	345 Carling Toronto, O Tel: 416.7 Fax: 416.7 Customer propanelic www.tssa.0	231.4078 Service: 1.877.682.8772 ensing@tssa.org org 1 RSMP applies to: a fa a a fa	cility with a total propane st	Te Prop torage capacity of 5,000 USW storage capacity of exactly 5,	<b>Afety Management Plan (RSMP)</b> <b>echnical Standards and Safety Act</b> ane Storage and Handling Regulation WG or less; or 000 USWG and no more than 500		
	Making a	to fully complete this form a false statement may resul	t in a fine or prosecution				
Checl	nce Number	ane operations.	] Filling Plant 🗌 Ca	rd/Keylock J Area.			
		SEC	TION A: GENERA	L INFORMATION			
		d Handling Regulatio		nder Ontario's <i>Technica</i>	Corporation No. 2546530		
	o/a Petro Canada Ga	as Bar					
<u>.</u>	Telephone No. 519-941-4339	Fax No. 519-941-4339	E-mail dave.kandola@gmail.com	1			
В	Street No.	Street Name / 911 Number / A Broadway West	ddress, if applicable				
	Town / City or Townshi Orangeville	p / County		Province Ontario	Postal Code L9W 2Y9		
С	Mailing address if o Street No. 336	different from above. Street Name / 911 Number / A Broadway West	Address, if applicable				
	Town / City or Township Orangeville	) / County		Province Ontario	Postal Code L9W 2Y9		
ln	formation on Conta Location of facility. Street No.	ainer Refill Centre or Fil Street Name / 911 Number / A	173 16.33 xml (m. 900				
D	336	Broadway West	duress, ii applicable	Broadway Ave., We			
	Town / City or Township			Province Ontario	Postal Code		
	Orangeville       Ontario       Develop         Name of Licence Holder       Dave Kandola       ROT type         Dave Kandola       Municipality (or municipalities if the facility or its hazard distance touches multiple borders)       Town of Orangeville         Hours of operation.       Image: Content of the facility of the facility or its hazard distance touches multiple borders)       Image: Content of the facility of						

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	+ Syl-L & Co Sid Katol	Date (dd-mmm-yyyy)			
Name of Licence Holder Dave Kandola	+ SU/LACOSID FEATO	26-05-2017			
Name of Senior Management person as defined in the	+ Sul-Like Say Kindde	26-05-2017			
Regulation holding the Record of Training Dave Kandola	* 34-1400				



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

Indicate the yea	ar the facility was established.	Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. No Significant Changes have been made	
Identify the psig	rating and serial number for eac	h fixed propane storage tank on site.	
	PSIG	Serial Number	
Tank 1:	250 psig	5.563353	
Tank2:			
Tank3:			
Enter capacity of	of propane in USWG, fixed, porta	able, 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: 168.5 USWG

Mobile: N/A

Name of person completing this form (please print)	Official Title	Official Title		
Dave Kandola	Owner			
Signature	Telephone No.	Date (dd-mmm-yyyy)		
Suffice sight Renyal	519-941-4339	26-05-2017		



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

Activity Information

Name of Propa	ne Suppli	er(s)				For Office Use -	Party No.
Superior Propane							
Street No.	Street N	ame / 911 Number / Ad	dress, if applicable				
6750	Century /	Ave Suite 400					
Town / City or T Guelph	ownship /	Country			Province Ontario		Postal Code L5N 2V8
Telephone No.		Fax No.	Contact N	lame			•
613-391-9604		613-822-5221	Ken Gillis -	Regulatory & Technical Sup	port Rep		
E-mail GillisK@SuperiorF	propane.co	m	A				
Name of Propar Trimac Transport		orter. If same as abo		юх.		For Office Use -	Party No.
Street No. Trimac Transport	Street N 5th Aven	lame / 911 Number / Adue SW	dress, if applicable				
Town / City or T Calgary	ownship /	Country			Province Alberta		Postal Code 5th Avenue SW
Telephone No. 403.298.5100		Fax No. 403.298.5146	Contact N Dale Eaid	lame			
E-mail N/A							
Off-site Cylinde	r and/or l	Mobile Storage		Capacity stored off-site	, in USWG	For Office Use -	Party No.
N/A							
Street No.	Street N	ame / 911 Number / Ad	dress, 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.

Name of person completing this form (please print) Dave Kandola	Official Title Owner		
Signature Sullided Sull Kandoh	Telephone No.	Date (dd-mmm-yyyy)	
VILLE VILLE, INV	519-941-4339	26-05-2017	



## 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. Facility is an operating gas station and has underground fuel storage tanks with gasoline & diesel. There are some automotive materials inside the C-Store

such as window washing fluid and oil but these are not considered hazardous.

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

The site is equipped with fire extinguishers at the propane station and at the fuel dispensers. There are also some fire extinguishers inside the C-Store for

use by the staff. There is an emergency shutdown for the propane station that when depressed will interrupt the power to the propane operation and stop the pump and dispenser from operating.

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.

The tank is equipped with a ISC valve that is connected to a chain equipped with a fusible link that will melt in the event of a fire at 212 F. This will insure the

spring loaded valve will close automatically to stop propane from reaching the leak. There is an electric solenoid valve on the piping to the auto propane .

dispenser so in the event of hitting the Emergency Shutdown Button (ESD) this will stop flow from the tank in case of a hose leak.

Maintenance and testing schedule for fire protection controls and devices.

The fire extinguishers are tested routinely and tagged by an outside company certified to carry out this work. Company name is Georgian Bay Fire & Safety

Name of person completing this form (please print) Dave Kandola	Official Title Owner	
Signature Sylchdes Sight Kandol,	Telephone No. 519-941-4339	Date (dd-mmm-yyyy) 26-05-2017



SECTION	I B: EMEI		EPAREDNESS RESPO Emergency Response	DNSE PLAN (co	ont'd)
(			(		
1. Facility Contact Personnel -	<ul> <li>Key Contact</li> </ul>	- market and the second s	5. Facility 24-Hour Contac	t Person	
Name Dave Kandola		For Office Use - Party No.	Name Dave Kandola		For Office Use - Party No.
Official Title Owner			Official Title Owner		
Telephone No. 519-941-4339	Fax No. 519-941-	4339	Cell No. 416-417-5541	Fax No. 519-941-433	39
E-mail dave.kandola@gmail.com			E-mail dave.kandola@gmail.com		
Role and responsibilities in emer	gency		Role and responsibilities in e	emergency	
To insure all employees are traine	d in the Emerge	ency Plan annually and to	Operates the site and makes s	sure equipment is in pl	ace for Emergency
make sure all equipment is mainta	ined and opera	tional	Procedures and also calls 9-1-	-1 in emergencies.	
2. Facility Contact Personnel	- Alternate C	ontact	6. Name of Facility Manage	ər	
Name Bobby Mahal		For Office Use - Party No.	Name Bobby Mahal		For Office Use - Party No.
Official Title Manager			Official Title Manager		
Telephone No. 519-941-4339	Fax No. 519-941	-4339	Telephone No. 519-941-4339	Fax No. 519-941-433	39
E-mail balbirmahal@hotmail.com			E-mail balbirmahal@hotmail.com		
Role and responsibilities in emer	gency		Role and responsibilities in emergency		
To insure people leave the premise	es and custome	ers leave the site. Shuts	Same as Item 2		
down the propane system					
3. Local Fire Services - Key C	ontact		7. Propane Supplier Key Co	ontact Person	
Name Frank Myers		For Office Use - Party No.	Name Steven Wells		For Office Use - Party No.
Official Title Chief Fire Prevention Officer	E-mail fmyers@	orangeville.ca	Official Title Territory Account Manager	E-mail Steven_We	lls@SuperiorPropane.com
Telephone No. 1-519-941-3083 Ext 6524	Fax No. 1-519-94		Telephone No. 226-821-3641	Fax No. -722-4762	
Role and responsibilities in emer Reviews RSMP's and also provides i Fire Code and that equipment is inst	inspections to ins		Role and responsibilities in emergency Co-ordinates the deliveries to the site and also can arrange for equipment such as trucks to go to site and iniates the Emergency Plan for the CPA		
Fire Services Address			Propane Supplier Address		
10 Dawson Road, Orangeville, ON. I	_9W 2W9		7022 Wellington Guelph, ON. L4M 9A5		
4. Local Fire Services - Alterna	ate Contact		8. Municipal Contact		
Name Andy Macintosh		For Office Use - Party No.	Name Cheryl Johns		For Office Use - Party No
Official Title Fire Chief	E-mail bamacint	cosh@orangeville.ca	Official Title City Clerk		
Telephone No. 1-519-941-3083 Ext: 6522	Fax No. 1-519-94	1-5994	Telephone No.         Fax No.           1-519-941-0440         Ext: 2242         1-519-941-9033		
Role and responsibilities in emer May not review RSMP's for this area	but insures reso		E-mail cjohns@orangeville.ca		
fire services & reports to Town Coun	cil on Fire Servic	es issues			
Fire Services Address 10 Dawson Road, Orangeville, ON	1 1 014/ 214/0		Municipality Name and Addre		
TU Dawson Koad, Orandeville, ON	V LAVV ZVVA		Town of Orangeville, 87 Broadway, Orangeville, ON, L9W 1K0		

Name of person completing this form (please print)	Official Title		
Dave Kandola	Owner		
Signature	Telephone No.	Date (dd-mmm-yyyy)	
Sulchile Sist Kandoli	519-941-4339	26-05-2017	

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	100	$\epsilon$
	ss	STANST

## 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. The facility is built to the Propane Code requirements and does not have any extra features that are over and above the Code. Tank is protected with vehicle protection on all sides and has a lockable equipment and valve cabinet that is locked and secured after closing. Solenoid valve on piping from the pump will shut-off the flow of propane to the Auto Dispenser and Cylinder Scale as well as interrupting power.

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

Name of person completing this form (please print)	Official Title Owner		
Dave Kandola			
Signature Sulphaker Sigl Fandoli	Telephone No. 519-941-4339	Date (dd-mmm-yyyy) 26-05-2017	

FS 09195 (01/17) Page 6 of 15



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

3. Record of Emergency Training Provided - For most recent 12-month period.

Training Date (dd-mmm-yyyy)	Print Name of Training Provider: Superior Propane	
20-03-2017	Print Name of Instructor:	
Fraining Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
Training on the facility's Eme	ergency Management Procedures provided to staff.	
Training Date (dd-mmm-yyyy)	Print Name of Training Provider: Superior Propane	
20-03-2017	Print Name of Instructor:	
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
On-site specific training prov	vided to certificate holders / persons with Records of Training.	
Training Date (dd-mmm-yyyy)	Print Name of Training Provider: Fuel Safety Network (FSN).	
06-03-2017	Print Name of Instructor: Joe Baldwin (P.T.I. Trainer # E1649)	
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	

Name of person completing this form (please print)	Official Title	
Dave Kandola	Owner	
Signature CILIAN Sout F L	Telephone No.	Date (dd-mmm-yyyy)
Signature Sul-holed Sinsh Kan toll	519-941-4339	26-05-2017



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

4. Emergency Training Plan for Coming Year

Target Date (dd-mmm-yyyy)	Print Name of Training Provider: Petro-Canada Orangeville	
30-03-2017	Print Name of Instructor: David Kandola	
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
Training on the facility's Em	ergency Management Procedures provided to staff.	
Target Date (dd-mmm-yyyy)	Print Name of Training Provider: Petro-Canada Orangeville	
30-03-2017	Print Name of Instructor: David Kandola	
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
On-site specific training pro	ovided to certificate holders / persons with Records of Training.	
Target Date (dd-mmm-yyyy)	Print Name of Training Provider: Fuels Safety Network (FSN)	
06-03-2017	Print Name of Instructor: Joe Baldwin	
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:	
	Print Name of Instructor:	

Name of person completing this form (please print)	Official Title	
Dave Kandola	Owner	
Signature Child Child	Telephone No.	Date (dd-mmm-yyyy)
Sullder Snj L Ferdoln	519-941-4339	26-05-2017



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 Attendant will give a verbal warning to the customers outside and instruct them to leave the premises. The Attendant will also call

9-1-1 to ask for help and explain the nature of the problem. This call will be made once the nature of the emergency is determined. Only a person with fire extinguisher training is permitted to attempt to put the fire out. Otherwise a call to 9-1-1 must be made.

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).

Once the warning is given the Attendant will ask the customers to leave and then contact the Manager about the problem situation.

Attendant will place cones across the entrance/exits to stop vehicles from entering the site and then will go to the Emergency Meeting Place (See

Drawing P-101). A call will also be made to the Owner after the 9-1-1 call has been made.

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 Attendant will determine what the emergency is and if a call to 9-1-1 is required. There is a phone inside the C-Store or a cell phone can be used to

make the call. The Attendant will call or the Owner will call to explain the nature of the problem. If Owner is not on site a call will be made to ask him to come

to the site.

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

The tank is located at the front of the property and access is not restricted. The facility is not fenced so there is no problem for the Fire Department

to gain access to the site at all times. If the Fire Department requires access to the site, it is always open since it is right off of Broadway and close to

the street so there are no restrictions to Emergency Vehicles entering the site. Bolt cutters can be used to open the cabinet if required.

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

The Attendant or Manager will always be on site during working hours and can provide information about the tank contents and cylinder

contents to the Emergency Responders when asked. After hours the Owner can get to the site and engage with the Emergency Responders

How long will it take the facility liaison person to respond to the site. 40 to 45 minutes

Name of person completing this form (please print) Dave Kandola	Official Title Owner	
Signature Syllder Signature Syllder Signature	Telephone No. 519-941-4339	Date (dd-mmm-yyyy) 26-05-2017



	SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd) The licence holder will complete Section B in consultation with the local Fire Services. 6. Building and Site Security and Procedures				
		Yes	No		
1.	Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)?	$\checkmark$			
2.	Is there adequate night lighting at the site?	$\checkmark$			
3.	Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials?	$\checkmark$			
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?	$\checkmark$			
5.	Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?	$\checkmark$			
6.	Are weighing systems validated for accuracy?	$\checkmark$			
7.	Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?		1		
8.	Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves)	$\checkmark$			
9.	Is the schedule of maintenance and testing activities retained on site?	$\checkmark$			

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.

1.	Is a pressurized	water system	available at the	propane	facility site?
----	------------------	--------------	------------------	---------	----------------

- Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?
- 3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)
- 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)

Yes	No
$\checkmark$	
✓	
14 m	
N/A	

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) Dave Kandola	Official Title Owner	
Signature Sylldes Signa / Gandola	Telephone No. 519-941-4339	Date (dd-mmm-yyyy) 26-05-2017

FS 09195 (01/17) Page 10 of 15



www.tssa.org	State of the state of the state		
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			
<b>To be completed by the Local Fire Services</b> 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:	mmm-yyyy)		

LOCAL FI	RE SERVICES	
The undersigned has reviewed Section B of the Risk and Safety Management Plan Fire Services.		
Print name	Signature	Date (dd-mmm-yyyy)
Local Fire Services Name Frank Myers, Chief Fire Prevention Officer		30-05-2017

Name of person completing this form (please print)	Official Title			
Dave Kandola	Owner			
Signature Sylch des Single Kandoly	Telephone No. 519-941-4339	Date (dd-mmm-yyyy) 26-05-2017		



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

## SECTION C: SUBMISSIONS

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

#### Facility Site Plan.

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

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

#### Map of Surrounding Area.

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

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

#### Required Mapping Information from Updated Site Plan

Date map prepared (dd-mmm-yyyy) 12-08-2011		Capacity of single largest propane storage vessel (USWG) 2000 USWG		
Tank setback coordinates. Front:		nt on the map. Right side property line:	13.2 m	
	40.1 m	Left side property line:	43.8 m	
GPS coordinates of single	largest vessel:	Lat42°58'41.52"NLong81°19'16.79"W		

Name of person completing this form (please print) Dave Kandola	Official Title Owner	
Signature Sykholes Singh Kandoh	Telephone No. 519-941-4339	Date (dd-mmm-yyyy) 26-05-2017



# 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: $D = 16.94 \times (1.524 \times C)^{1/3}$

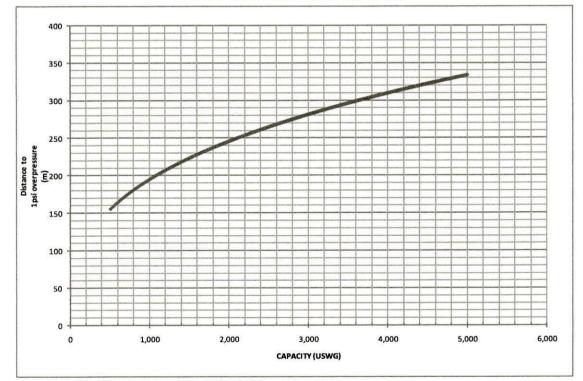
D = Distance to overpressure of 1 psi (meters) C= Tank Total Capacity in USWG

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)





## SECTION C: SUBMISSIONS (cont'd)

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

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

Table 2: Buildings and Features

	Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature			* Number of Buildings and Features (mark with an "X")		
	And hame and Address of Olosest Building of Feature	0	1	2-10	11+	Feature
Name:	buildings or parks or golf courses	x				m
City.						
Resident	ial building units specifically permanent single family dwellings, condominiums, and apartments.				x	71.5 m
Commer Name: Address City:	cial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes.         The Green Apple Cafe         475 Broadway West         Orangeville       Province         Ontario       Postal Code		x			194.5 m
Name:	cial building units – continuous occupancy specifically hotels, campgrounds, and resorts.	x				m
institution Name:	institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health ns, and prisons. Canadian Reformed Church 55 C-Line Orangeville Province Ontario Postal Code L9W 2Y9		×			<u>166</u> m
Name:	cy responders specifically fire stations, ambulance stations, and police stations.	x				m

\* For multi-unit buildings, count each unit as "1".

Name of person completing this form (please print)	Official Title		
Dave Kandola	Owner		
Signature Sula Like Sing L Kaudoli	Telephone No. 519-941-4339	Date (dd-mmm-yyyy) 26-05-2017	



# WORKSHEET

#### Portable Storage Additional Information Worksheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5		
# 40	11.75	2	23.5 USWG
# 33.3	9.62		
# 30	8.8		
# 20	5.8	25	145 USWG
# 10	2.9		
#5	1.5		

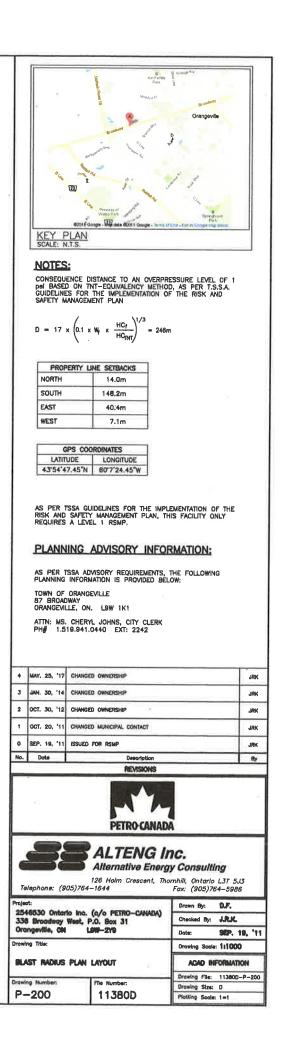
#### Tanks Stored On-site Not Connected for Use

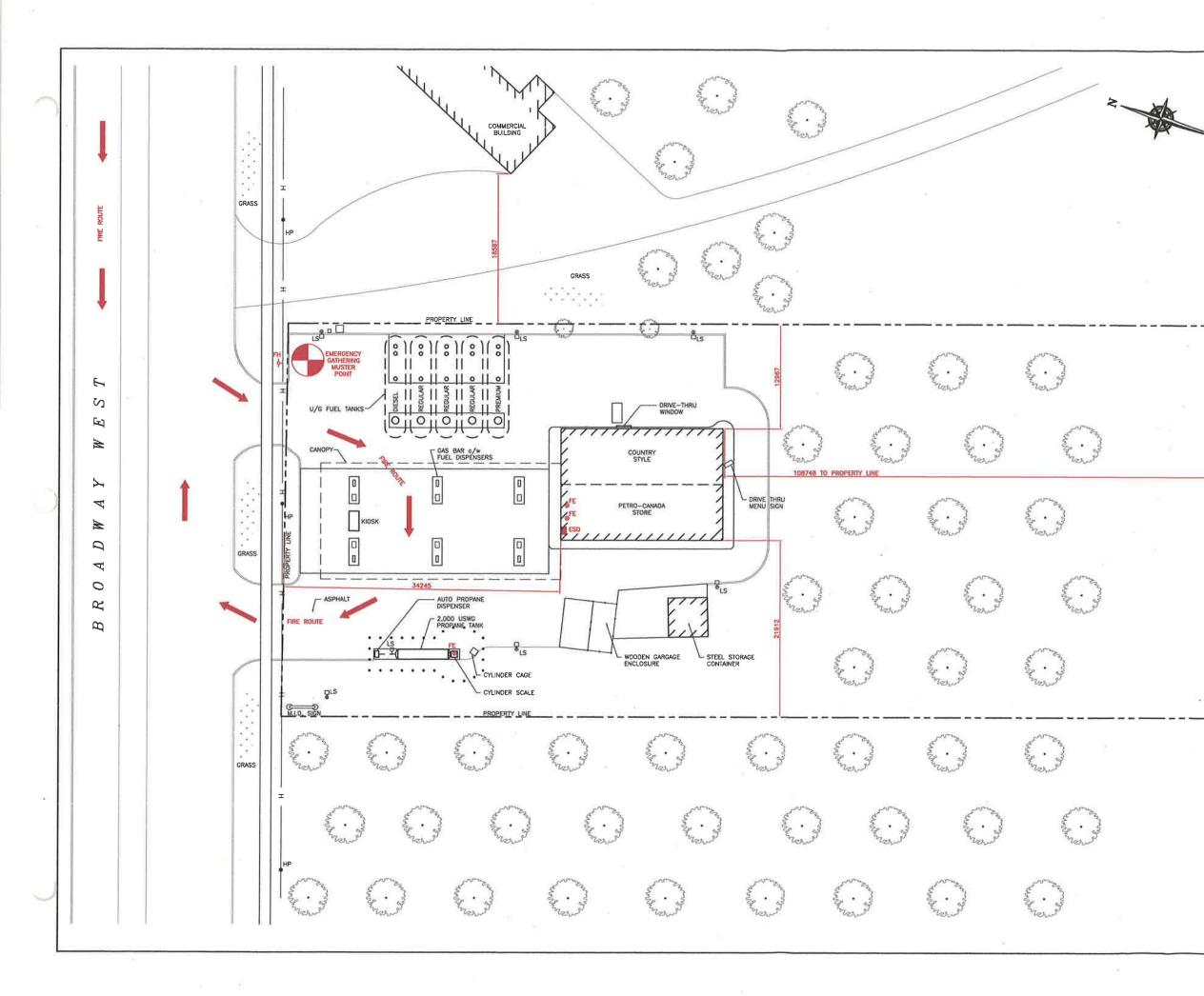
Tank Size In USWG	Quantity	Total Volume in USWG

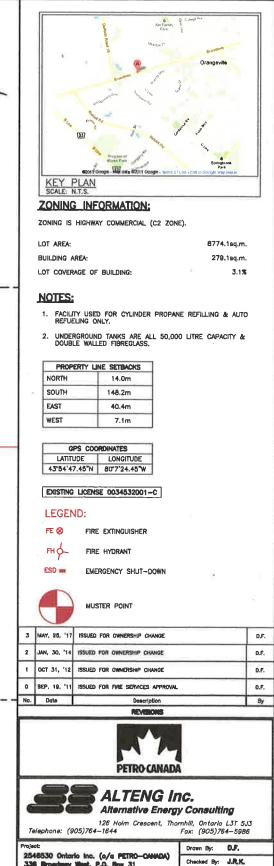
**Total Tank Capacity** 

Total Cylinder Capacity	168,5 USWG
Total Tank Capacity	
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	168.5 USWG









2546530 Ontario Inc. (6/6 PETRO-CANNER) 336 Broadway West, P.O. Box 31 Orangeville, OH LBW-2Y9		Checked By: J.R.K.			
		Dote: SEP. 19, '11			
Drawing Title:	Drawing Scale: 1:200				
SITE PLAN & EMERGENCY PLAN FOR 2,000 USING PROPANE TANK		ADAD INFORMATION			
	_	Drawing File: 113800-P-101			
Drawing Number: File Number:		Drawing Size: D			
P-101	11380D	Plotting Scale: 1=1			