



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.

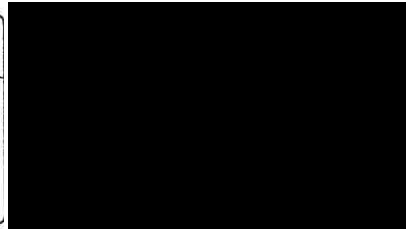
Failure to fully complete this form may result in rejection.
 Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number: 76649506

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.

Company Name: Canadian Tire Corporation Ltd. Ontario Corporation No., if applicable: _____

Operator Name (if different from above): Terry Dawood (Agent).Tel: 905-548-9223

Telephone No.: 416-544-7908 Fax No.: 416-544-6103 E-mail: john.lastoria@cantire.com

Street No.: 2180 Street Name / 911 Number / Address, if applicable: Yonge St., 17th Floor

Town / City or Township / County: Toronto Province: Ontario Postal Code: M4P 2V8

Mailing address if different from above.

Street No.: _____ Street Name / 911 Number / Address, if applicable: PO Box 770 Station K (Account #34421)

Town / City or Township / County: Toronto Province: on Postal Code: M4P 2V8

Information on Container Refill Centre or Filling Plant

Location of facility.

Street No.: 1321 Street Name / 911 Number / Address, if applicable: Barton St. E Nearest Major Intersection: Barton St + Kenilworth Ave.

Town / City or Township / County: Hamilton Province: Ontario Postal Code: L8H 2W2

Name of Licence Holder: John Lastoria on behalf of Canadian Tire Corporation Ltd.

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

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

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.

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Name of Licence Holder: John Lastoria	Signature:	Date (dd-mm-yyyy): 01-06-2011
Name of Senior Management person as defined in the Regulation holding the Record of Training: Glen Butt		



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SECTION A: GENERAL INFORMATION (cont'd)

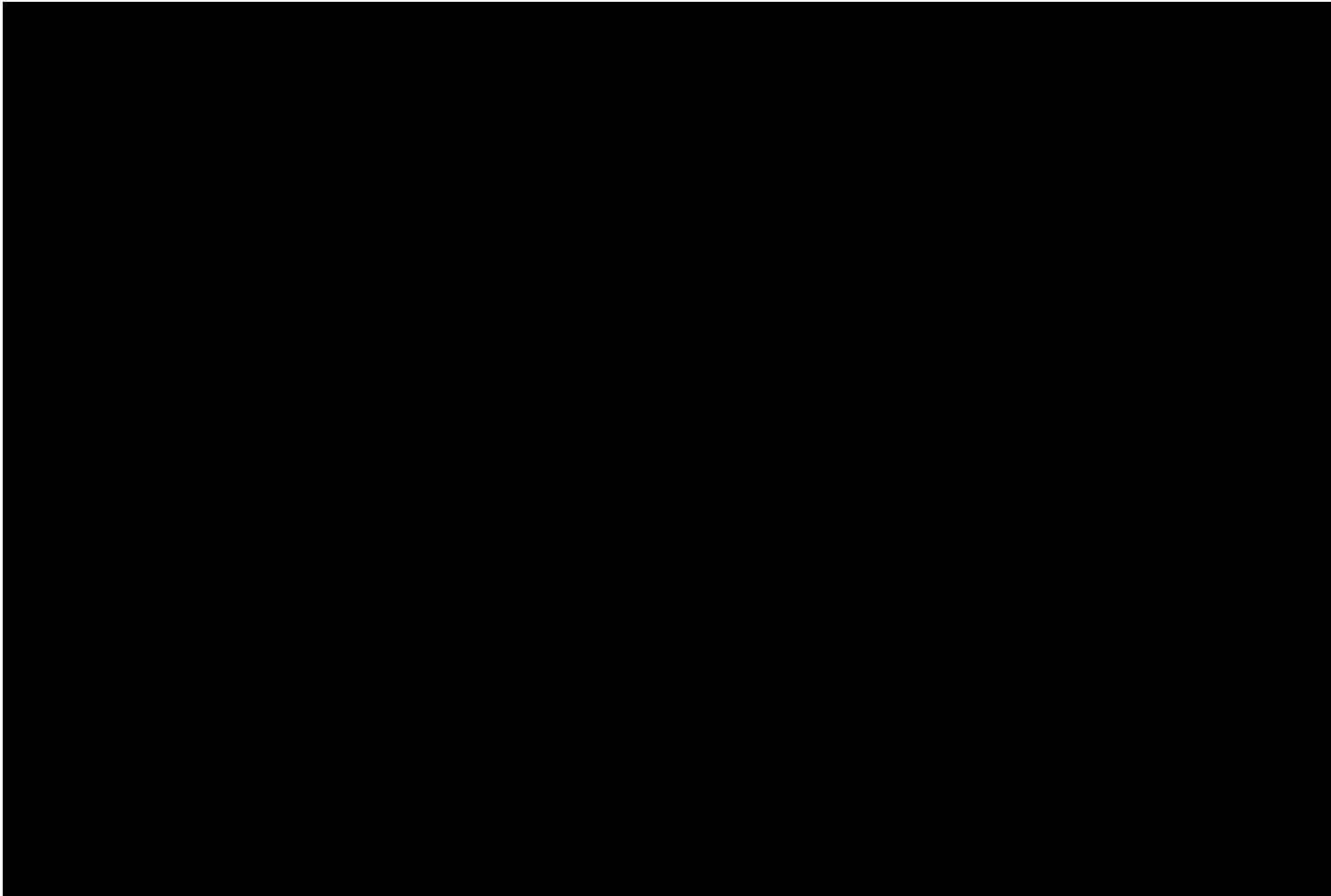
Indicate the year the facility was established. 2009	Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. None since open
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Identify the psig rating and serial number for each fixed propane storage tank on site.

	PSIG	Serial Number
Tank 1:	250 PSIG	4021-0
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 USWG Portable: 140 USWG Mobile: 0



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Name of person completing this form (please print) John Lastoria	Official Title EH &S Specialist
Signature 	Telephone No. 416-544-7608
	Date (dd-mm-yyyy) 01-06-2011



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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 Road West, 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"/>					
Superior Propane - Smithville					
Street No. 3089	Street Name / 911 Number / Address, if applicable Regional Rd #12				
Town / City or Township / Country Smithville			Province Ontario	Postal Code L0R 2A0	
Telephone No. 905-516-2301	Fax No.	Contact Name Tom Amies			
E-mail amiest@superiorpropane.com					

Off-site Cylinder and/or Mobile Storage		Capacity stored off-site, in USWG	For Office Use - Party No.		
None					
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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Name of person completing this form (please print) Kelly Almey		Official Title Risk & Safety Coordinator, Superior Propane	
Signature 		Telephone No. 905-285-2480 ext. 5549	Date (dd-mm-yyyy) 29-07-2011



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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.
Gasoline @ 150,000 litres

Stored near the gasoline dispensers directly opposite the gas bar building.

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

First Extinguishers:

1. Inside gas bar building
2. On columns by gasoline dispensers
3. At the bulk propane tank filling station

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 downstream propane dispensing equipment.
2. Emergency stop push button - mounted on a post near the propane tank. This shuts down the pump and closes a solenoid valve upstream of hoses.
3. Power supply breaker inside the gas bar building. This cuts all power to the propane system - shuts down pump; closes solenoid valve.

Maintenance and testing schedule for fire protection controls and devices.

Maintenance and testing is undertaken by Superior Propane according to Superior Propane's Maintenance Standard. Schedule for key equipment is:

1. Pumps (Pump every 3 months; Pump Motor: check belts monthly; grease motor every 6 months)
2. ISC Valves (test for closure every 6 months)
3. Storage tank Relief Valves - inspect every 2 years; replacement schedule as per provincial regulations.

4. Fire Extinguishers - shall be maintained in accordance with the Ontario Fire code.

Kalmeij
Superior Propane

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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 Terry Dawood	For Office Use - Party No.	Name Terry Dawood	For Office Use - Party No.
Official Title Agent		Official Title Agent	
Telephone No. 905-548-9223	Fax No. 905-548-9223	Cell No. 905-929-5682	Fax No. 905-548-9223
E-mail 1051.Hamilton_Centre@ctpagent.ca		E-mail 1051.Hamilton_Centre@ctpagent.ca	
Role and responsibilities in emergency Coordinate site response		Role and responsibilities in emergency Coordinate site response	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Ronald Rameshnauth	For Office Use - Party No.	Name Terry Dawood	For Office Use - Party No.
Official Title Regional Bus Mgr		Official Title Agent	
Telephone No. 416-452-4929	Fax No. 905-257-9093	Telephone No. 905-548-9223	Fax No. 905-548-9223
E-mail ronald.rameshnauth@cantire.com		E-mail 1051.Hamilton_Centre@ctpagent.ca	
Role and responsibilities in emergency Coordinate site response if agent unavailable.		Role and responsibilities in emergency Coordinate site response	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Rob Simonds	For Office Use - Party No.	Name Superior Propane Hotline	For Office Use - Party No.
Official Title Fire Chief		Official Title	
Telephone No. 905-546-3348 905 546-2424	Fax No. 905-546-3344	Telephone No. 1-877-873-7467	Fax No.
E-mail x 3346 rob.simonds@hamilton.ca		E-mail	
Role and responsibilities in emergency Coordinate/advise on Fire Service response and liaise with police.		Role and responsibilities in emergency Identify and dispatch Superior Propane and or LPERGC emergency response personnel as required.	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Dave Cunliffe	For Office Use - Party No.	Name Chris Murray	For Office Use - Party No.
Official Title Deputy Fire Chief		Official Title City Manager	
Telephone No. 905-546-3348 905 546-2424	Fax No. 905-546-3344	Telephone No. 905-546-2489	Fax No. 905-540-5141
E-mail x 3340		E-mail citymanager@hamilton.ca	
Role and responsibilities in emergency Alternate - Coordinate/advise on Fire Service Response and liaise with police.		Municipality City of Hamilton	

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	Date (dd-mm-yyyy) 01-06-2011



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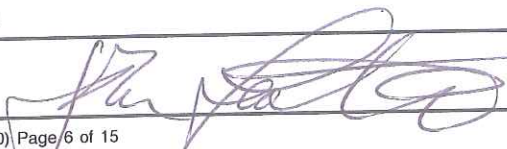
SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

2. Additional Safety Measures

Describe any other measures in place at the facility that exceed the minimum Code and Standards requirements.

Emergency Shut Off push button to shut down pump and close solenoid valve upstream of dispensing hoses.

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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)	Print Name of Training Provider: None
	Print Name of Instructor:
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)	Print Name of Training Provider: None
	Print Name of Instructor:
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)	Print Name of Training Provider: Promar Petroleum	Please note - a ROT is valid for 3 years
05/2010	Print Name of Instructor: Mike Martin	
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:	

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John Lastoria	E H & S Specialist	
Signature	Telephone No.	Date (dd-mm-yyyy)
	416-544-7608	01-06-2011



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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) Q4 2011	Print Name of Training Provider: Superior Propane or other
	Print Name of Instructor:
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) Q4 - 2011	Print Name of Training Provider: Key Site contact to train staff
	Print Name of Instructor: to be arranged
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) As required	Print Name of Training Provider: As required.	Please note - ROT training is valid for 3 years
	Print Name of Instructor:	
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:	

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

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

5. Emergency Response Communications Plan

Warnings and Actions

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).
The operator or alternate on duty (both ROT trained) will contact emergency services by calling 911 and will provide warnings outlined in the attached "Propane Emergency Response Procedures" placard (to be posted at the site and be part of the employee training). If it is safe to do so this could include advising neighbours to evacuate. The owner/operator may also contact Superior Propane via the emergency number identified in the ERP.

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/operator or alternate should first follow the actions in the ERP's provided herein. Staged evacuation, if the release of propane cannot be stopped by cutting electrical power may be required. The initial muster location will be in the northwest corner of the site, behind the Canadian Tire retail outlet, at least 150 m from the site and away from a dispersing propane cloud. Subsequent evacuation instructions potentially up to the hazard distance to be provided by the municipal emergency responders. Residences and businesses beyond the site boundary to be notified by municipal emergency responders.

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).

When the system is operational, a ROT person will be on duty and be in the propane tank area. The Key Contact or alternate will be able to visually ascertain any abnormal/accident events and implement the appropriate emergency response actions including notifying emergency responders.

When the system is not in operation, the ISC valve (main isolation valve) is closed, and the propane system is unattended but shut down.

Any accidents involving the propane tank during such times will require the intervention of random, nearby individuals or store staff.

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

The propane tank system is located in a wide open store parking lot area that is easily accessible by two lane roads to the north from Sheppard Avenue and via one access road to the south of the parking lot. These fire access routes are identified in the attached site plan.

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

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

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

This information will be provided verbally to the authorities by agent - Terry Dawood, if on site, or by cell phone during off hours.

If Key Site Contact is unavailable this information will be provided to ER's by the Alternate or 24-hr Contact.

How long will it take the facility liaison person to respond to the site.
Approximately 10 minutes after having received the emergency call.

Please refer to page 5. Kalmey Superior Propan

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Signature 	Telephone No. 416-544-7608	



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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 type="checkbox"/> | <input checked="" 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>20 m</u> <i>ka</i> | |
| 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>N/A</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).

N/A

Fire services comments, if any:

INITIAL COMMENTS WERE ADDRESSED - NO FURTHER COMMENTS

[Signature]

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.

<i>FRANK BIANCOCCI</i> Local Fire Services Name	Print name <i>HAMILTON EMERGENCY SERVICES - FIRE</i>	Signature <i>[Signature]</i>	Date (dd-mm-yyyy) <i>July 27/11</i>
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Name of person completing this form (please print) <i>Kelly Almey</i>	Official Title <i>Risk + Safety Co-ordinator</i>
Signature <i>[Signature]</i>	Telephone No. <i>905 285-2480 x5549</i> Date (dd-mm-yyyy) <i>29-07-2011</i>



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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) 04/03/2011	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 54 m	Right side property line: 174 m
Rear: 128 m	Left side property line: 13 m
GPS coordinates of single largest vessel:	Lat. 43.2511, Long. -79.8057

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

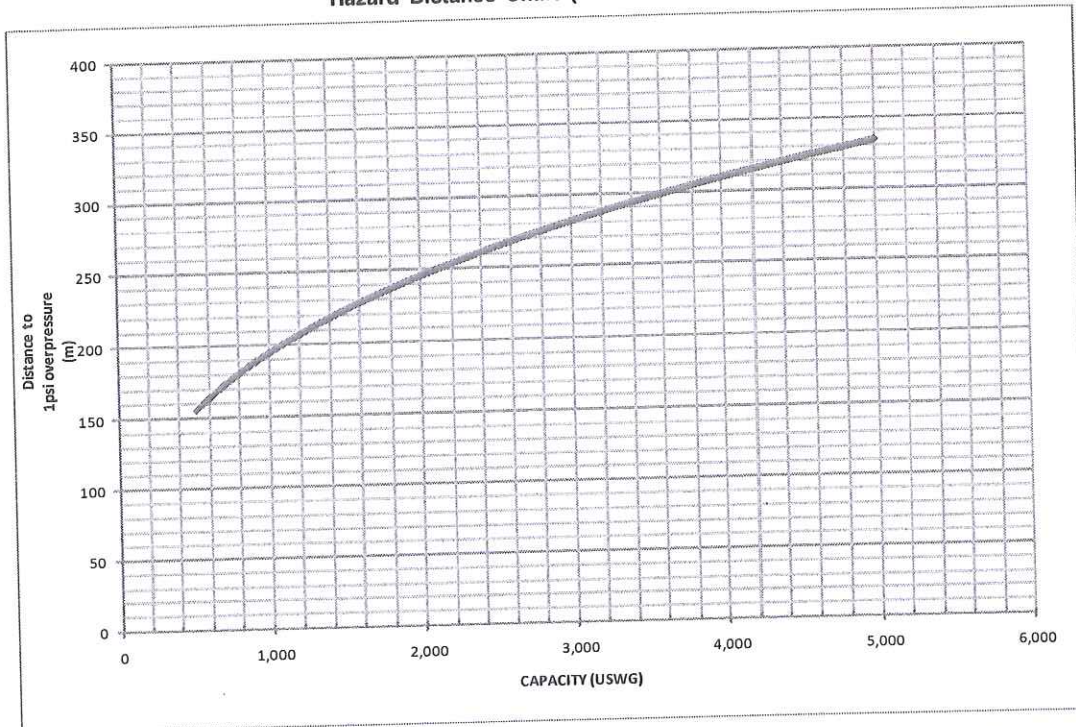
Table 1: Distance Table

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)



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) Nothing completed on this page.	Official Title	
Signature	Telephone No.	Date (dd-mm-yyyy)



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 Name: Harbour Electric Ltd; Hay Battery Ltd; various other industrial buildings along Dunbar Ave. Address: _____ City: _____ Province _____ Postal Code _____			x		70 m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____				x	55 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: Marin and Associates; Local 1005 Canadian Steelworkers; various other banks, restaurants etc. Address: _____ City: _____ Province _____ Postal Code _____			x		40 m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				0 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				0 m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				0 m

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

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Name of person completing this form (please print) John Lastoria	Official Title EH & S Specialist
Signature 	Telephone No. 416-544-7608
	Date (dd-mm-yyyy) 01-06-2011



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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	24	140
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			140 USWG

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
None 2000 USWG	1	2000 USWG
Total Tank Capacity		

Total Cylinder Capacity	140 USWG
Total Tank Capacity	2000 USWG
Total Portable Capacity	140 USWG

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) John Lastoria	Official Title EH & S Specialist	
Signature 	Telephone No. 416-544-7608	Date (dd-mm-yyyy) 01-06-2011