USWG of portable propane storage capacity on site.

10.00	M	-RiDA OF	o fully complete this form also statement may rest der the <i>Technical Standa</i>	n may result in rejection. It in a fine or prosecution ards and Safety Act					
	ce Number	New Ap	plication						
Check	applicable type	of propar	e operations.						
	✓ Cylinde	ı۲	✓ Motor Fill		ra/Keylock				
Submit	along with this	complete	d application a Facility Site P	lan and a Map of the Surrounding	Area.				
-		-							
			SE	CTION A: GENERA	LINFOF	RMATION			
The	Undersign	ed app	lies to TSSA for a	review for an RSMP u	nder Onta	rio's Technical	Standards	and Safety Act,	
			Handling Regulat	IDII.			Ontario (Corporation No., if applicable) I
	Company Nan								
A	1663059 On		ent from above)						
	Royal RV Ce		ing normabovo)						
0	-		Fax No.	, E-mail					
	Telephone No. 613-933-17		613-933-1778	ronatroyalrv@xplomet.co	m				
В	Street No.		Street Name / 911 Number	/ Address, if applicable					
	19895		Highway #2					Postal Code	1
	Town / City o	r Township	o / County		1	Province		KOC 2EO	1
·	Summersto	wn				ON ·			
c	Malling add Streat No.	lress if c	different from above. Street Name / 911 Number	r / Address, if applicable					
	Town / City or	Township	/ County			Province		Postal Code	
In	formation o	n Conta	ainer Refill Centre or	Filling Plant					
	Location of	facility.	Street Name / 911 Number			Nearest Major Intersec	tion	2	5
D	StreetNo		i .	/ Address; ii applicazoro	1	Highway #2 and Fras			- 1
	19895		Highway #2			Province		Postal Code	
	Town / City or	r Township	/ County		1	ON		K0C 2E0	1
	Summersto	WΠ			1	ON			
=						-			2
	Name of Licer								
	Ronald Roy	- Owner/	President	Islan halding the Boson	rd of Training	(BOT).	ROT ty	ре	
	1		igement person as defined t	n the regulation holding the Recor	Q Or Tradining	Q10.3	1 100-01	, 100-04, 200-02	
	Ronald Roy				andare)				
	Municipality	(or munici	palities if the facility or its ha	azard distance touches multiple b	uidei3)				
	Township of South Glengarry								
	Hours of operation.								

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Customer Service: 1.877.682.8772

Level 1 Risk and Safety Management Plan (RSMP)

Technical Standards and Safety Act Propane Storage and Handling Regulation

	SECTION A: GENERAL INFORMATION (cont'd)			
ndicate the year the facility was established.	Indicate the year of any significant modifications, as defined in s.1. O.Reg 211/01, since establishment. N/A - new installation			
dentify the psig rating and serial number for ea	ach fixed propane storage tank on site.			
SIG	Serial Number			
Tank1: 250	5-524467			
Tank2				
Tank3:				
Tanko.	detailed inventory that includes the number of tank/vessel for			
inter capacity of propane in USWG, fixed, po-	rtable, and mobile, and provide detailed inventory that includes the number of tank/vessel for			
each type (fixed, portable, and mobile) and the	e capacity of each tank/vessel, on a separate document.			
Fixed: 1000 USWG	Portable: 540 USWG Mobile: 0 USWG			

Name of person completing this form (please print)	Official Title President	
Ronald Roy Signature	Telephone No.	Date (dd-mm-yyyy) 13/28/2013
(terelal ().	613-577-4031	17/00/6



14th Floor - Centre Tower 3300 Bloor Street West Standards and Toronto Ontario M8X 2X4
Safety Authority 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 A: GENERAL INFORMATION (cont'd)

		Activity Inform	ation	
				190 - 1
Name of Propa	ne Supplier(s)			
Superior Propane				
Street No.	Street Name / 911 Number / Add	ress, if applicable		
251	Woodlawn Road West, Unit 217			
Town / City or Guelph	Township / Country		Province Ontario	Postal Code N1H 8J1
Telephone No.	Fax No.	Contact Name		
519-829-9845	519-836-7766	Bruce Graham - Operat	ions Manager, Ontario Region,	
E-mail		9		
grahamb@super	iorpropane.com			
an a constant of the constant				
Name of Propa	ne Transporter. If same as above	re, please check box.	(20)	
	e - Ste. Rose (Casselman)		/#	
Street No.	Street Name / 911 Number / Add	dress, if applicable		9
	Township / Country	8	Province Ontario	Postal Code KOA 1MO
Telephone No. 613-314-8003	Fax No. N/A	Contact Name Heather Ross - Market	Manager - Greater Ottawa and Per	nbroke
E-mail				
rosshe@superio	rpropana.com	532		
Off-site Cylind	er and/or Mobile Storage	Capacit	y stored off-site, in USWG	r Office Use - Party No
	, Street Name / 911 Number / Add	tress if applicable		A CONTRACTOR OF THE PARTY OF TH
Street No.	Street Name / 511 Number / No.	arcos, ir approacio		
Town / City or	Township / Country		Province	Postal Code
Telephone No	Fax No.	Contact Name		91
Note: Customer	storage is not considered off-site	storage.		

Name of person completing this form (please print) Ronald Roy	Official Title President	
Signature .	Telephone No. 613-577-4031	Date (dd-mm-yyyy) 13/09/2013



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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

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. Clear Diesel Tank - maximum 325 gallons - located beside the west wall of the shop.
Coloured Diesel Tank - maximum 125 gallons - located beside the west wall of the shop.
Gasoline Cans - maximum 6 x 5 gallons - exterior wall of the storage building.
Description of fire and emergency equipment indicated on facility site map. Fire extinguishers - 3 x ABC - located at the propane cylinder refill scale, on post at the propane auto refill station, and inside the shop building.
Les automotic shut off devices fusible links. étc.)
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 ISC valve - isolation valve between the tank and the downstream propane dispensing equipment. Emergency stop push button - mounted on shop wall nearest the propane tank. This shuts down the pump and closes a solenoid valve upstream of hoses.
2. Emergency stop push button - mounted on shop wall nearest the propagation and closes a splenoid valve upstream of hoses.
3. Manual Safety Shut Off - located under the storage tank. This shuts down the pump and closes a solenoid valve upstream of hoses. This shuts down the pump and closes a solenoid valve upstream of hoses.
3 Power supply breaker inside the office building. This cuts all power to the propane system - shuts down pump; closes solanoid valve
Maintenance and testing schedule for fire protection controls and devices. Maintenance and testing is undertaken by Suparior Propane according to Superior Propane's Maintenance Standard. Schedule for key equipment is:
Pumps (Pump every 3 months; Pump Motor: check belts monthly; grease motor every 6 months)
2. ISC Valves (test for closure every 6 months)
Storage tank Relief Valves - inspect every 2 years; replacement schedule as per provincial regulations.

Name of person completing this form (please print) Ronald Roy	Official Title President		
Signature Jones 1	Telephone No. 613-577-4031	Date (co-mm-yyyy)	





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Technical Standards and Safety Act Propane Storage and Handling Regulation

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

ROYAL RV CENTRE

Contacts for Emergency Response

			5. Facility 24-Hour Contact Perso	on		
1. Facility Contact Personnel - Key Contact Name For Office Use - Party No.			Name	-	For Office Use - Party No.	
Name Ronald Roy			Ronald Roy			
Official Title			Official Title President			
Eav No		Cell No. Fax No. 613-577-4031 613-931-2987				
E-mail Ron@RoyalRV.com			E-mail Ron@RoyalRV.com			
Role and responsibilities in emergence	y		Role and responsibilities in emergency			
Co-ordinate site response			Co-ordinaté sité response			
2. Facility Contact Personnel - Al	ternate Con	tact	6. Name of Facility Manager		Te-Office Use Party No.	
Name		For Office Use - Party No.	Name Ronald Roy		For Office Use - Party No.	
Darren Desrosier Official Title			Official Title		•	
Mechanic		N/S	President	L Foy No	*	
Telephone No. 613-551-5844	Fax No. 613-931-28	97	Telephone No. 613-933-1777	Fax No. 613-931-2897		
E-mail			E-mail			
Ron@RoyalRV.com			Ron@RoyalRV.com Role and responsibilities in emergency			
Role and responsibilities in emergence			Co-ordinate site response	1000 10 No. 10		
Co-ordinate site response if Key Conta	ct is unavaila	ble				
3. Local Fire Services - Key Conta	ict		7. Propane Supplier Key Contact	Person	For Office Use - Party No.	
Name		Por Office Use - Party No.	Name Superior Propane		For Office Ose - Party No.	
Harold Harvey	T= .7		Official Title	E-mail		
Official Title Fire Chief	E-mail hkharvey@	southglengarry.com	HOTLINE	N/A		
Telephone No.	Fax No.		Telephone No. 1-877-873-7467	Fax No. N/A		
c 613-551-6915	613-347-34	11	D. I. and the specialities in omergency			
Role and responsibilities in emergenc Co-ordinate/advise on Fire Service respo	cy nse. Liaise wit	h police.	Identify and dispatch Superior Propage and or LPERGC emergency response personnel as required.			
Fig. Consises Address			Propage Supplier Address			
Fire Services Address South Glengarry Fire Department Stn 4.	Lancaster, 221	Military Road, Lancaster		West, Unit 217, Gi	uelph, ON N1H BJ1	
4. Local Fire Services - Alternate	Contact)	8. Municipal Contact			
Name Michael Leger		For Office Use - Party No.	Name Joanne Haley	2 10 to 10 t	2 4	
Official Title Deputy Chief	Official Title E-mail		Official Title General Manager - Community Service	ces		
Telephone No. 613-347-1166.	Fax No. 613-347-34	.11	Telephone No. 613-347-1166	Fax No. 613-347-3411		
Bolo and reconsibilities in emergen	cy		E-mail			
Alternate - Co-ordinate/advise on Fire Service Response. Liaise with police.			info@southglengarry.com			
Fire Services Address			Municipality Name and Address			
South Glengarry Fire Department Stn	4, 221 Militar	y Road, Lancaster, ON	Township of South Glengarry, 6 Oak Street, Lancaster, ON K0C 1N0			
	SAMINERS CO.					

MT SWATER COLOR METAL COLOR CO	Water transfer of the second s	
Name of person completing this form (please print)	Official Title	
Ronald Roy	President	
Signature	Telephone No.	Date (dd-mm-yyyy)
much Coy	613-577-4031	18/03/2013



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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.	
Describe any other measures in place at the facility that observe the apstream of dispensing hoses. Emergency Shut Off push button to shut down pump and close solenoid valve upstream of dispensing hoses.	
	!
	======

Name of person completing this form (please print) Ronald Roy	Official Title President	
Signature 101	Telephone No. 613-577-4031	2810 (dd-mm-yyyy) 83/88/20/3



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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 Res	sponse Plan and Procedures provided to facility key contacts.		
Training Date (dd-mm-yyyy)	Print Name of Training Provider:		
N/A New Facility	Print Name of Instructor:		
Training Date (do-mm-yyyy)	Print Name of Training Provider:		
	Print Name of Instructor:		
Training Date (do-mm-yyyy)	Print Name of Training Provider:		
	Print Name of Instructor:		
Training on the facility's Em	ergency Management Procedures provided to staff.		
Training Date (cd-mm-yyyy)	Print Name of Training Provider:		
N/A New Facility	Print Name of Instructor:		
Training Date (dd-mm-yyyy)	Print Name of Training Provider:		
E%	Print Name of Instructor:		
Training Date (dd-mm-yyyy)	Print Name of Training Provider:		
	Print Name of Instructor.		
On-site specific training pro	ovided to certificate holders / persons with Records of Training.		
Training Date (dd-mm-yyyy)	Print Name of Training Provider: FSN Training - PTI 100-01, 100-04, and 200-02		
27-01-2011	Print Name of Instructor: Unknown		
Training Date (dd-mm-yyyy)	Print Name of Training Provider:		
×.	Print Name of Instructor:		
Training Date (dd-mm-yyyy)	Print Name of Training Provider:		
ran more co d it in diner the Medicity	Print Name of Instructor:		

Name of person completing this form (please print)	Official Title	
Ronald Roy	President	
Signature	Telephonė No.	Date (dd-mm-yyyy)
(Contes (by	513-577-4031	11/01/1010



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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)

4. Emergency Training Plan for Coming Year

Training on Emergency Resp	onse Plan and Procedures provided to facility key contacts.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: PTI 911-02 - a site specific propane emergency response training course
On Start-Up	Print Name of Instructor: Self - directed training program
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
July 2013	Print Name of Instructor:
Target Date (cd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training on the facility's Eme	rgency Management Procedures provided to staff.
Target Date (dd-mm-yyvy)	Print Name of Training Provider: Key Site Contact to train staff
On Start-Up	Print Name of Instructor: Ronald Roy
Target Date (dd-mrr-yyyy)	Print Name of Training Provider:
July 2013	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
The second of the second	Print Name of Instructor:
On-site specific training prov	ided to certificate holders / persons with Records of Training.
Target Date (dd-mm-yyyy)	Print Name of Training Provider: FSN Training (Please refer to previous page) Please Note - a ROT is valid for 3 years
To Be Arranged as Required	Print Name of Instructor:
Target Date (od-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:

Name of person completing this form (please print)	Official Title President	
Signature	Telephone No. 613-577-4031	Date (dd-mm-yyyy) 13/68/20(3



Warnings and Actions

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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.

Emergency Response Communications Plan

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate). The ROT person(s) on duty will contact emergency services by calling 911 and will provide warnings outlined in the attached "Propane Emergency Response

Procedures" placerd, if it is safe to do so. The owner/operator may also contact Superior Propane via the emergency number identified in	INC LIVI
Describe what action is to be taken and by whom when a warning is issued (including details of a meeting place in a safe identi	fied area and
activating the evacuation plan, if necessary). Actions and warnings will be taken by on duty ROT person(s) as per attached ERP placerd. Only a few staff will be on duty when operating	ng the
propane system. The Muster location will be on Highway #2, in a safe area. Note a specific muster point is not advisable, since a propan	e plume can
blow in any direction.	
Note that the facility is in a wide open area allowing people to self evacuate.	
Communication with Emergency Response Authorities	
Describe when and how the licence holder will give early warning to emergency response authorities (including a process to en	nsure that a call is
When the system is operational, a ROT person will be on duty and be in the propane tank area. This person will be able to visually ascent	relation valvé) ie
accident events and implement the appropriate emergency response actions. When the system is not in operation, the ISC valve (main is	Solation valve) is
closed, and the propane system is unattended. Any accidents involving the propane tank during such times will require the Intervention of	random, nearby
individuals or 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 parking lot area that is easily accessible from Highway #2.	
The fire access route is 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 the fill level in the tank.	n the tank)
Fill level is relevant from a time-to-BLEVE perspective (a near empty tenk will BLEVE sooner than a full tank if there is fire impingement of	ii me tank).
This information will be provided to the authorities by the Key Contact - Ronald Roy.	
How long will it take the facility liaison person to respond to the site.	
Approximately 20 minutes, after having received the emergency call.	

Name of person completing this form (please print)	Official Title President	
Signature Journal	Telephone No. 613-577-4031	Date (dd-mm-yyyy) 13/08/2017



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	SECTION B: EMERGENCY AND PREPAREDNESS RES The licence holder will complete Section B in consultation with the	PONSE P local Fire Ser	LAN (cont'd) vices
	6. Building and Site Security and Procedures		
les (V)		Yes	No
-1.	Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)?	V	
2.	Is there adequate night lighting at the site?		\checkmark
3.	Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials?	V	
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?	√	
5.	Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?	\checkmark	
6.	Are weighing systems validated for accuracy?	1	
7.	Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?	1	
8.	Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves)	. 🗸	
9.	Is the schedule of maintenance and testing activities retained on site?	1	
	7. Water Supply		
The	e propane licence holder should work with the local fire department to determine water uply 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?		✓
2.	Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?		7
3.	What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)	pond - 50	m
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)	No hydrai	nt available

Name of person completing this form (please print) Ronald Roy	Official Title President	
Signature Concert Con	Telephone No 613-577-4031	Date (dd-mm-yyyy) 73/65/2013



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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 PRE The licence holder will complete Section B 8. Licence holder and	PAREDNESS RESPONSE PLAN (co s in consultation with the local Fire Services. local Fire Services Review	ont'd)
To be completed by the Local Fire Services Has the local fire service had an opportunity to review the Emergency If not, please explain (e.g., no fire services).	Yes Response and Preparedness Plan? ✓	No
Fire services comments, if any:		
To be completed by the Licence Halder In response to the above comments, the following action(s) is required	d:	
The licence holder will respond to the Local Fire Services commen	ts by;(da-mm-yyyy)	Albania de la companya de la company
LOCAL FL	RE SERVICES	Allerandor
The undersigned has reviewed Section B of the Risk and Safety		
Print name	Signature	Date (dd-mm-yyyy)

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) Ronald Roy	Official Title President		
Signature Toy	Telephone No. 613-577-4031	Date (dd-mm-yyygy) 17/09/2017	

Local Fire Services Name



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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:

- 1. The storage location of fixed, portable, and mobile vessels.
- 2. The maximum volume, types and storage location of hazardous materials.
- 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.
- 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
- 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) 2013 - 10	Capacity of single largest propane	storagevessel (U	ŚWG)
Tank setback coordinates. Indicate placeme Front: 150 C+ Rear: 3800 F+	East 160 Right side property line Nest 158 Control Left side property line:	140 ft 350 ft	North 43m South 107.
GPS coordinates of single largest vessel:	Lat 45.106712, Long74.525156	WA	

Name of person completing this form (please print) Ronald Roy	Official Title President	
Signature Signature	Telephone No 613-577-4031	Date (dd-mm-yyyy) 13 65/2017



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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

Table 1: Distance Table

Water Capacity	Nominal Water Capacity (USWG)	Distance to 1 psi overpressure (m)
(litres)	500	156
1,890	1,000	195
3,780	1,300	213
4,920	1,750	235
6,620	1,885	241
7,130	2,000	246
7,560	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:

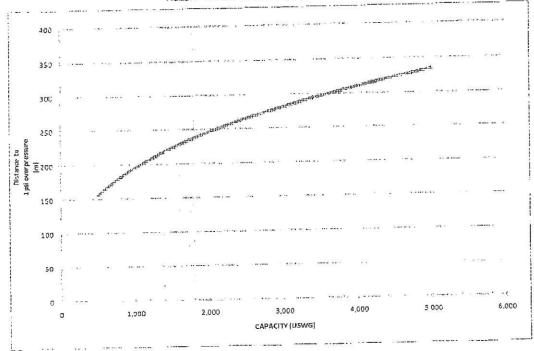
Density of Propane is 0.5033 kg per litre @ 15 C

Assume all vessels are 80% full

1 gallon [US, liquid] = 0.003785411784 cubic meter

1 cubic metre = 264.17 USWG







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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

Buildings and Features Present within the Circle on the Map of the Surrounding Area		1	* Number of Bulldings and Features (mark with an "X")			Distance from Tank to Closest Building or
AND Name and Addre	ess of Closest Building or Feature	0	1	2-10	11+	Feature
Address:	ince Fostal Code	x				0m
Address		×				0m
City:Prov	ince Postal Code	-				
Name. Royal RV Office	nts, entertainment, theatres, and sporting complexes.		х			15m
Address:	pecifically hotels, campgrounds, and resorts.	×				m
institutions, and prisons. Name: None Address:	ince Postal Code	x				0m
Address:		×				om

Name of person completing this form (please print) Ronald Roy	Official Title President		
Signature	Telephone No. 613-577-4031	Date (dd-mm-yyyy) / 7/08/2007	

^{*} For multi-unit buildings, court each unit as """



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WORKSHEET

Portable Storage Additional Information Worksheet

Cylinder Size	Capacity In USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5	6	177
# 40	11 75	6	71
# 33.3	9.62		
# 30	8.8	20	176
# 20	5.8	20	116
# 10	z.9		
# 5	1,5		

Tanks Stored On-site Not Connected for Use

Quantity	Total Volume in USWG
20	
100	
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	Guantity

7990			
Total Cylinder Capacity	540 USWG		
Total Tank Capacity	0 USWG		
Total Portable Capacity (Total Cylinger Capacity + Total Tank Capacity)	540 USWG		

