



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X 2X4
Fax: 416.231.4078
Customer Service: 1.877.682.8772

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

JUL 24 2015

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 000252069

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 R & J Johnson Retail Ltd. Corporation No. 1935024

Operator Name (if different from above) Canadian Tire Associate Store #079

Telephone No. 613-735-0000 Fax No. 613-735-7770 E-mail rick.johnson@thetire.ca

B Street No. 1104 Street Name / 911 Number / Address, if applicable Pembroke Street E

Town / City or Township / County Pembroke Province Ontario Postal Code K8A 8S2

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. 1104 Street Name / 911 Number / Address, if applicable Pembroke Street E Nearest Major Intersection Pembroke Mall

Town / City or Township / County Pembroke Province Ontario Postal Code K8A 8S2

Name of Licence Holder R & J Johnson Retail Ltd.

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT) John Birch ROT type 100-08 Filling Propane Cylinders

Municipality (or municipalities if the facility or its hazard distance touches multiple borders) Pembroke, Township of Laurentian Valley

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	Signature	Date (dd-mmm-yyyy)
Name of Licence Holder <u>Richard Johnson</u>		<u>15-Jul-2015</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>John Birch</u>		<u>15-Jul-2015</u>



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established. 2004 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.

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

	PSIG	Serial Number
Tank 1:	<u>250</u>	<u>1023-1</u>
Tank 2:	_____	_____
Tank 3:	_____	_____

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: n/a Mobile: n/a

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Name of person completing this form (please print) <u>Richard Johnson</u>	Official Title <u>President</u>	
Signature 	Telephone No. <u>226-378-8473</u>	Date (dd-mmm-yyyy) <u>15-Jul-2015</u>



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

Name of Propane Supplier(s) Superior Propane - Ontario Regional Operations Centre		For Office Use - Party No.	
Street No. 251	Street Name / 911 Number / Address, if applicable Woodlawn Rd. W., Unit 217		
Town / City or Township / Country Guelph		Province Ontario	Postal Code N1H 8J1
Telephone No. 1-877-873-7467	Fax No. 519-836-7766	Contact Name Mike Mullins	
E-mail mullinsm@superiorpropane.com			

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>		For Office Use - Party No.	
Superior Propane - 5022 - Pembroke			
Street No. 361	Street Name / 911 Number / Address, if applicable Boundary Road E		
Town / City or Township / Country Pembroke		Province Ontario	Postal Code K8A 6W5
Telephone No. 613-314-8003	Fax No.	Contact Name Heather Ross	
E-mail rosshe@superiorpropane.com			

Off-site Cylinder 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 Name	

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

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SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN

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

Description of the maximum volume, types and storage location of other hazardous materials on site, if any.

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

Fire Extinguisher is attached to the propane dispensing station

Fire hydrant 35 Meters from 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.

1. Fusible link on ISC valve - isolation valve between the tank and the down stream propane dispensing equipment
2. Emergency stop push button mounted in service bay area. Shuts down all electricity to propane equipment cabinet.
3. ISC cable attached to valve regulator handle.

Maintenance and testing schedule for fire protection controls and devices.

1. Pump visual inspection daily. Superior Propane inspects annually.
2. ISC valve is checked daily when valve regulator handle is operated.
3. Storage tank relief valves - inspected every 2 years; replace schedule as per provincial regulations.

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Intake Group
NOV 26 2015
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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

1. Facility Contact Personnel - Key Contact		5. Facility 24-Hour Contact Person	
Name Richard Johnson		Name Richard Johnson	
For Office Use - Party No.		For Office Use - Party No.	
Official Title President/Dealer		Official Title President/Dealer	
Telephone No. 613-735-0000	Fax No. 613-735-7770	Cell No. 226-374-6111	Fax No. 519-735-7770
E-mail rick.johnson@thetire.ca		E-mail rick.johnson@thetire.ca	
Role and responsibilities in emergency Co-ordinate site response		Role and responsibilities in emergency Co-ordinate site response	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name John Birch		Name Richard Johnson	
For Office Use - Party No.		For Office Use - Party No.	
Official Title General Manager		Official Title President/Dealer	
Telephone No. 613-735-0000	Fax No. 613-735-7770	Telephone No. 613-735-0000	Fax No. 613-735-7770
E-mail jbirch@on.aibn.com		E-mail rick.johnson@thetire.ca	
Role and responsibilities in emergency Co-ordinate site response if President/Dealer not available.		Role and responsibilities in emergency Co-ordinate site response	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name John Primeau		Name Superior Propane Hotline	
For Office Use - Party No.		For Office Use - Party No.	
Official Title Fire Chief	E-mail fr.township@nrtao.net	Official Title	E-mail CUSTOMER SERVICE@SUPERIORPROPANE.COM
Telephone No. 613-735-1358	Fax No. 613-735-0896	Telephone No. 1-877-873-7467	Fax No. 1-877-250-6210
Role and responsibilities in emergency Control fire		Role and responsibilities in emergency	
Fire Services Address 620 Lorne East, Pembroke ON K8A 6T5		Propane Supplier Address 361 Boundary Rd. Pembroke, ON K9A 6X7	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Marv Pigeon		Name JACK WILSON STEVE BENNETT	
For Office Use - Party No.		For Office Use - Party No.	
Official Title Captain	E-mail fr.township@nrtao.net	Official Title Mayor	
Telephone No. 613-735-3691	Fax No. 613-735-0896	Telephone No. 613-732-0201 613-735-6580	Fax No. 613-735-5942
Role and responsibilities in emergency Control fire		E-mail S BENNETT@LAURVALL.ON.CA	
Fire Services Address 620 Lorne East, Pembroke ON K8A 6T5		Municipality Name and Address Township of Laurentian Valley	

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Name of person completing this form (please print) Richard Johnson		Official Title President	
Signature 		Telephone No. 226-378-8473	Date (dd-mmm-yyyy) 15-Jul-2015



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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact

Name <u>Richard Johnson</u>	For Office Use - Party No.
Official Title <u>President/Dealer</u>	
Telephone No. <u>613-735-0000</u>	Fax No. <u>613-735-7770</u>
E-mail <u>rick.johnson@thetire.ca</u>	
Role and responsibilities in emergency <u>Co-ordinate site response</u>	

5. Facility 24-Hour Contact Person

Name <u>Richard Johnson</u>	For Office Use - Party No.
Official Title <u>President/Dealer</u>	
Cell No. <u>226-374-6111</u>	Fax No. <u>519-735-7770</u>
E-mail <u>rick.johnson@thetire.ca</u>	
Role and responsibilities in emergency <u>Co-ordinate site response</u>	

2. Facility Contact Personnel - Alternate Contact

Name <u>John Birch</u>	For Office Use - Party No.
Official Title <u>General Manager</u>	
Telephone No. <u>613-735-0000</u>	Fax No. <u>613-735-7770</u>
E-mail <u>jbirch@on.aibn.com</u>	
Role and responsibilities in emergency <u>Co-ordinate site response if President/Dealer not available.</u>	

6. Name of Facility Manager

Name <u>Richard Johnson</u>	For Office Use - Party No.
Official Title <u>President/Dealer</u>	
Telephone No. <u>613-735-0000</u>	Fax No. <u>613-735-7770</u>
E-mail <u>rick.johnson@thetire.ca</u>	
Role and responsibilities in emergency <u>Co-ordinate site response</u>	

3. Local Fire Services - Key Contact

Name <u>John Primeau</u>	For Office Use - Party No.
Official Title <u>Fire Chief</u>	E-mail
Telephone No. <u>613-735-1358</u>	Fax No.
Role and responsibilities in emergency <u>Control fire</u>	
Fire Services Address	

7. Propane Supplier Key Contact Person

Name <u>Superior Propane Hotline</u>	For Office Use - Party No.
Official Title	E-mail
Telephone No. <u>1-877-873-7467</u>	Fax No.
Role and responsibilities in emergency	
Propane Supplier Address	

4. Local Fire Services - Alternate Contact

Name <u>Marv Pigeon</u>	For Office Use - Party No.
Official Title <u>Captain</u>	E-mail
Telephone No. <u>613-735-3691</u>	Fax No.
Role and responsibilities in emergency <u>Control fire</u>	
Fire Services Address	

8. Municipal Contact

Name <u>Jack Wilson</u>	For Office Use - Party No.
Official Title <u>Mayor</u>	
Telephone No. <u>613-732-9281</u>	Fax No.
E-mail	
Municipality Name and Address <u>Township of Laurentian Valley</u>	

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Signature 	Telephone No. <u>226-378-8473</u>
	Date (dd-mmm-yyyy) <u>15-Jul-2015</u>



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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.

[Large empty area with horizontal dashed lines for writing additional safety measures.]

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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-mmm-yyyy) 10-Mar-2015	Print Name of Training Provider: Tim Sequin
	Print Name of Instructor: Tim Sequin
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:

Training on the facility's Emergency Management Procedures provided to staff.

Training Date (dd-mmm-yyyy) 11-Mar-2015	Print Name of Training Provider: Tim Sequin
	Print Name of Instructor: Tim Sequin
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 provided to certificate holders / persons with Records of Training.

Training Date (dd-mmm-yyyy) 10-Apr-2015	Print Name of Training Provider: Tim Sequin
	Print Name of Instructor: Tim Sequin
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:

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Name of person completing this form (please print) Richard Johnson	Official Title President/Dealer
Signature 	Telephone No. 226-378-8473 or 613-735-0000
	Date (dd-mmm-yyyy) 16-Jul-2015



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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-mmm-yyyy) 01-Mar-2016	Print Name of Training Provider: Tim Sequin
	Print Name of Instructor: Tim Sequin
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:

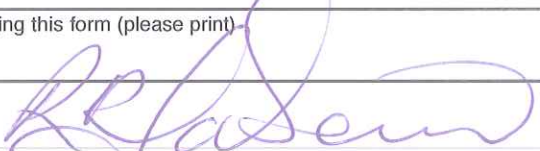
Training on the facility's Emergency Management Procedures provided to staff.

Target Date (dd-mmm-yyyy) 01-Mar-2016	Print Name of Training Provider: Tim Sequin
	Print Name of Instructor: Tim Sequin
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 provided to certificate holders / persons with Records of Training.

Target Date (dd-mmm-yyyy) 01-Mar-2016	Print Name of Training Provider: Tim Sequin
	Print Name of Instructor: Tim Sequin
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:

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Name of person completing this form (please print) Richard Johnson	Official Title President/Dealer
Signature 	Telephone No. 226-378-8473 or 613-735-0000
	Date (dd-mmm-yyyy) 16-Jul-2015



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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 ROT person(s) on duty will contact emergency service by immediately calling 911. They will have the area evacuated and if the store is affected, they will use the portable phones to contact personnel in the retail store.

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).

Action and warnings will be taken by our duty ROT person(s) on duty. If an evacuation is necessary, all staff are to meet in the parking area adjacent to the road that crosses in front of the store but more than 300 feet (92 meters) away. People exiting from the rear will proceed to the aforementioned designated area remaining at a safe distance from the store.

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).

Each day an "opening procedure" is done for the propane tank and area by an ROT person. If the system is not operational it is closed with a sign stating this.

The service manager is informed and he would place a call to Superior Propane.

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

Our propane site is in our parking lot and is very visible. It is a vertical tank and the fire department will not have any issues accessing the lot or tank.

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

Information on the gauge on the outside of the tank will be provided to the authorities by the facility key contact if it is not a safety issue for someone to be that close to the tank.

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

The GM lives 10 minutes away. The service manager lives 15 minutes away and the President/Dealer lives 20 minutes away.

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Signature 	Telephone No. 226-378-8473 or 613-735-0000	Date (dd-mmm-yyyy) 15-Jul-2015



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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 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 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>35</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>35</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.

John Proulx Local Fire Services Name	Print name John Proulx FIRE CHIEF	Signature <i>John Proulx</i>	Date (dd-mm-yyyy) June 24, 2011
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LAURENTIAN VALLEY FIRE DEPT.
620 LORNE STREET
PEMBROKE, ONTARIO K8A 6T5

I declare that 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) JOHN BIRCH	Official Title G.M.
Signature <i>John Birch</i>	Telephone No. 613-735-0000 Date (dd-mm-yyyy) 28/07/2011

To BE Submitted By Aug 4/15

Level 1 Risk and Safety Management Plan (RSMP)
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COPY OF 2810711 PLAN ATTACHED



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

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

8. Licence holder and local Fire Services Review

To be completed by the Local Fire Services Yes No

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

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-mmm-yyyy)

LOCAL FIRE 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		

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Name of person completing this form (please print)	Official Title	
Signature	Telephone No.	Date (dd-mmm-yyyy)



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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-mmm-yyyy) 09-Apr-2002	Capacity of single largest propane storage vessel (USWG) 2000
Tank setback coordinates. Indicate placement on the map.	
Front: 48 meters	Right side property line: 126 meters
Rear: 111 meters	Left side property line: 5 meters
GPS coordinates of single largest vessel: 43.264893,-79.945963	

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) Richard Johnson	Official Title President/Dealer
Signature 	Telephone No. 226-374-6111 or 613-735-0000
	Date (dd-mmm-yyyy) 15-Jul-2015



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SECTION C: SUBMISSIONS (cont'd)
Applicant must include a Facility Site Plan and Map of Surrounding Area

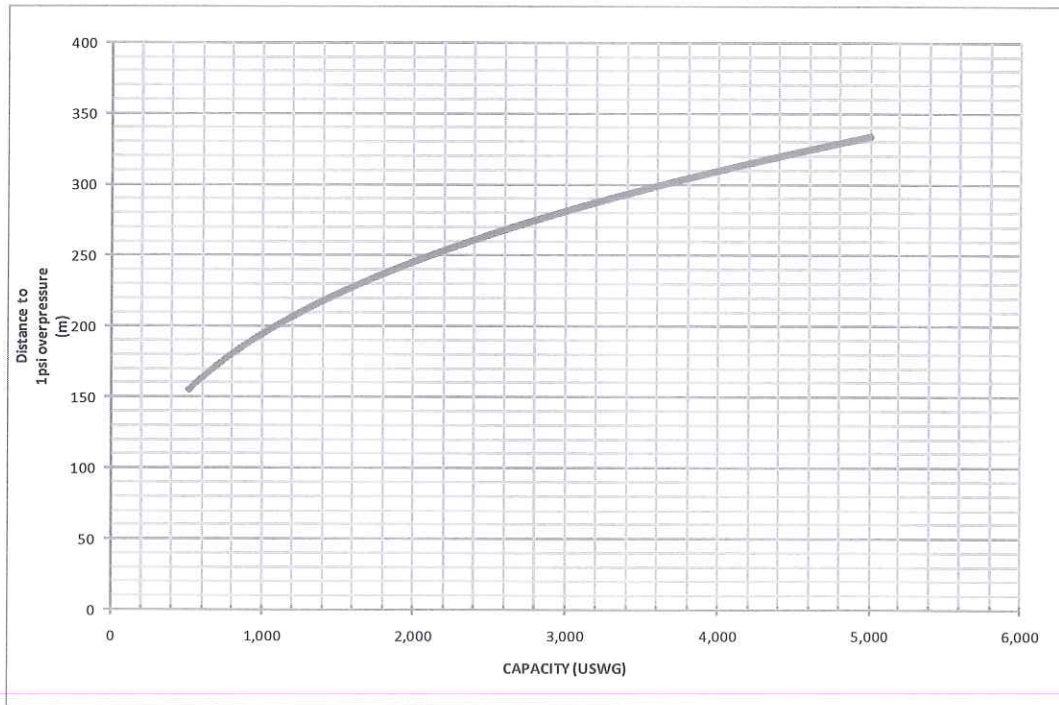
Table 1: Distance Table

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

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

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

Hazard Distance Chart (EPA-TNT model)





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SECTION C: SUBMISSIONS (cont'd)

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

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

Table 2: Buildings and Features

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [REDACTED]			x		100 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Walmart</u> Address: <u>Hwy 148 and Angus Campbell</u> City: <u>Pembroke</u> Province <u>ON</u> Postal Code _____			x		50 m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				_____ m

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

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

Name of person completing this form (please print) <u>Richard Johnson</u>	Official Title <u>President/Dealer</u>
Signature 	Telephone No. <u>226-378-8473 or 613-735-0000</u>
	Date (dd-mmm-yyyy) <u>15-Jul-2015</u>



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WORKSHEET

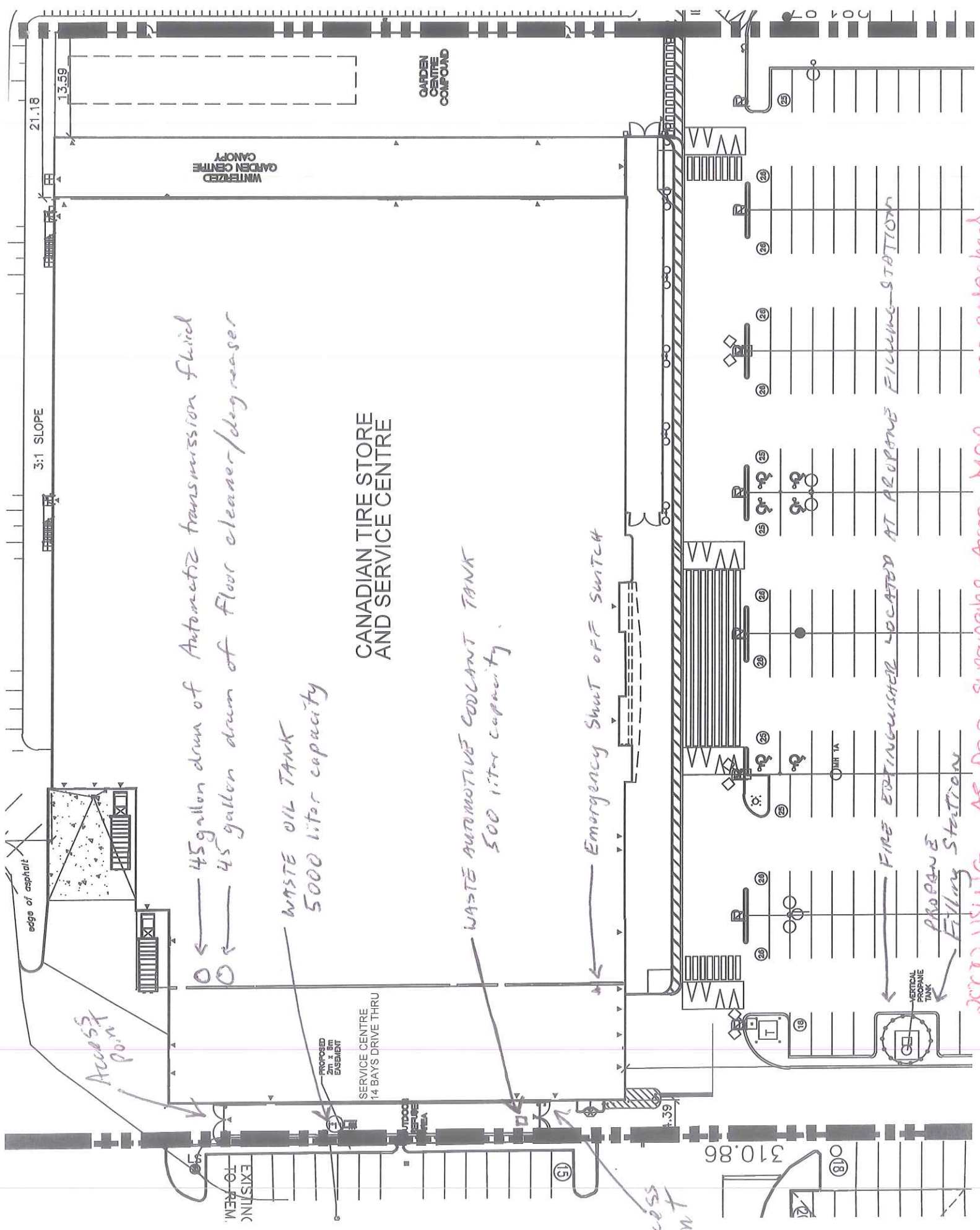
Portable Storage Additional Information Worksheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5		
# 40	11.75		
# 33.3	9.62	2	19.24
# 30	8.8	10	88
# 20	5.8	40	232
# 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	339.24
Total Tank Capacity	2000
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	339.24



45 gallon drums of Automatic transmission fluid
 45 gallon drum of floor cleaner/degreaser

WASTE OIL TANK
 5000 liter capacity

WASTE AUTOMOTIVE COOLANT TANK
 500 liter capacity

Emergency Shut off Switch

FIRE EXTINGUISHER LOCATED AT PROPANE FILLING STATION

Propane Filling Station

VERTICAL PROPANE TANK

2000 USWG - AS PER SURROUNDING AREA MAP. see attached

3:1 SLOPE

21.18

13.59

CANADIAN TIRE STORE AND SERVICE CENTRE

SERVICE CENTRE
 14 BAYS DRIVE THRU

PROPOSED
 2m x 5m
 ELEMENT

OUTDOOR
 SERVICE
 AREA

1.39

310.86

Ø18

Ø15

Ø25

Ø25

Ø25

Ø25

Ø25

Ø25

Ø25

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Access Point

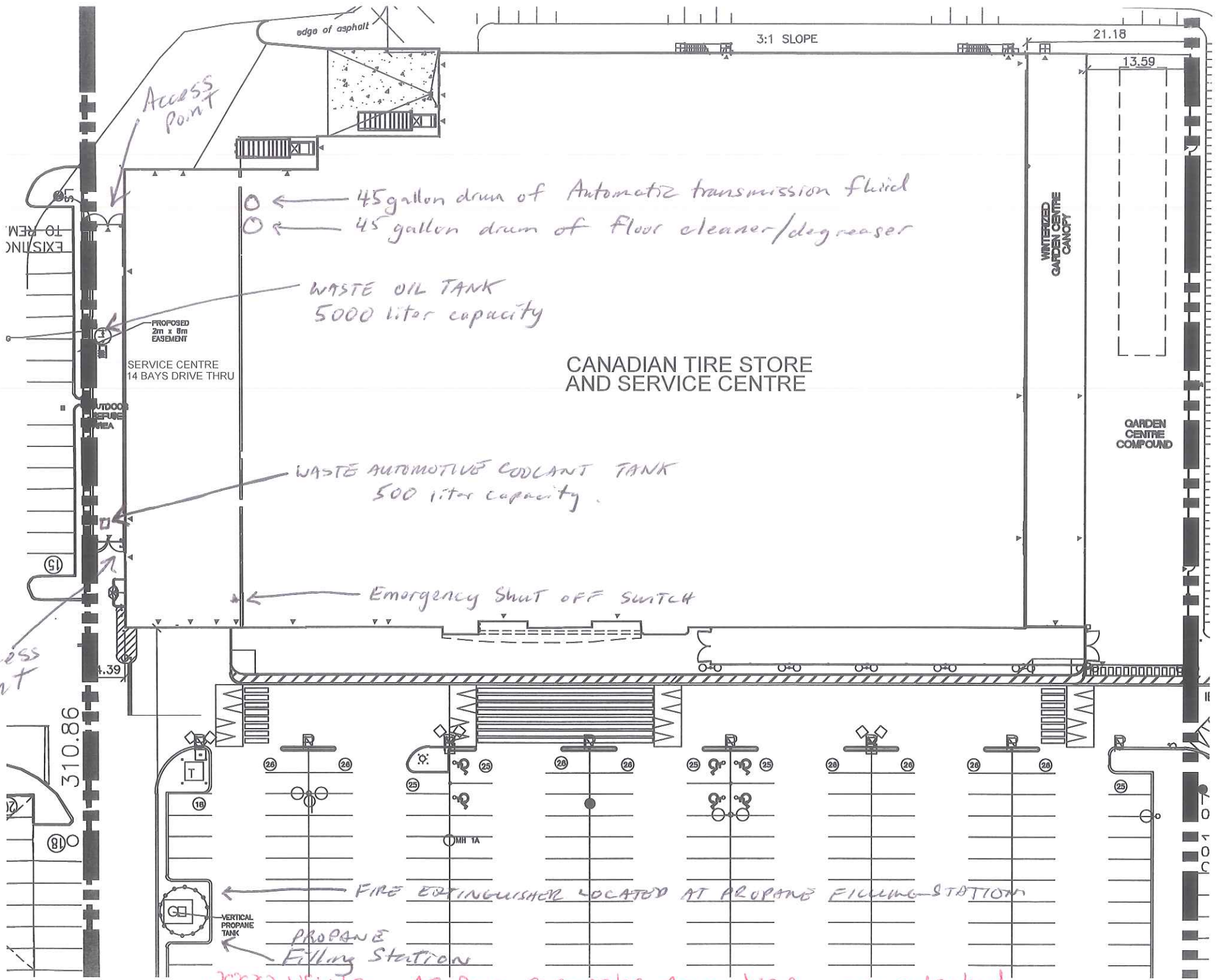
Access Point

EXISTING TO REM.

WINTERIZED GARDEN CENTRE CANOPY

GARDEN CENTRE COMPOUND

edge of asphalt



Access Point

45 gallon drum of Automatic transmission fluid
 45 gallon drum of floor cleaner/degreaser

WASTE OIL TANK
 5000 liter capacity

CANADIAN TIRE STORE
 AND SERVICE CENTRE

WASTE AUTOMOTIVE COOLANT TANK
 500 liter capacity

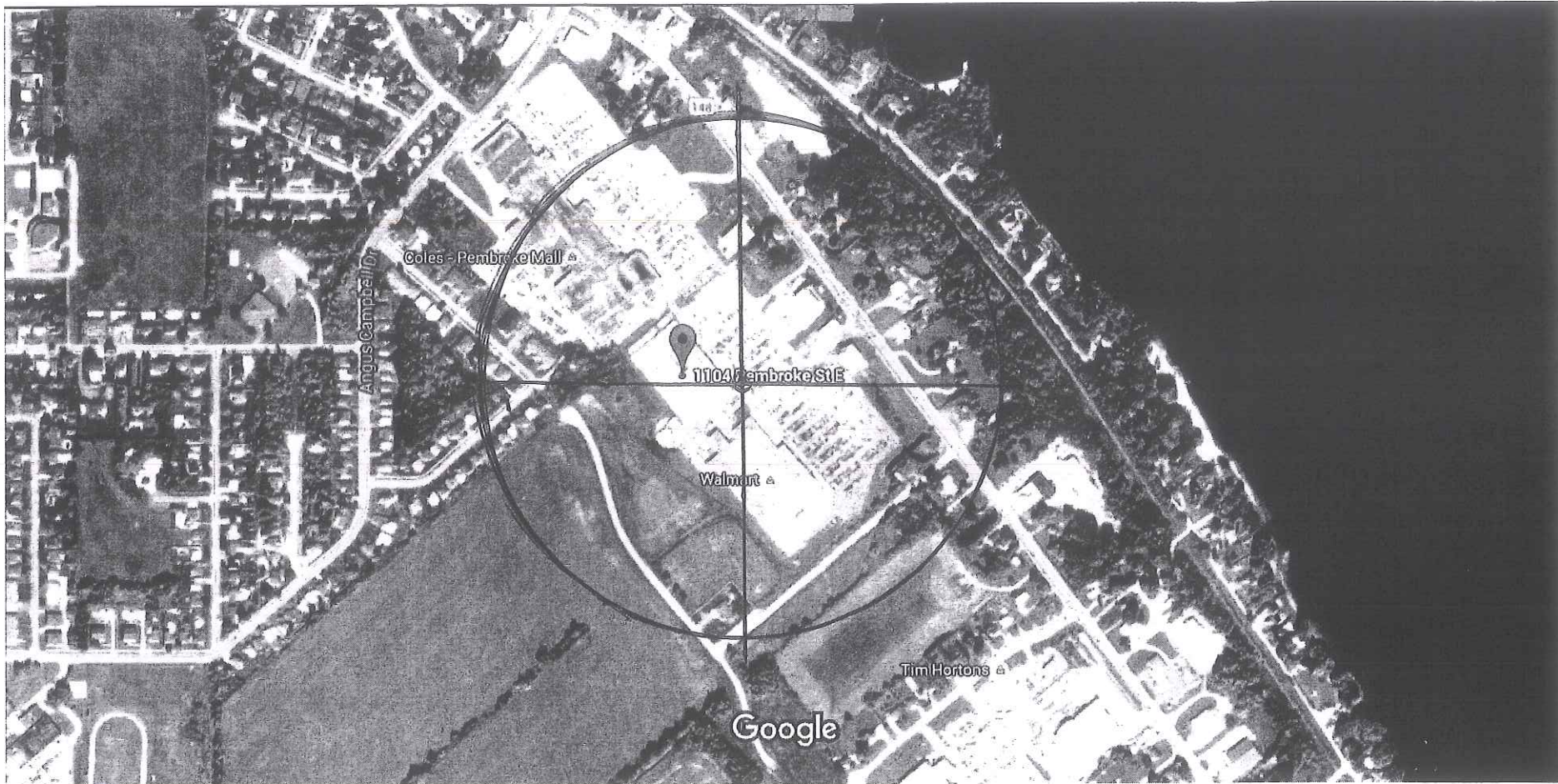
Emergency Shut off SWITCH

Access Point

FIRE EXTINGUISHER LOCATED AT PROPANE FILLING STATION

PROPANE Filling Station

2000 USWG AS per surrounding Area Map, see attached.

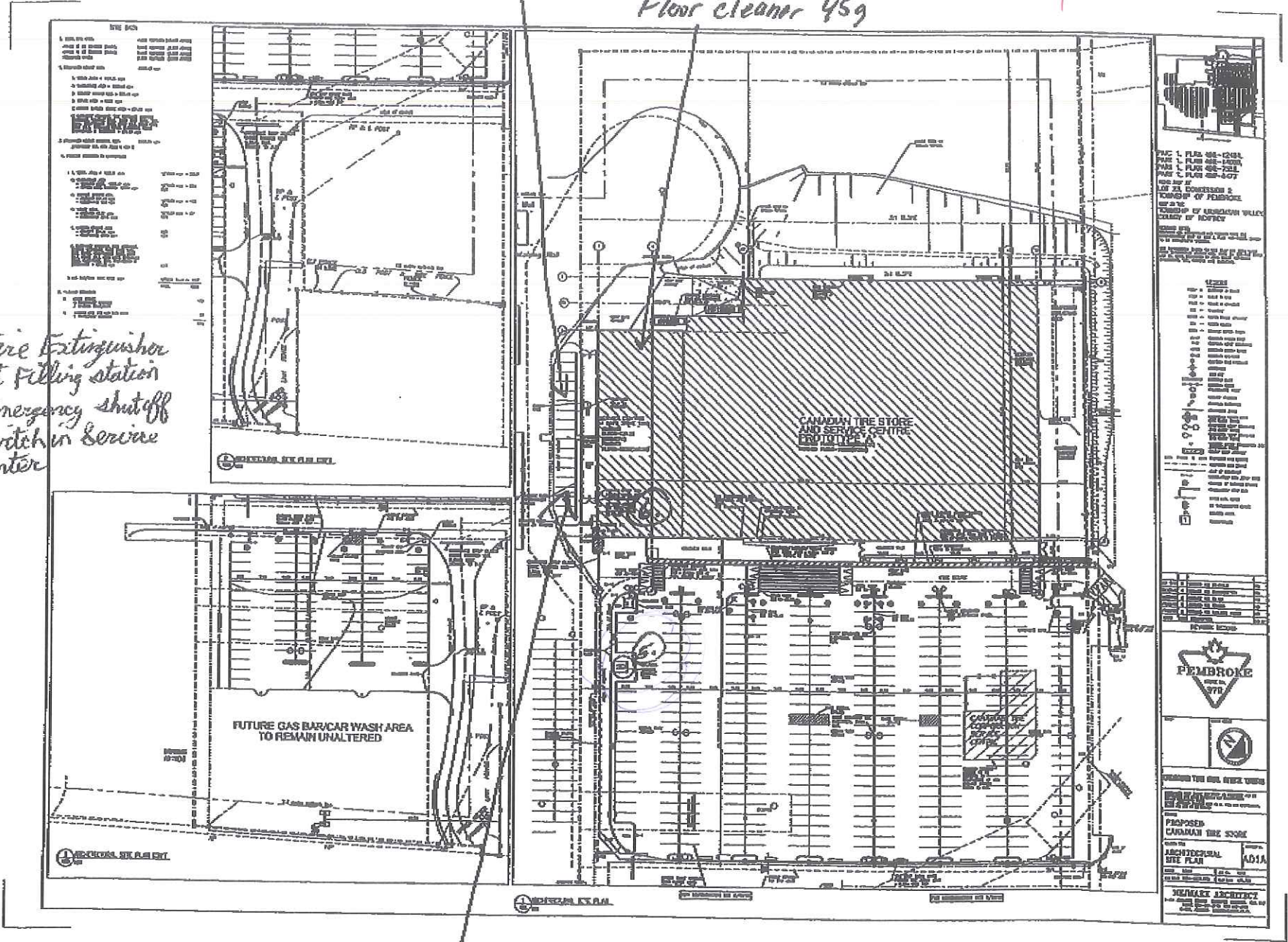


Location of Propane Storage Tank: Demarcated by ● in centre of circle.	Note: Property Lines a setbacks shown on site plan.	Map of Surrounding Area Canadian Tire - 1104 Pembroke Street East Legal Description: PT LT 23, CON 2 FRONTING ALLU- MENTE LAKE, PEMBROKE, PT 1 49R7552 & PT 1, 49R7552 & PT 1, 45R12484, T/W PTS 1-38 & 62-66, 49R15110 AS IN RE26 753; S/T PTS 39, 41-49, 51, 52 & 54 & PTS 56-60, 49R15110 AS IN RE26754; TWP OF LAURENTIAN VALLEY
Capacity of Propane Storage Tank: Capacity of Propane Storage Tank = 2000 USWG	Municipality (ies): within the 1 psi overpressure circle: The Municipality of Renfrew	
GPS Coordinates of Propane Storage Tank: GPS Co-ordinates = 45.8191, -77.0813	Municipal Contact: <i>Jack Wilson</i>	
Circular Distance to 1 psi overpressure: Denoted by circle centred on tank radial distance = 246 m		

WASTE OIL STORAGE TANK
Transmission Fluid 45g
Floor cleaner 45g

- compressed volume?
- Access points?
- tank?

Fire Extinguisher
at filling station
Emergency shut off
switch in Service
Center



WASTE AUTOMOTIVE COOLANT