No. 519-728-0550		Telephone No. 519-728-2700 #231		Fax No. 519-728-9530	
Role and responsibilities in emergency Prevention, Mitigation				E-mail mmasse@lakeshore.ca			
Fire Services Address 419 Notre Dame St., Belle River, Ontario				Municipality Name and Address 419 Notre Dame St., Belle River, Ontario			

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Signature 		Telephone No. 519-727-3500	Date (dd-mm-yyyy) 20-08-2011



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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.

No measures in place that do exceed the minimum Code and Standard requirements.

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Ranjit Agimal		Vice-President	
Signature	Ranjit Agimal.	Telephone No.	Date (dd-mm-yyyy)
		519-727-3500	20 - 08 - 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) 29-11-2011	Print Name of Training Provider: EPC Services
	Print Name of Instructor: Raymond Roy
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) 29-11-2011	Print Name of Training Provider: EPC Services
	Print Name of Instructor: Raymond Roy
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) 24-10-2010	Print Name of Training Provider: Aabco Propane
	Print Name of Instructor: Andy Burton
Training Date (dd-mm-yyyy) 13-01-2011	Print Name of Training Provider: Aabco Propane
	Print Name of Instructor: Andy Burton
Training Date (dd-mm-yyyy) 04-06-2011	Print Name of Training Provider: Aabco Propane
	Print Name of Instructor: Andy Burton

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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) 20 - 01 - 2012	Print Name of Training Provider: Emergency Response Plan
	Print Name of Instructor: Davinder Agimal
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) 20 - 01 - 2012	Print Name of Training Provider: Emergency Response Plan
	Print Name of Instructor: Davinder Agimal
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) 10 - 11 - 2013	Print Name of Training Provider: Aabco Propane Inc.
	Print Name of Instructor: Andy Burton
Target Date (dd-mm-yyyy) 10 - 01 - 2014	Print Name of Training Provider: Aabco Propane
	Print Name of Instructor: Andy Burton
Target Date (dd-mm-yyyy) 10 - 06 - 2014	Print Name of Training Provider: Aabco Propane
	Print Name of Instructor: Andy Burton

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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 person on duty as staff will make the necessary verbal command to all persons on the premises that they must leave and proceed to the safest place.

There will be a call made to (911) if it is deemed to be safe at the time. The notification will be accomplished thru Incident Command and or the local Fire Departments or Police.

There will be (HAND HELD AIR HORNS) strategically placed throughout the facility to notify others of immediate danger and emergency. (page 16)

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 person (manager) or staff in charge will deactivate the fuel pumps by means of emergency buttons located at the employee counter.

The person (manager) or staff in charge will make the necessary decision. There has been a meeting place designated and assigned in the event of a propane or gas incident and all employees are made aware of this area in the Emergency Response Training given. This area is identified on (page 9)

The person (manager) or staff in charge will activate the EMERGENCY BUTTON located under the counter to notify police.

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 person (manager) or staff in charge will activate the EMERGENCY BUTTON located under the counter to notify police.

There will be a call made to (911) if it is deemed to be safe at the time.

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

This operator is now considering the installation of an approved (FIREFIGHTERS KEY BOX) to be installed and located at the front door location.

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

This will be accomplished by the training and identification of a EMERGENCY RESPONSE LIAISON that will be available to the incident Command during the time of the incident.

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

The facility liaison can be on scene in (10) minutes or less.

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

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

6. Building and Site Security and Procedures

	Yes	No
1. Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Is there adequate night lighting at the site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Are there procedures that capture and record the daily inspection of hoses and inspection requirements for filling systems and mechanical devices used in the transfer of propane?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Are weighing systems validated for accuracy?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Is the schedule of maintenance and testing activities retained on site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

7. Water Supply

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

	Yes	No
1. Is a pressurized water system available at the propane facility site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)	<u>38.9 meters</u>	
4. What is the unobstructed distance to the closest approved water supply with year round access if there are no hydrants? (distance in metres only)	<u>None</u>	

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

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

8. Licence holder and local Fire Services Review

To be completed by the Local Fire Services

Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan?

Yes

No

If not, please explain (e.g., no fire services).

Fire services comments, if any:

To be completed by the Licence Holder


In response to the above comments, the following action(s) is required:

The licence holder will respond to the Local Fire Services comments by: _____


(dd-mm-yyyy)

LOCAL FIRE SERVICES

The undersigned has reviewed Section B of the Risk and Safety Management Plan Fire Services.

Local Fire Services Name Print name <i>Don Williamson</i>	Signature 	Date (dd-mm-yyyy) 25-09-2011
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SECTION C: SUBMISSIONS

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

Facility Site Plan.

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

1. The storage location of fixed, portable, and mobile vessels.
2. The maximum volume, types and storage location of hazardous materials.
3. Location of permanent structures on site.
4. Access and egress points and location of barriers.
5. Location of fire and emergency equipment (e.g., sprinkler systems, extinguishers, suppression systems) on site and location of fire hydrant or water supply where available.
6. Location of emergency shut off/shut down switches/valves.

Map of Surrounding Area.

The licence holder will submit a scaled aerial map of the surrounding area showing the following information:

7. The capacity and placement of the single largest propane storage vessel, including its setback from the front, rear and side property lines.
8. GPS co-ordinates of the single largest vessel.
9. Visual indication of the single largest fixed vessel and a circle made using the distance in Table 1 as the radius from the single largest fixed vessel.
10. Clear indication of the municipality or municipalities present within the circle.
11. Visual indication of property line information.
12. The location and name of roads within or abutting the site.
13. Key note to the drawing indicating the facility's municipal address, municipal lot number(s) and concession lines as applicable, and the date the map was prepared.
14. Address and contact information for each municipality (municipal clerk or secretary-treasurers of planning board). (Refer to page 5.)
15. Complete "Required Mapping Information from Updated Site Plan" in table below .

Required Mapping Information from Updated Site Plan

Date Map Prepared (dd-mm-yyyy) 15 - 07 - 2011	Capacity of single largest propane storagevessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 32.8 meters	Right side property line: 5 meters
Rear: 42.8 meters	Left side property line: 56.2 meters
GPS coordinates of single largest vessel: -82° 50' 45.58" W 42° 16' 46.21"N	

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SECTION C: SUBMISSIONS (cont'd)

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

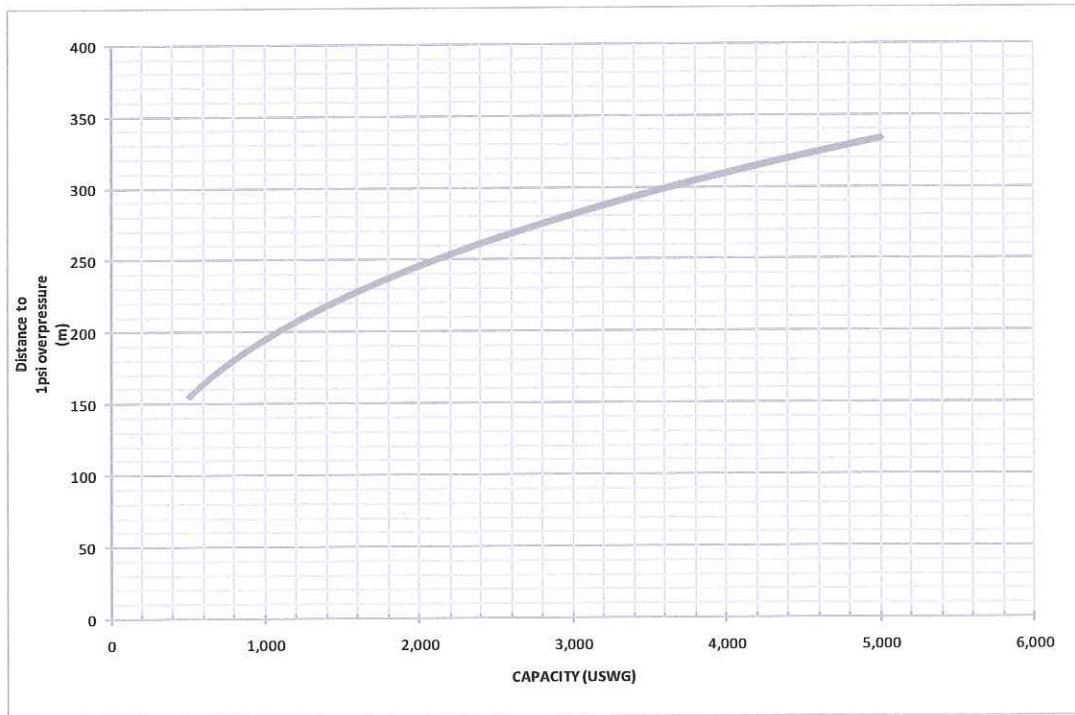
Table 1: Distance Table

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

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

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

Hazard Distance Chart (EPA-TNT model)





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SECTION C: SUBMISSIONS (cont'd)

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

As an accompaniment to the Map of Surrounding Area, provide the following information about buildings and features present within the circle in Table 2.

Table 2: Buildings and Features

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: <u>Gauthier Roofing & Siding</u> Address: <u>266 Country Road 42</u> City: <u>Lakeshore</u> Province <u>Ontario</u> Postal Code <u>N8N 2L9</u>		X			<u>46.1</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted]				X	<u>82.9</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> 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				<u>0</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ 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) <u>Ranjit Agimal</u>	Official Title <u>Vice-President</u>
Signature <u>Ranjit Agimal</u>	Telephone No. <u>519-727-3500</u>
	Date (dd-mm-yyyy) <u>20-08-2011</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

WORKSHEET

Portable Storage Additional Information Worksheet

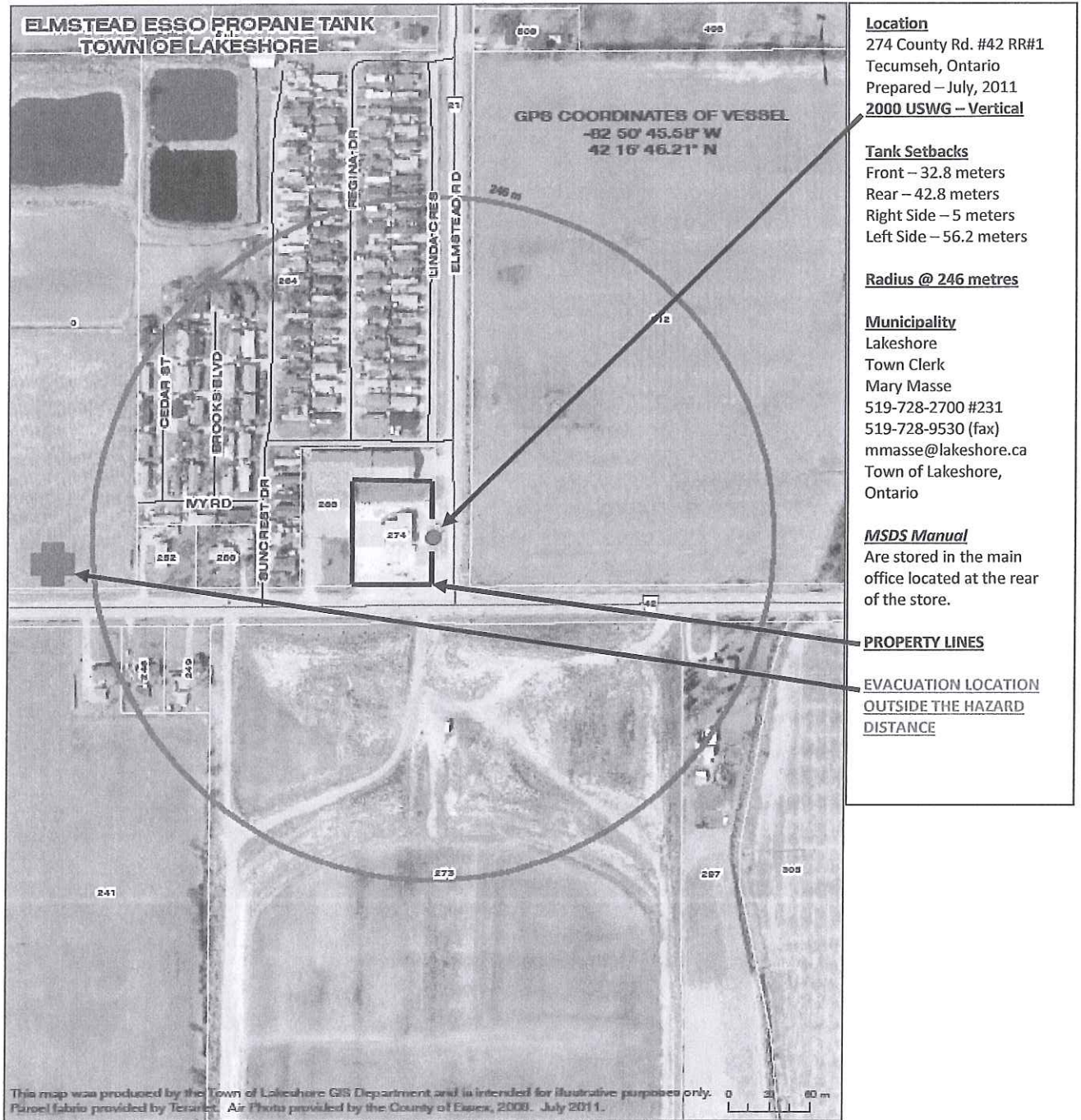
Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	0	
# 100	29.5	0	
# 40	11.75	0	
# 33.3	9.62	0	
# 30	8.8	0	
# 20	5.8	8	46.4
# 10	2.9	0	
# 5	1.5	0	
Total Cylinder Capacity			

Tanks Stored On-site Not Connected for Use









Tank Size In USWG	Quantity	Total Volume in USWG
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
	0	
Total Tank Capacity		

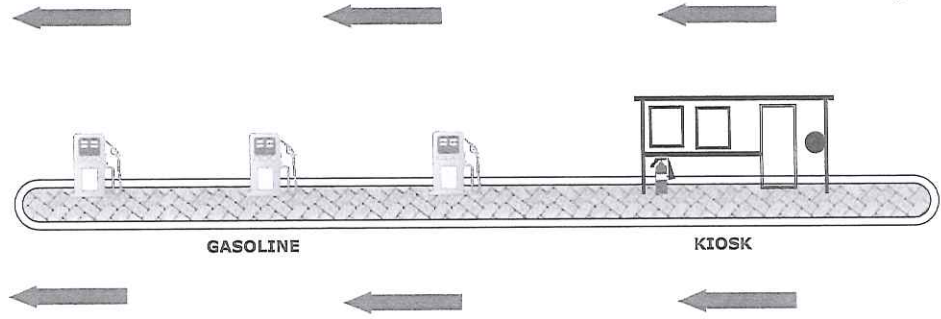
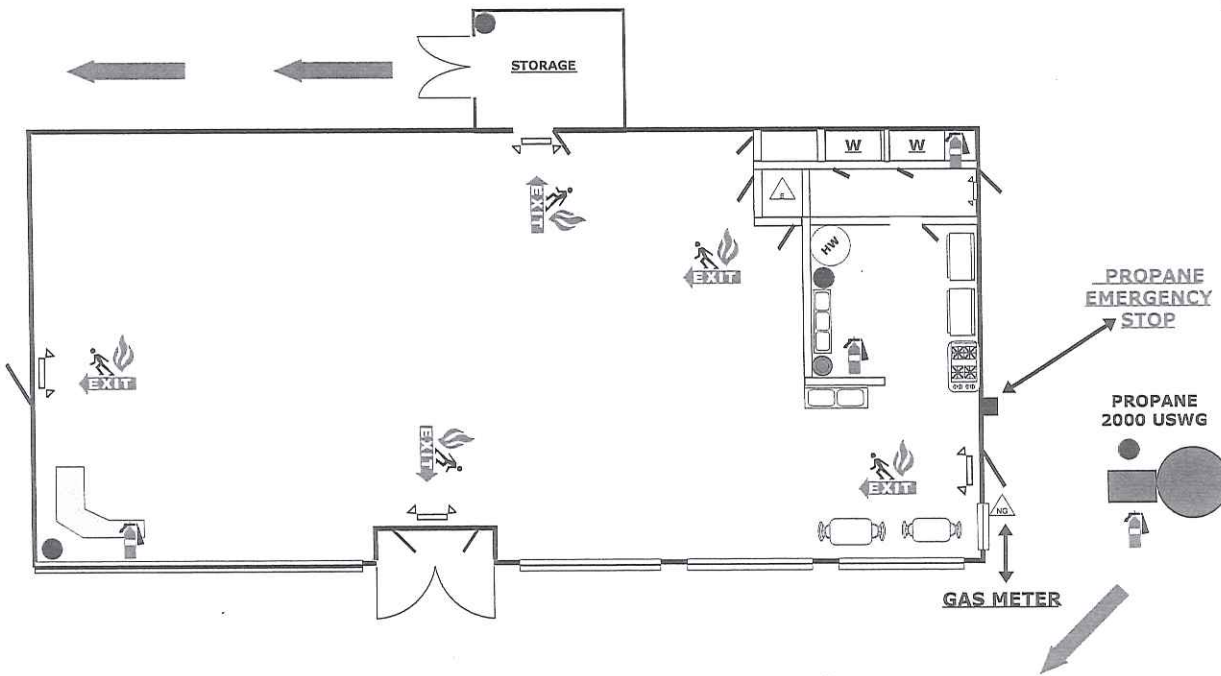
Total Cylinder Capacity	8 to 10 - #20 tanks
Total Tank Capacity	58 USWG
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	0

2.0 HAZARD DISTANCE IDENTIFIED



LEGEND

-  PROPANE TANK
2000 USWG
-  FIRE EXTINGUISHER
(PORTABLE)
-  EMERGENCY EXIT
-  AIR HORN
(EMERGENCY)
-  EXITS SIGNS
BATTERY BACKUP
-  (WET) KITCHEN
EXTINGUISHER
SYSTEM
-  EVACUATION
ROUTES
-  EMERGENCY STOP
PROPANE



ELMSTEAD ROAD

COUNTY RD. #42