



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.

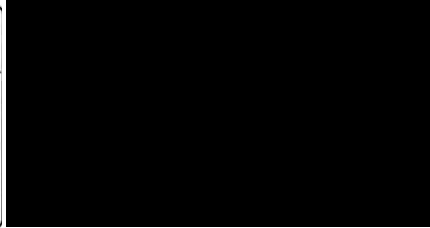
Failure to fully complete this form may result in rejection.
Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number 000076638088

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 Pinehurst Variety Ontario Corporation No., if applicable 1420999

Operator Name (if different from above)

Telephone No. 519 442 1552 Fax No. 519 442 0168 E-mail Address info@pinehurstvariety.com

B Street No. 488 Street Name, Lot / Concession No. Pinehurst Road RR #3

Town / City or Township / County Ayr Province Ontario Postal Code N0B 1E0

Mailing address if different from above.

C Street No. Street Name, Lot / Concession No.

Town / City or Township / County Province Postal Code

Information on Container Refill Centre or Filling Plant

Location of facility.

D Street No. 488 Street Name, Lot / Concession No. Pinehurst Road Nearest major intersection DRUMBO ROAD

Town / City or Township / County Ayr Province Ontario Postal Code N0B 1E0

Name of Licence Holder 1420999 Ontario Inc. Charron Ellis

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). ROT type filling propane cylinders

Charron Ellis

Municipality (or municipalities if the facility or its hazard distance touches multiple borders)
County of Brant

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-mm-yyyy)
Name of Licence Holder <u>Charron Ellis</u>		<u>11 10 2011</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Charron Ellis</u>		<u>11 10 2011</u>



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Application for Renewal of Level 1 Propane Licence
Technical Standards and Safety Act
Propane Storage and Handling Regulation

GENERAL INFORMATION

Company Name PINEHURST VARIETY		Corporation No. 1420999	
Operator Name (if different from above)			
Telephone No. 519-442-1552	Fax No.	E-mail info@pinehurstvariety.com	
Street No. 488	Street Name / 911 Number / Address, if applicable PINEHURST ROAD		Nearest Major Intersection DRUMBO ROAD
Town / City or Township / County AYR		Province ONTARIO	Postal Code N0B 1E0
Mailing address (if different from above)			
Street No.		Street Name / 911 Number / Address, if applicable	
Town / City or Township / County		Province	Postal Code

Information on Container Refill Centre			
Location of facility (if different from above)			
Street No.	Street Name / 911 Number / Address, if applicable		Nearest Major Intersection
Town / City or Township / County		Province	Postal Code

Facility Contact Personnel - Key Contact	
Name CHARRON ELLIS	Official Title PRESIDENT-SECRETARY
Telephone No. 519-442-1552	Fax No.
E-mail info@pinehurstvariety.com	
Role and responsibilities in emergency. DIRECT PERSONELL, CONTACT EMERGENCY SERVICES	

You are required by law to notify TSSA of any change of information contained in the Risk and Safety Management Plan within 15 days.

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 of person completing this form. CHARRON ELLIS	Official Title PRESIDENT-SECRETARY	
Signature 	Telephone No. 519-442-1552	Date (dd-mmm-yyyy) 16-MAY-2017



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SECTION A: GENERAL INFORMATION (cont'd)

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

2002 N/A

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

	PSIG	Serial Number
Tank1:	<u>250 psi</u>	<u>1D76-108</u>
Tank2:	_____	_____
Tank3:	_____	_____

Enter capacity of propane in USWG, fixed, portable, and mobile, and provide detailed inventory that includes the number of tank/vessel for each type (fixed, portable, and mobile) and the capacity of each tank/vessel, on a separate document.

Fixed: 1000 Portable: 0 Mobile: 0

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Name of person completing this form (please print) <u>Charcon Ellis</u>	Official Title <u>President/Secretary</u>	
Signature 	Telephone No. <u>519 442 1552</u>	Date (dd-mm-yyyy) <u>25 April 2011</u>



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**Application for Renewal of
Level 1 Propane Licence**
Technical Standards and Safety Act
Propane Storage and Handling Regulation

GENERAL INFORMATION

Name of Propane Supplier(s) CARLING PROPANE INC.		For Office Use - Party No.	
Street No. 19752	Street Name / 911 Number / Address, if applicable HOLLAND LANDING ROAD		
Town / City or Township / Country HOLLAND LANDING		Province ONTARIO	Postal Code L9N 0A1
Telephone No. 905-952-0146	Fax No. 905-952-0155	Contact Name ALEX L. GOERK	
E-mail alex@carlingpropane.ca			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		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	
E-mail			

Off-site Cylinder and/or Mobile Storage N/A		Capacity stored off-site, in USWG	For Office Use - Party No.
Street No.	Street Name / 911 Number / Address, if applicable		
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	

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

You are required by law to notify TSSA of any change of information contained in the Risk and Safety Management Plan within 15 days.

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Print name of person completing this form. CHARRON ELLIS		Official Title PRESIDENT-SECRETARY	
Signature 		Telephone No. 519-442-1552	Date (dd-mmm-yyyy) 16-MAY-2017



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Application for Renewal of Level 1 Propane Licence
Technical Standards and Safety Act
Propane Storage and Handling Regulation

EMERGENCY AND PREPAREDNESS RESPONSE PLAN

The licence holder will complete the Emergency and Preparedness Response Plan in consultation with the local Fire Services.

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

SPLIT STORAGE TANK, REGULAR AND PREMIUM VEHICLE FUEL, UNDERGROUND LEAK ALARMED 35,000 GALLON. DIESEL FUEL STORAGE TANK, UNDERGROUND LEAK ALARMED 20,000 GALLON. EXTERIOR FUEL OIL STORAGE TANK FOR GARAGE FURNACE 900 LITRE CAPACITY.

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

ABC POWDER FIRE EXTINGUISHERS LOCATED WHERE INDICATED. FIRST AID KIT LOCATED INSIDE THE STORE. FUELING STATION EMERGENCY STOP BUTTON LOCATED IN THE STORE AT THE CHECK-OUT COUNTER.

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 ON PTI TANK RELEASE VALVE.
24 HOUR MONITORED SECURITY SYSTEM WITH ONE BUTTON PUSH FIRE NOTIFICATION.

Maintenance and testing schedule for fire protection controls and devices.

DAILY VISUAL INSPECTION OF ALL FIRE PROTECTION DEVICES.
YEARLY INSPECTION OF EXTINGUISHERS BY DENNIS EVANS FIRE EQUIPMENT LTD., 58 HENRY ST., BRANTFORD, ON.

You are required by law to notify TSSA of any change of information contained in the Risk and Safety Management Plan within 15 days.

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Print name of person completing this form. CHARRON ELLIS	Official Title PRESIDENT-SECRETARY
Signature 	Telephone No. 519-442-1552
	Date (dd-mmm-yyyy) 16-MAY-2017



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Level 1 Propane Licence
Technical Standards and Safety Act
Propane Storage and Handling Regulation**

EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

The licence holder will complete the Emergency and Preparedness Response Plan in consultation with the local Fire Services.
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 PRIMARY PERSON ON STAFF WILL PRESS THE FIRE NOTIFICATION BUTTON ON THE MONITORED SECURITY SYSTEM. THEY WILL THEN USE A PHONE TO CONTACT 911 TO PROVIDE DETAILS OF THE EMERGENCY. IF PRACTICAL ACCESS TO THE AREA FROM THE PARK WILL BE STOPPED BY CLOSING THE ACCESS GATE. CUSTOMERS WILL BE WARNED VERBALLY.

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).

NOTIFICATION TO EMERGENCY SERVICES. CLOSE ACCESS TO THE AREA (PARK GATE), RELOCATE ALL PERSONS TO THE DESIGNATED EMERGENCY RALLY POINT (PARKING AREA ON THE SOUTH SIDE OF THE RESIDENCE). IF PRACTICAL STAFF WEARING REFLECTIVE EMERGENCY VEST WILL ATTEMPT TO WARN ONCOMING TRAFFIC UNTIL EMERGENCY SERVICES ARRIVE. PUSH EMERGENCY STOP BUTTON TO DEACTIVATE VEHICLE FUELING STATION TO SECURE IT.

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).

PRIMARY: ONE-BUTTON PUSH OF MONITORED SECURITY SYSTEM TO NOTIFY FIRE SERVICES.

SECONDARY: TELEPHONE NOTIFICATION TO 911 TO PROVIDE DETAILS OF THE EMERGENCY USING ONE OF 4 PORTABLE PHONES, OR IF NEEDED THE BELL PAYPHONE LOCATED ADJACENT TO THE EMERGENCY RALLY LOCATION.

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

THE PROPANE FILLING STATION IS LOCATED OUTSIDE. THERE IS NO OBSTACLE TO ACCESSING IT. THE MAIN BREAKER WOULD BE IN THE "OFF" POSITION, LOCATED IN THE GARAGE WHICH IS LOCKED DURING OFF HOURS. THE PRIMARY RESIDENCE IS ON SITE, SO KEY PERSONNEL AND FACILITY MANAGERS ARE ALMOST ALWAYS AVAILABLE.

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

THE LICENCE HOLDER LIVES ON SITE, SO WILL BE AVAILABLE IN PERSON OR BY TELEPHONE @519-442-1552, OR BY SECONDARY PHONE @519-442-2212

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

THE FACILITY LIAISON PERSON IS ALMOST ALWAYS ON SITE, IT IS THE PRIMARY PLACE OF RESIDENCE.

You are required by law to notify TSSA of any change of information contained in the Risk and Safety Management Plan within 15 days.

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Print name of person completing this form.

CHARRON ELLIS

Official Title

PRESIDENT-SECRETARY

Signature

Telephone No.

519-442-1552

Date (dd-mmm-yyyy)

16-MAY-2017



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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 <i>Patricia Ellis</i>		Name <i>Patricia Ellis</i>	For Office Use - Party No.
Official Title <i>Operations Manager</i>		Official Title <i>Operations Manager</i>	
Telephone No. <i>519 442-1552</i>	Fax No. <i>519 442 0168</i>	Cell No. <i>519 830 0761</i>	Fax No. <i>519 442 0168</i>
E-mail <i>info@pinehurstvariety.com</i>		E-mail <i>info@pinehurstvariety.com</i>	
Role and responsibilities in emergency <i>site coordination + notifications</i>		Role and responsibilities in emergency <i>site coordination + notifications</i>	
Is there an alternate contact?		Who provided the training and is there a training program and frequency?	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name <i>Charron Ellis</i>	For Office Use - Party No.	Name <i>Charron Ellis</i>	For Office Use - Party No.
Official Title <i>PRESIDENT / SECRETARY</i>		Official Title <i>President / Secretary</i>	
Telephone No. <i>519 442 1552</i>	Fax No. <i>519 442 0168</i>	Telephone No. <i>519 442 1552</i>	Fax No. <i>519 442 0168</i>
E-mail <i>info@pinehurstvariety.com</i>		E-mail <i>info@pinehurstvariety.com</i>	
Role and responsibilities in emergency <i>site coordination + notifications</i>		Role and responsibilities in emergency <i>site coordination, maintenance, notification</i>	
Is there an alternate contact?		Who provided the training and is there a training program and frequency?	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name <i>Tom Waldschmidt</i>	For Office Use - Party No.	Name <i>Jason Smith</i>	For Office Use - Party No.
Official Title <i>Fire Prevention Officer</i>		Official Title <i>Risk manager / Dispatcher</i>	
Telephone No. <i>519 442 4500</i>	Fax No. <i>519 442 4590</i>	Telephone No. <i>519 246-1019</i>	Fax No. <i>519 246 1160</i>
E-mail <i>tom.waldschmidt@brant.ca</i>		E-mail <i>jsmith@microbertfuels.com</i>	
Role and responsibilities in emergency <i>emergency response coordinator</i>		Role and responsibilities in emergency <i>site-specific information</i>	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name <i>Geoff Hayman</i>	For Office Use - Party No.	Name <i>Jayne Carman</i>	
Official Title <i>Deputy Fire Chief</i>		Official Title <i>Clerk</i>	
Telephone No. <i>519 442-4500</i>	Fax No. <i>519 442-4590</i>	Telephone No. <i>519 449 2451</i>	Fax No. <i>519-449-2454</i>
E-mail <i>geoff.hayman@brant.ca</i>		E-mail <i>Jayne.carman@brant.ca</i>	
Role and responsibilities in emergency <i>emergency response administrator</i>		Municipality <i>County of Brant.</i>	

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) <i>Charron Ellis</i>	Official Title <i>President / Secretary</i>
Signature 	Telephone No. <i>519-442-1552</i> Date (dd-mm-yyyy) <i>25 April 2011</i>



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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.

- 24h recorded surveillance of the yard, including the propane filling station
- motion-activated flood light to illuminate the propane filling station after dark.
- triple-redundant after-hours lockout procedure; closed PTI valve, locked access to main filler power switch, power source breaker turned off + locked
- Key contact and facility manager reside on site; available for immediate response to any incident
- additional fire extinguishers available at multiple locations
- one-button push system for notification of fire or emergency; reported to Alarm Force 24h monitored security service
- two separate land line telephones (wireless) plus two separate cell telephones available to ensure emergency services are contacted and well informed
- daily visual inspection of all components of the propane filling station and weekly inspection of hoses with soap solution for early detection of damage or leaks.
- for additional notification access, there is a Bell pay phone located beside the designated emergency rally location

Notification of call-out system of alternate contacts if supervisory staff not on site.

Is there training for alternate contacts in emergency procedures?

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Signature 	Telephone No. 519 442-1552	Date (dd-mm-yyyy) 25 April 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) 25 April 2011	Print Name of Training Provider: Pinehurst Variety
	Print Name of Instructor: Charron Ellis
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Who provided Charron with the training?
	Print Name of Instructor: Was there a program or lesson plan and to what standard?
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) 25 April 2011	Print Name of Training Provider: Pinehurst Variety
	Print Name of Instructor: Charron Ellis
Training Date (dd-mm-yyyy) 8 Oct 2011	Print Name of Training Provider: Pinehurst Variety
	Print Name of Instructor: Charron Ellis
Training Date (dd-mm-yyyy)	Print Name of Training Provider: Who provided Charron with the training? Was
	Print Name of Instructor: there a program or lesson plan and to what standard?

On-site specific training provided to certificate holders / persons with Records of Training.

Training Date (dd-mm-yyyy) 12 07 2011	Print Name of Training Provider: Propane Training Institute
	Print Name of Instructor: Dave Kennedy
Training Date (dd-mm-yyyy) 20 09 2011	Print Name of Training Provider: FSN Training and development Inc
	Print Name of Instructor: Mike Farah
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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Signature 	Telephone No. 519 442 1552
	Date (dd-mm-yyyy) 25 April 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) 01 03 2011	Print Name of Training Provider: Pinehurst Variety
	Print Name of Instructor: Charon Ellis
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) 01 03 2011	Print Name of Training Provider: Pinehurst Variety
	Print Name of Instructor: Charon Ellis
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) 01 03 2011	Print Name of Training Provider: Pinehurst Variety
	Print Name of Instructor: Charon Ellis
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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Name of person completing this form (please print) Charon Ellis	Official Title President / Secretary
Signature 	Telephone No. 519-442-1552
	Date (dd-mm-yyyy) 10 10 2011



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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

Identify roles & responsibilities of key contact or alternates.

Warnings and Actions

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).

The primary person on staff will press the fire notification button on the monitored security system. They will then use a phone to contact 911 to provide details of the emergency. If practical, access to the area from the park will be stopped by closing the access gate. Customers will be warned verbally.

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). Identify roles & responsibilities of key contact or alternates.

Notification to emergency services. Close access to the area (park gate) Relocate all persons to the designated emergency rally point (parking area on the south side of the residence.) If practical, staff wearing reflective emergency vest will attempt to warn oncoming traffic until emergency services arrive.

Push emergency stop button to deactivate vehicle fueling station to secure it.

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). Identify roles & responsibilities of key contact or alternates.

Who provided the training.
Primary: one-button push of monitored security system to notify fire services
Secondary: telephone notification to 911 to provide details of the emergency, using one of 4 portable phones, or, if needed, the Bell payphone located adjacent to the emergency rally location.

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

The propane filling station is located outside. There is no obstacle to accessing it. The main breaker would be in the 'off' position, located in the garage which is locked during off hours. The primary residence is on site, so key personnel and facility managers are almost always available.

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

The licence holder lives on site, so will be available in person or by telephone @ 519-442-1552, or by secondary phone @ 519-442-2212.

State alternate contact information and location of alternate contact.

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

The facility liaison person is almost always on site. It is the primary place of residence.

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Name of person completing this form (please print) Charan Ellis	Official Title President / Secretary
Signature	Telephone No. 519 442-1552
	Date (dd-mm-yyyy) 25 April 2011



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EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

The licence holder will complete the Emergency and Preparedness Response Plan in consultation with the local Fire Services.
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"/>

Water Supply

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

	Yes	No
1. Is a pressurized water system available at the propane facility site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)	<u>1 KM</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>5 KM</u>	

You are required by law to notify TSSA of any change of information contained in the Risk and Safety Management Plan within 15 days.

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 of person completing this form. CHARRON ELLIS	Official Title PRESIDENT-SECRETARY	
Signature 	Telephone No. 519-442-1552	Date (dd-mmm-yyyy) 16-MAY-2017



Technical Standards and Safety Authority
www.tssa.org

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

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

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

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

8. Licence holder and local Fire Services Review

To be completed by the Local Fire Services

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

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Fire services comments, if any:

Provide information on training frequency.
Provide contact information on contingency contacts.

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.

Print name	Signature	Date (dd-mm-yyyy)
Local Fire Services Name Paul Boissonneault	<i>Paul Boissonneault</i>	30/10/2011

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Name of person completing this form (please print) <i>Charon Ellis</i>	Official Title <i>President/Secretary</i>
Signature <i>[Signature]</i>	Telephone No. <i>519-442-1552</i>
	Date (dd-mm-yyyy)



Technical Standards and Safety Authority
www.tssa.org

345 Carlingview Drive
Toronto, Ontario M9W 6N9
Tel: 416.734.3300
Fax: 416.231.4078
Customer Service: 1.877.682.8772

Application for Renewal of Level 1 Propane Licence
Technical Standards and Safety Act
Propane Storage and Handling Regulation

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) 15-MAY-2017	Capacity of single largest propane storage vessel (USWG) 1 x 1000 USWG HORIZONTAL
Tank setback coordinates. Indicate placement on the map.	
Front: 18 METRES (N/W)	Right side property line: 66 METRES (S/W)
Rear: 42 METRES (S/E)	Left side property line: 3 METRES (N/E)
GPS coordinates of single largest vessel: 43°16'18.58"N / 80°23'29.62"W	

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Print name of person completing this form. CHARRON ELLIS	Official Title PRESIDENT-SECRETARY
Signature 	Telephone No. 519-442-1552 Date (dd-mmm-yyyy) 16-MAY-2017



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Application for Renewal of Level 1 Propane Licence
Technical Standards and Safety Act
Propane Storage and Handling Regulation

SUBMISSIONS (cont'd)

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

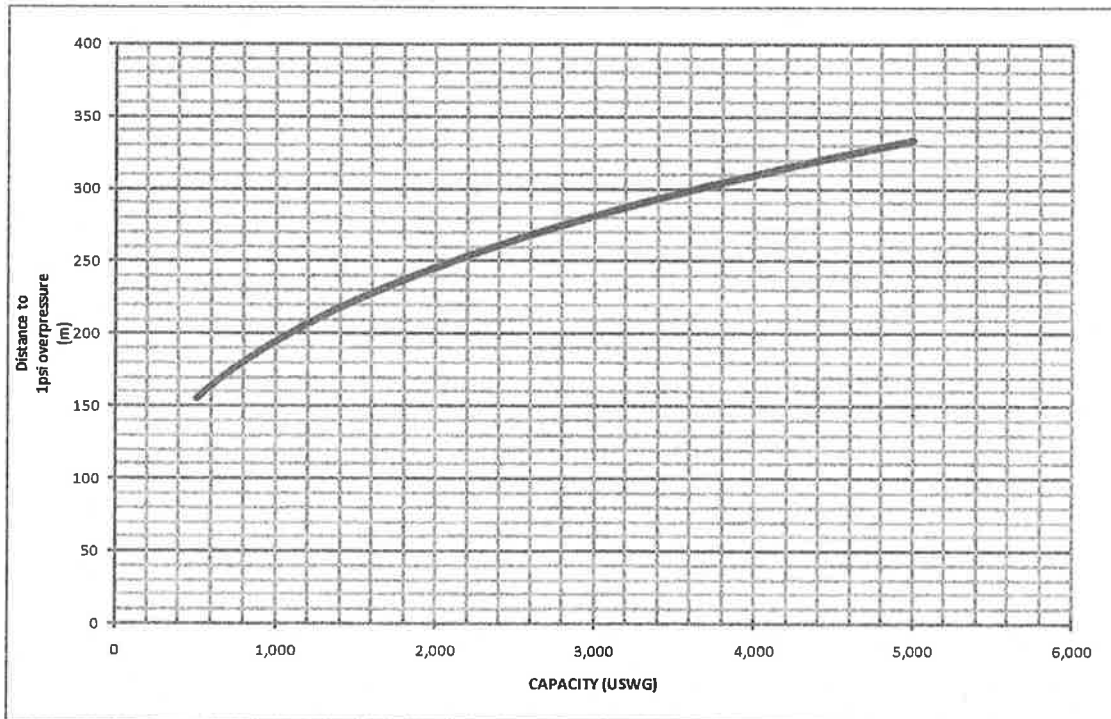
Table 1: Distance Table

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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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>PINEHURST LAKE CONSERVATION AREA</u> Address: <u>PINEHURST ROAD</u> City: <u>AYR</u> Province <u>ONTARIO</u> Postal Code <u>NOB 1E0</u>			X		<u>78</u> m
Residential building units specifically permanent single family dwellings [REDACTED]		X			<u>39</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>PINEHURST VARIETY</u> Address: <u>488 PINEHURST ROAD</u> City: <u>AYR</u> Province <u>ONTARIO</u> Postal Code <u>NOB 1E0</u>			X		<u>10</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>PINEHURST LAKE CONSERVATION AREA</u> Address: <u>PINEHURST ROAD</u> City: <u>AYR</u> Province <u>ONTARIO</u> Postal Code <u>NOB 1E0</u>			X		<u>78</u> m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: <u>N/A</u> Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>N/A</u> Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> m

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

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Print name of person completing this form. <u>CHARRON ELLIS</u>	Official Title <u>PRESIDENT-SECRETARY</u>
Signature 	Telephone No. <u>519-442-1552</u> Date (dd-mmm-yyyy) <u>16-MAY-2017</u>



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Off-site Cylinder and/or Mobile Storage		Capacity stored off-site, in USWG	For Office Use - Party No.
N/A			
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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Print name of person completing this form. CHARRON ELLIS	Official Title PRESIDENT-SECRETARY	
Signature 	Telephone No. 519-442-1552	Date (dd-mmm-yyyy) 16-MAY-2017



PINEHURST VARIETY - AYR

LOCATION: 488 PINEHURST ROAD, R. R. #3, AYR, ON
(CON 6 PT LOT 26) F #488-494

PREPARED: May 15, 2017

TANK CAPACITY: 1000 USWG HORIZONTAL

TANK SETBACKS: Front – 18 Metres (N/W), Right - 66 Metres (S/W)
Rear – 42 Metres (S/E), Left – 3 Metres (N/E)

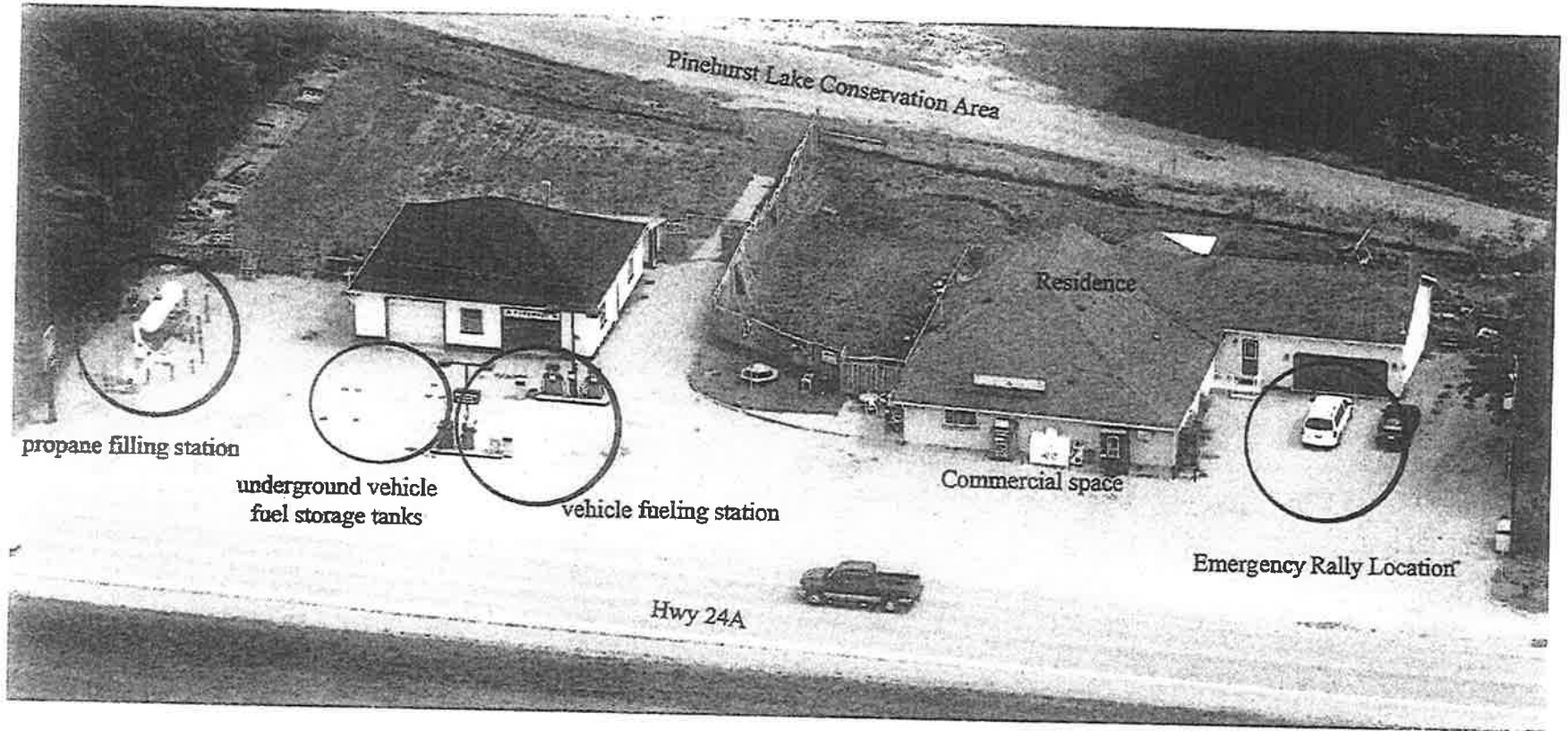
TANK GPS COORDINATES: 43°16'18.58"N / 80°23'29.62"W

RADIUS: 195 Metres

MUNICIPALITY: COUNTY OF BRANT

MUNICIPAL CLERK: Jayne Carman - 519-449-2451

MUNICIPAL ADDRESS: 26 Park Ave, Burford, ON N3E 1A0



Pinehurst Lake Conservation Area

propane filling station

underground vehicle
fuel storage tanks

vehicle fueling station

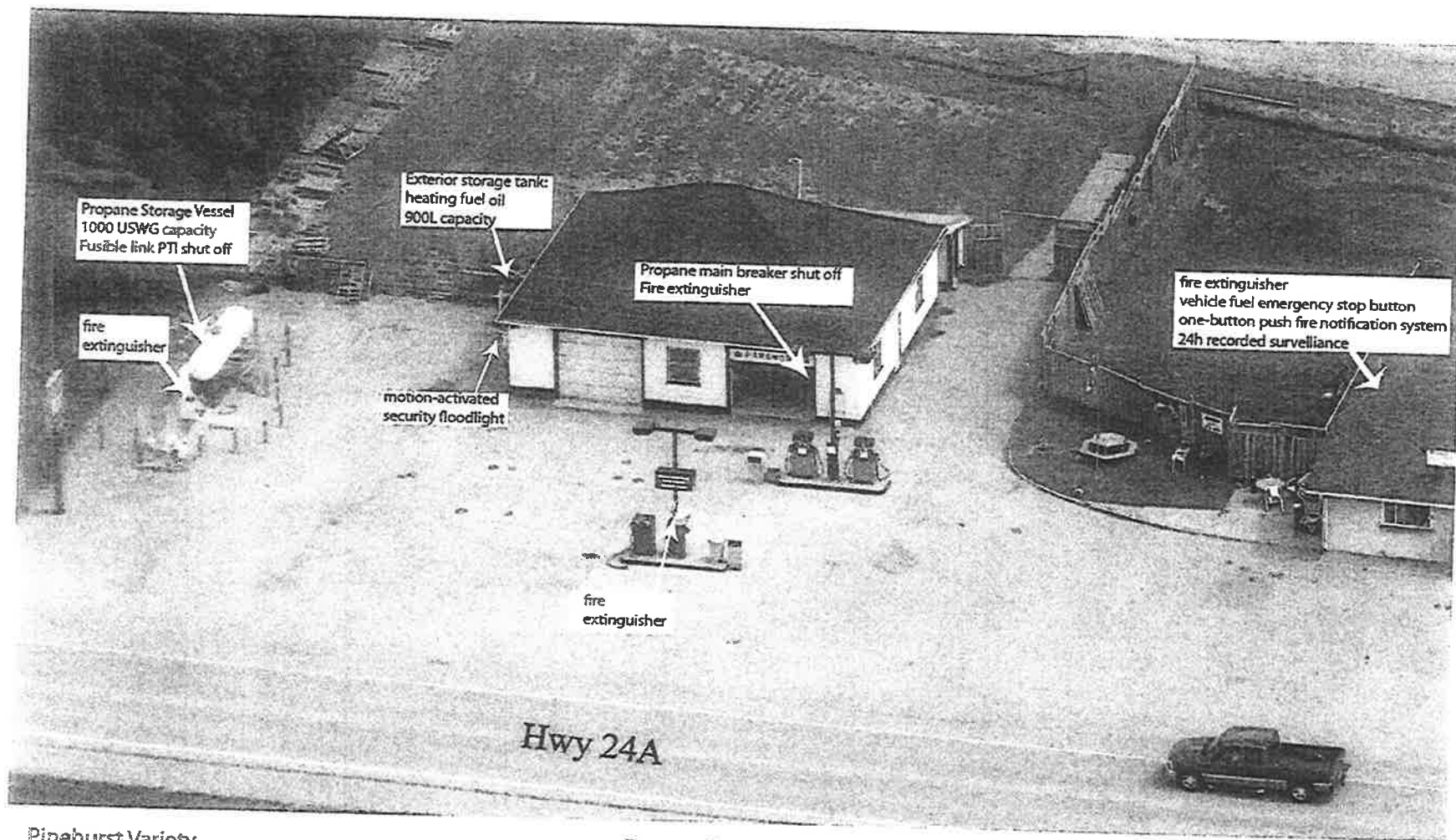
Residence

Commercial space

Emergency Rally Location

Hwy 24A

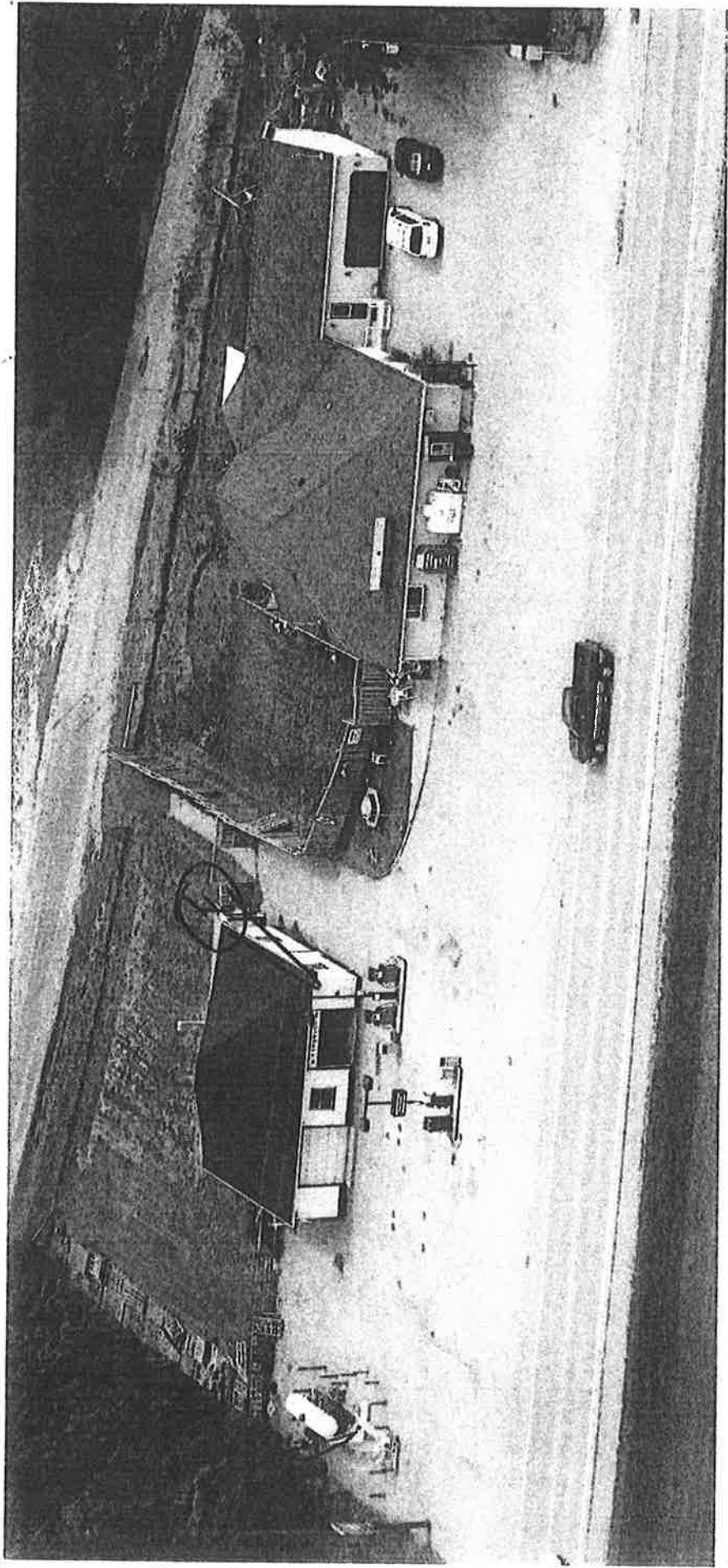
Property Overview
488 Pinehurst Road (Hwy 24A/ RR #3) Ayr, ON
CON 6 PT LOT 26

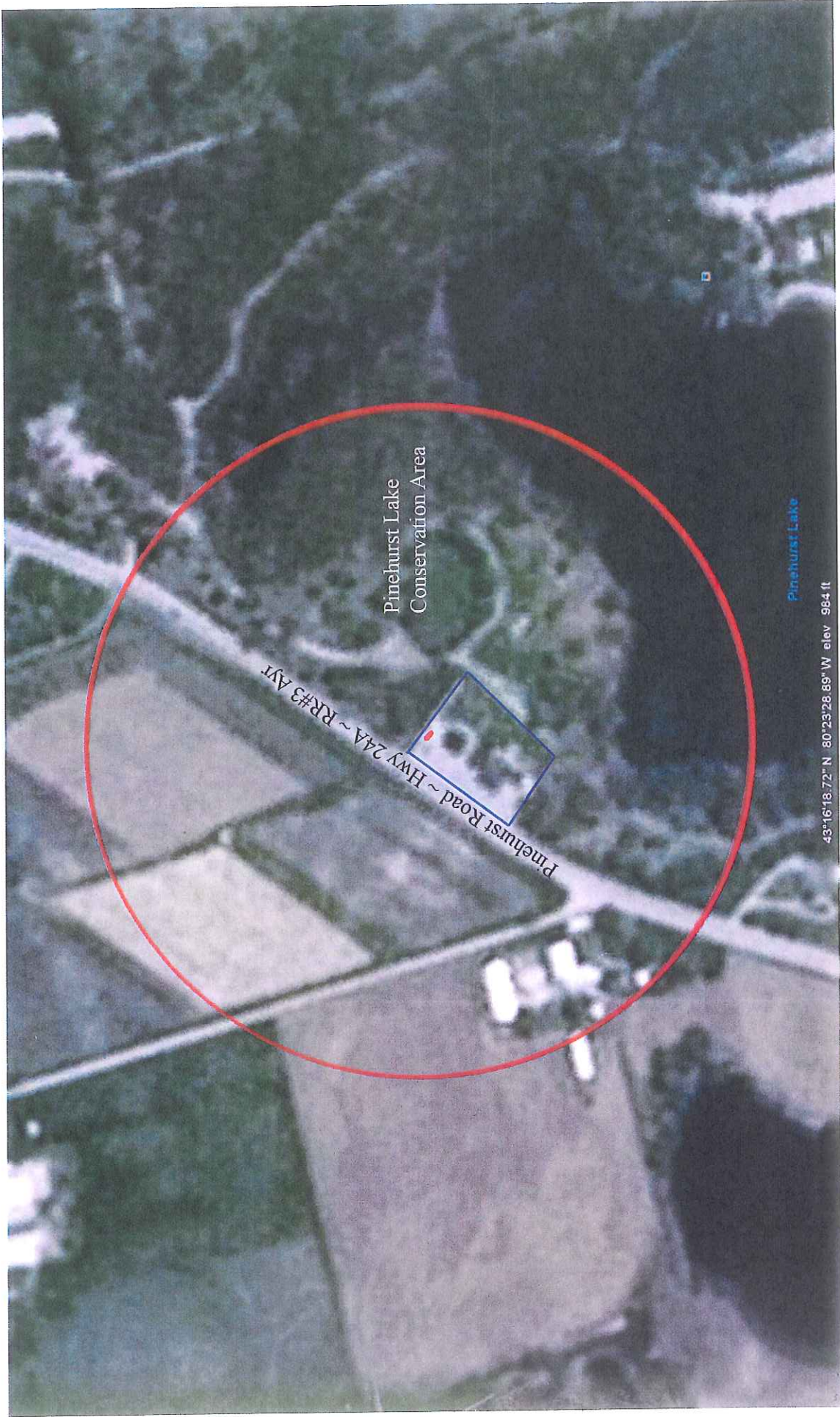


Pinehurst Variety
488 Pinehurst Road
RR#3 Ayr, ON NOB 1E0
CON 6 PT LOT 26
F# 488-494

Propane Storage Tank, property line setbacks:
Front (road) 18m / 58'
Right edge 66m / 210'
Left edge 3 m / 10'
Rear 42m / 124'

Map prepared 11-10-2011





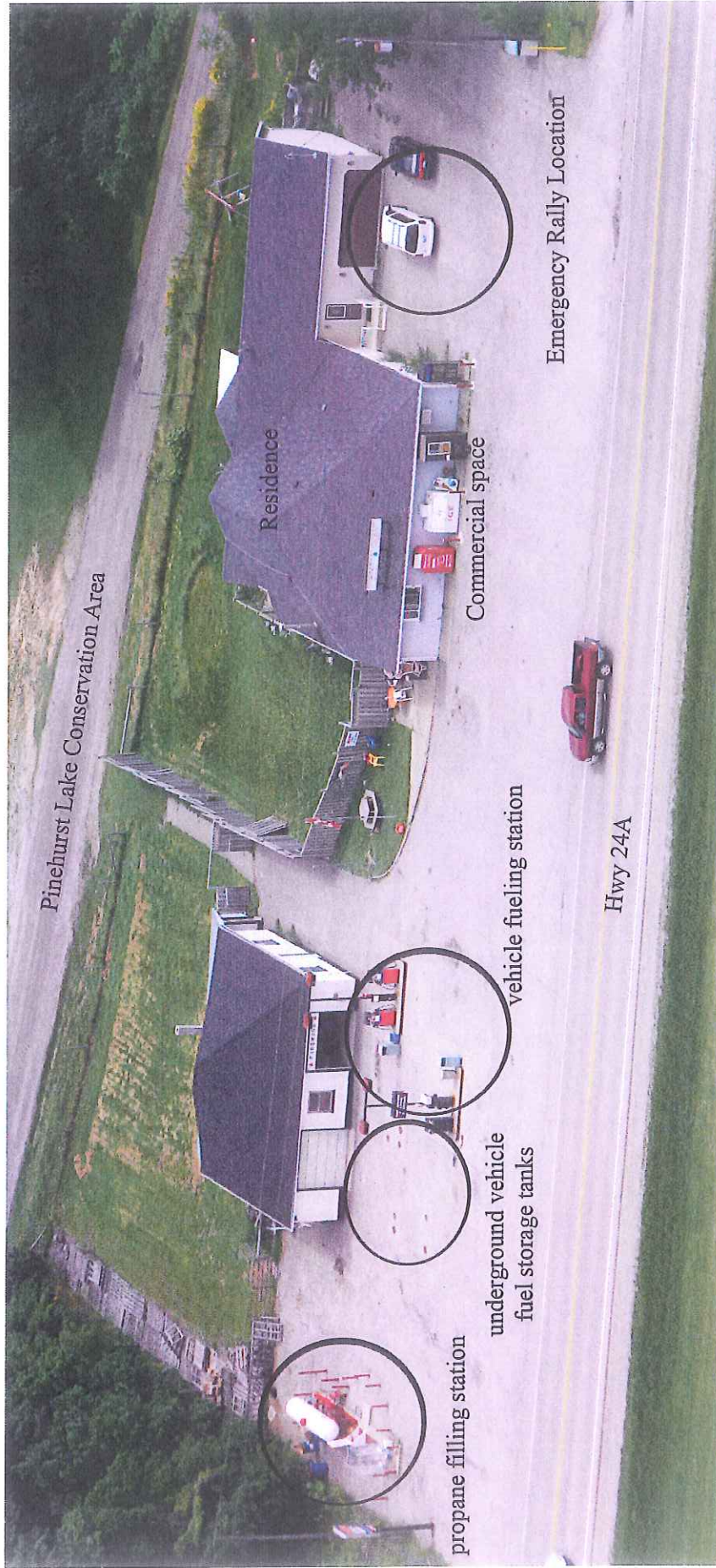
- 195m radius, distance to Ipsi overpressure
- Property Line
- Location of Propane storage vessel
- 43o 16' 18.58" N 80o 23' 29.62" W
- Propane Storage Vessel: 1000 USWG

Municipal Contact Information:

488 Pinehurst Road
 RR#3 Ayr, ON
 CON 6 PT LOT 26
 F# 488-494
 County of Brant

Jayne Carman
 Clerk, County of Brant
 26 Park Ave
 Burford, ON N0E 1A0
 519-449-2451
 519-449-1380 fax

Map prepared 11-10-2011



Pinehurst Lake Conservation Area

Residence

Commercial space

Emergency Rally Location

vehicle fueling station

propane filling station

underground vehicle fuel storage tanks

Hwy 24A

Property Overview
488 Pinehurst Road (Hwy 24A/ RR #3) Ayr, ON
CON 6 PT LOT 26



Propane Storage Vessel
1000 USWG capacity
Fusible link PTI shut off

fire
extinguisher

Exterior storage tank:
heating fuel oil
900L capacity

motion-activated
security floodlight

Propane main breaker shut off
Fire extinguisher

fire extinguisher
vehicle fuel emergency stop button
one-button push fire notification system
24h recorded surveillance

fire
extinguisher

Hwy 24A

Propane Storage Tank, property line setbacks:
Front (road) 18m / 58'
Right edge 66m / 210'
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Rear 42m / 124'

Pinehurst Variety
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Map prepared 11-10-2011