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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 a USWG of portable propane storage capacity on s 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 N/A - New Facility Check applicable type of propane operations. ✓ Motor Fill Cylinder 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. Corporation No. Company Name A Hammond Transportation Ltd. Operator Name (if different from above) Hammond Transportation Bracebridge Fax No. E-mail 705-645-5431 705-645-3629 ghammond@hammondtransportation.com Street Name / 911 Number / Address, if applicable Street No. 450 **Ecclestone Drive** Postal Code Province Town / City or Township / County Ontario P1L 1T7 Bracebridge Mailing address if different from above. Street Name / 911 Number / Address, if applicable Street No. C P.O. Box 441 Ecclestone Drive Postal Code Town / City or Township / County Province P1L 1T7 Bracebridge Ontario Information on Container Refill Centre or Filling Plant Location of facility Street Name / 911 Number / Address, if applicable Street No. Nearest Major Intersection D 450 Ecclestone Drive and Keith Road Ecclestone Drive Postal Code Town / City or Township / County Province P1L 1T7 Ontario Bracebridge Name of Licence Holder Hammond Transportation Ltd. ROT type Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). 100-02 Municipality (or municipalities if the facility or its hazard distance touches multiple borders) Town of Bracebridge 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.

Printname	Signature	Date (dd-mmm-yyyy)
lame of Licence Holder Hammond Transportation Ltd.	Certil	29-03-2016
ame of Senior Management person as defined in the		2
Regulation holding the Record of Training Greg Hammond		

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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act

Propane Storage and Handling Regulation

SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established. 2016	Indicate the year of any significant N/A	modifications, as defined in s.1, O.Reg 211/01, since establishment.
Identify the psig rating and serial number for ea	ch fixed propane storage tank on si	te.
PSIG	Serial Number	
Tank1: 250	271.1	
Tank 2:		
Tank3:		
Enter capacity of propane in USWG, fixed, port	able, and mobile, and provide deta	iled 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: 5000 USWG	Portable: 0 USWG	Mobile: 0 USWG

Name of person completing this form (please print) Greg Hammond	Official Title Secretary Treasurer	
Signature	Telephone No. 705-645-5431	Date (dd-mmm-yyyy) 29-03-2016

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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act

Propane Storage and Handling Regulation

SECTION A: GENERAL INFORMATION (cont'd)

			Activ	vity Information		To .	
Name of Propane Supplier(s) For Office Use - Party No.					Party No.		
EDPRO Energy Gr	oup Inc.						
Street No.	Street No. Street Name / 911 Number / Address, if applicable						
5	Cuddy Bl						
Town / City or T London	ownship /	Country			Province Ontario		Postal Code N5V 3Y3
Telephone No.	-	Fax No.	Contact Na	me			
519-690-0000		519-690-1948	Joe Erskine				
E-mail							
jerskine@edproen	ergy.com						
Name of Propar EDPRO Energy G		orter. If same as above, ple	ase check bo	x. 🔽		For Office Use -	Party No.
Street No. 5	Street N Cuddy Bl	ame / 911 Number / Address, vd	if applicable				
Town / City or Township / Country London			Province Ontario		Postal Code N5V 3Y3		
Telephone No. Fax No. Contact Name 519-690-0000 519-690-1948 Joe Erskine			me				
E-mail jerskine@edproer	nergy.com						
	0					Acres de para de la companya del companya del companya de la compa	
Off-site Cylinder and/or Mobile Storage None			Capacity stored off-site	, in USWG	For Office Use -	Party No.	
Street No.	Street N	ame / 911 Number / Address,	if applicable				
Town / City or T	ownship /	Country			Province		Postal Code
Telephone No.	3	Fax No.	Contact Na	me			
Note: Customer s	torage is r	not considered off-site storag	e.				

Name of person completing this form (please print) Greg Hammond	Official Title Secretary Treasurer	
Signature	Telephone No. 705-645-5431	Date (dd-mmm-yyyy) 29-03-2016



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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

SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN

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

Description of the maximum volume, types and storage location of other hazardous materials on site, if any. Underground Diesel Fuel Storage 2000 gal, underground gasoline storage 1000 gal
Antifreeze coolant - less than 40 gallons
Consumer quantities of items such as spray paint, cleaners etc.
Waste oil tank - 800 gallon capacity
Description of fire and emergency equipment indicated on facility site map. Fire extinguisher 20 lb.
Emergency shut off X (2)
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.
Internal Safety Control (ISC) valves are equipped with nitrogen charged actuators
Fusible plug on nitrogen holding open ICS valve causes liquid outlet to automatically close in event of fire
Normally closed solenoid on automotive fill meter before hose closes by emergency shut off or when not in use
Maintenance and testing schedule for fire protection controls and devices. Fire extinguisher is inspected by outside company annually
Comprehensive dispenser inspection conducted annually by G2-LP certificate holder or higher
Facility inspection by TSSA completed annually

Name of person completing this form (please print) Greg Hammond	Official Title Secretary Treasurer	
Signature	Telephone No. 705-645-5431	Date (dd-mmm-yyyy) 29-03-2016



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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 Perso	n	\neg
Name Greg Hammond		For Office Use - Party No.	Name Derek Hammond		For Office Use - Party No.
Official Title Secretary Treasurer		Official Title Bracebridge Shop Manager			
Telephone No. 705-645-5431	Fax No. 705-645-36	529	Cell No. 705-706-0342	Fax No. 705-645-3629	
E-mail ghammond@hammondtransportation.cc	om		E-mail dhammond@hammondtransportation.co	com	
Role and responsibilities in emergency	1		Role and responsibilities in emergen	су	
Represents license holder on interaction	with author	rities and ensures	Site liaison for enacting internal and external emergency procedures		
regulations are met and adhered to.			communication with emergency respon	nders, suppliers a	nd subcontractors
2. Facility Contact Personnel - Alt	ernate Co	ntact	6. Name of Facility Manager		J
Name Derek Hammond		For Office Use - Party No.	Name Derek Hammond		For Office Use - Party No.
Official Title Bracebridge Shop Manager			Official Title Bracebridge Shop Manager		
Telephone No. 705-645-5431	Fax No. 705-645-3	629	Telephone No. 705-645-5431	Fax No. 705-645-36293	
E-mail dhammondtransportation.cc	om		E-mail dhammond@hammondtransportation.c	com	
Role and responsibilities in emergency	,		Role and responsibilities in emergency		
Same as key contact if other unavailable	9		Ensure approved procedures are followed		
			Ensure internal emergency procedures are current and employees aware		
3. Local Fire Services - Key Contact	et		7. Propane Supplier Key Contact I	Person	
Name Mike Peake		For Office Use - Party No.	Name Joe Erskine		For Office Use - Party No.
Official Title Fire Prevention Officer	E-mail fpo@brace	ebridgefire.com	Official Title President of EDPRO Energy Group	E-mail jerskine@edpro	penergy.com
Telephone No. 705-645-8258 ext 203	Fax No. 705-646-2	121	Telephone No. 519-690-0000	Fax No.	
Role and responsibilities in emergency Review and provide guidance on fire safety, emergency response and preparedness. Interface for invitation to conduct annual site review		Role and responsibilities in emergency Technical assistance, dispatch of service technicians and specialized equipment. Activate Emergency Response Assistance Plan by LPGERC			
Fire Services Address 16 Dominion Street, Bracebridge, ON, P1L 2B5		Propane Supplier Address 5 Cuddy Blvd, London, ON, N5V 3Y3			
4. Local Fire Services - Alternate C	ontact		8. Municipal Contact		
Name Chief Murray Medley		For Office Use - Party No.	Name Cheryl Kelley		For Office Use - Party No.
Official Title Fire Chief	E-mail fpo@brace	ebridgefire.com	Official Title Director of Planning and Development		
Telephone No. 705-645-8258 ext 202	Fax No. 705-646-2	121	Telephone No. Fax No. 705-645-6319 ext 253 705-645-4209		
Role and responsibilities in emergency Same as Fire Services - Key Contact		E-mail ckelley@bracebridge.ca			
Fire Services Address 16 Dominion Street, Bracebridge, ON, P1L 2B5		Municipality Name and Address Town of Bracebridge, 1000 Taylor Court, Bracebridge, ON, P1L 1R6			

Name of person completing this form (please print)	Official Title	Official Title		
Greg Hammond	Secretary Treasurer			
Signature	Telephone No.	Date (dd-mmm-yyyy)		
	705-645-5431	29-03-2016		



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Technical Standards and Safety Act

Propane Storage and Handling Regulation

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. Internal valves are equipped with nitrogen charged actuators with fusible plugs
Limited scope of filling, Only Hammond owned vehicles are filled; no pilot equipped vehicles (motor homes, catering trucks) will refuel
Additional emergency stop located outside of the immediate hazard area
Power turned off when unattended

Name of person completing this form (please print)	Official Title	
Greg Hammond	Secretary Treasurer	
Signature	Telephone No.	Date (dd-mmm-yyyy)
	705-645-5431	29-03-2016

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Propane Storage and Handling Regulation

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

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

Training on Emergency Res	ponse Plan and Procedures provided to facility key contacts.
Training Date (dd-mmm-yyyy)	Print Name of Training Provider: EDPRO Energy Group Inc.
Prior to activation	Print Name of Instructor: Robert Allen - PTI License T2164
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 Em	ergency Management Procedures provided to staff.
Training Date (dd-mmm-yyyy) Print Name of Training Provider: EDPRO Energy Group Inc.	
Prior to activation	Print Name of Instructor: Robert Allen - PTI License T2164
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 pro	vided to certificate holders / persons with Records of Training.
Training Date (dd-mmm-yyyy)	Print Name of Training Provider: EDPRO Energy Group Inc.
Prior to activation	Print Name of Instructor: Robert Allen - PTI License T2164
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

Name of person completing this form (please print)	Official Title	
Greg Hammond	Secretary Treasurer	
Signature	Telephone No. 705-645-5431	Date (dd-mmm-yyyy) 29-03-2016



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Propane Storage and Handling Regulation

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

4. Emergency Training Plan for Coming Year

Training on Emergency Respo	onse Plan and Procedures provided to facility key contacts.
Target Date (dd-mmm-yyyy)	Print Name of Training Provider: EDPRO Energy Group Inc.
To be established at activation	Print Name of Instructor: Robert Allen - PTI License T2164
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
Training on the facility's Eme	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training on the facility's Emer	gency Management Procedures provided to staff.
Target Date (dd-mmm-yyyy)	Print Name of Training Provider: EDPRO Energy Group Inc.
To be established at activation	Print Name of Instructor: Robert Allen - PTI License T2164
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 provi	ded to certificate holders / persons with Records of Training.
Target Date (dd-mmm-yyyy)	Print Name of Training Provider: EDPRO Energy Group Inc.
To be established at activation	Print Name of Instructor: Robert Allen - PTI License T2164
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

Name of person completing this form (please print) Greg Hammond	Official Title Secretary Treasurer	
Signature	Telephone No. 705-645-5431	Date (dd-mmm-yyyy) 29-03-2016



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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.

5. Emergency Response Communications Plan

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

The operator will contact the Emergency Fire Services by calling 9-1-1 and initiate facility evacuation

Hammond Transportation will oversee localized evacuation of employees, customers and any others to the identified evacuation point

In the event of a fire/significant propane leak the operator will activate the Emergency Stop control on the dispenser and/or vehicle

Facility Contact will contact propane Supplier Key Contact who will activate ERAP (if necessary) and report to TSSA through Spills Action Centre

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 operator, after activating the Emergency Stop controls will orally notify any other employees or visitors on-site to evacuate then call 9-1-1

All employees and visitors (customers) will immediately vacate the building and premises and meet at the front of the main office entrance in the parking lot

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).
All employees instructed to and authorized to activate emergency response authorities by calling 9-1-1 upon occurrence of fire and/or significant leak
Continued flow of information to be provided as it occurs by person of responsibility to the fire services
In the event of an emergency, the site manager is required to be present to provide updated information
Describe provisions for fire department entry when there are no operations or staffing at the propane site. Dispenser and facility is accessible to fire department during normal business hours
A fire department key lock box is secured to the main yard gate fence
Describe how the licence holder will ensure continual flow of updated information to authorities.
Fire services are formally invited for a full site review on an annual basis with supplementary site access for training or orientation as requested
TSSA conducts a comprehensive inspection annually. Site specific emergency procedures are reviewed annually with all employees
How long will it take the facility liaison person to respond to the site.
24 Hour Facility Contact Person will be able to respond to site in approximately 8 minutes

Name of person completing Greg Hammond	g this form (please print	Official Title Secretary Treasurer	
Signature	Conf	Telephone No. 705-645-5431	Date (dd-mmm-yyyy) 29-03-2016



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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act

Propane Storage and Handling Regulation

Date (dd-mmm-yyyy)

29-03-2016

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 Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)? Is there adequate night lighting at the site? 2 Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials? 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? Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders? Are weighing systems validated for accuracy? Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, 7. purged and other hazardous materials)? Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) Is the schedule of maintenance and testing activities retained on site? 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 V Is a pressurized water system available at the propane facility site? 1. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location? What is the unobstructed distance to the closest water supply that could be used for 68m firefighting activities? (distance in metres only) What is the unobstructed distance to the closest approved water supply with year 420m round access if there are no hydrants? (distance in metres only) 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. Official Title Name of person completing this form (please print) Secretary Treasurer Greg Hammond

Telephone No.

705-645-5431

Signature



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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)

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

8. Licence holder and to	cal Fire Services Review		
To be completed by the Local Fire Services Has the local fire service had an opportunity to review the Emergency R	Yes esponse and Preparedness Plan?	No D	
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-yy	ν)	
5			
LOCAL FIR	E SERVICES		
The undersigned has reviewed Section B of the Risk and Safety N	Management Plan Fire Services.		
Print name Local Fire Services Name Michael Peake	Signature Michael Peoche	Date (dd-mmm-yyyy) March 3/2.046	

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) Greg Hammond	Official Title Secretary Treasurer	
Signature	Telephone No. 705-645-5431	Date (dd-mmm-yyyy) 29-02-2016

FS 09195 (10/14) Page 11 of 15



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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:

- The storage location of fixed, portable, and mobile vessels.
- 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.
- 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.
- 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.
- GPS co-ordinates of the single largest vessel.
- 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) 18-feb-2016		Capacity of single largest pro	Capacity of single largest propane storage vessel (USWG)				
Tank setback coordinates. Front:	Indicate placement 72.3m	nt on the map. Right side property line:	45.8m				
	118.6m	Left side property line:	92.9m				
GPS coordinates of single	largest vessel:	45°1'1.30"N, 79°18'55.66"W					

Name of person completing this Greg Hammond	s form (please print)	 Official Title Secretary Treasurer	
Signature	Ly	Telephone No. 705-645-5431	Date (dd-mmm-yyyy) 29-03-2016

Propane Storage and Handling Regulation

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:

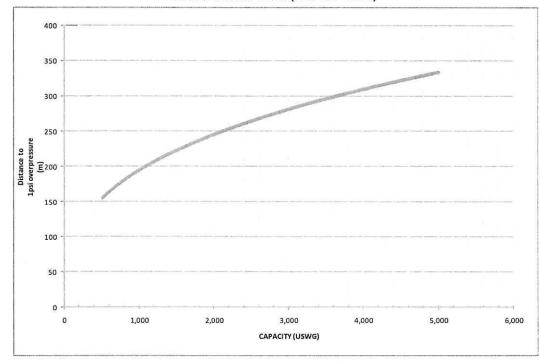
Density of Propane is 0.5033 kg per litre @ 15 C

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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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

	uildings 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	
	AND Name and A	tudiess of Closest Bi	unding of Feature	0	1	2-10	11+	Feature
Industrial	buildings or parks or golf courses Muskoka Transport Ltd.							98
Address:	456 Ecclestone Drive					X		m
City:		Province ON	Postal Code P1L 1R1					
Residenti	al building units specifically permanen	t single family dwellings	s, condominiums, and apartments.					
Name:								288 m
Address:						X		
City:								
Commerci Name:	ial building units specifically retail, res Multi-Tenant Commercial (Mall)	taurants, entertainment,	theatres, and sporting complexes.					67
Address:	440 Ecclestone Drive					X	×	m
City:		Province ON	Postal Code P1L 1Z6	-				
Commerc	ial building units – continuous occupar	ncy specifically hotels, ca	ampgrounds, and resorts.					
Name:								
Address:				X				m
City:			Postal Code					
Sensitive	institutions specifically hospitals, school	ols and day cares, nursing	ng and retirement homes, mental health					
	s, and prisons.							m
institution				175750				
				X		l		
Name:				X				
Name:				X				
Name: Address: City:		Province	Postal Code	X				
Name: Address: City:		Provinceambulance stations, and	Postal Code					
Name: Address: City: Emergend Name:	cy responders specifically fire stations,	Provinceambulance stations, and	Postal Code	×				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

Thereby declare that the information thave given here is true and complete.					
Name of person completing this form (please print)			Official Title	Official Title	
Greg Hammond			Secretary Treasurer		
Signature			Telephone No.	Date (dd-mmm-yyyy)	
	21/		705-645-5431	29-03-2016	



 Technical
 14th Floor - Centre Tower

 Standards and
 3300 Bloor Street West

 Safety Authority
 Toronto Ontario M8X 2X4

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Level 1 Risk and Safety Management Plan (RSMP) Technical Standards and Safety Act

Propane Storage and Handling Regulation

WORKSHEET

Portable Storage Additional Information Worksheet

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

Tanks Stored On-site Not Connected for Use

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

Total Cylinder Capacity	0
Total Tank Capacity	0
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	0