



Technical Standards and Safety Authority  
www.tssa.org

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

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

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.

<p style="text-align: center; font-weight: bold; font-size: small;">Failure to fully complete this form may result in rejection. Making a false statement may result in a fine or prosecution under the <i>Technical Standards and Safety Act</i></p> <p><b>Licence Number</b> <input style="width: 300px;" type="text" value="76648003"/></p> <p>Check applicable type of propane operations.</p> <p> <input type="checkbox"/> Cylinder                <input checked="" type="checkbox"/> Motor Fill                <input type="checkbox"/> Filling Plant                <input type="checkbox"/> Card/Keylock         </p> <p style="font-size: x-small;">Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.</p>	<p style="text-align: center; font-weight: bold; font-size: small;">For Office Use Only</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div>
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**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.**

<b>A</b>	Company Name UPS Canada Limited	Corporation No.
	Operator Name (if different from above)	
	Telephone No. 289-313-5801	Fax No. 289-313-5860
	E-mail tredmond@ups.com	
<b>B</b>	Street No. 1022	Street Name / 911 Number / Address, if applicable Champlain Avenue
	Town / City or Township / County Burlington	Province Ontario
		Postal Code L7L 0C2
	<b>Mailing address if different from above.</b>	
<b>C</b>	Street No. 2900	Street Name / 911 Number / Address, if applicable Steeles Avenue West
	Town / City or Township / County Concord	Province Ontario
		Postal Code L4K 3S2
<b>Information on Container Refill Centre or Filling Plant</b>		
	Location of facility.	
<b>D</b>	Street No. 2281	Street Name / 911 Number / Address, if applicable Stevenage Drive
	Town / City or Township / County Ottawa	Nearest Major Intersection Hawthorn Road and Hunt Club Road
		Province Ontario
		Postal Code K1G 3W1

Name of Licence Holder UPS Canada Ltd	
Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT) Craig Rayner	ROT type 100-02
Municipality (or municipalities if the facility or its hazard distance touches multiple borders) City of Ottawa	
Hours of operation. <div style="background-color: black; width: 500px; height: 60px; margin-top: 5px;"></div>	

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.**

<b>Print name</b>	<b>Signature</b>	<b>Date (dd-mmm-yyyy)</b>
Name of Licence Holder UPS Canada Ltd		16-06-2016
Name of Senior Management person as defined in the Regulation holding the Record of Training Craig Rayner		24-06-2016



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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.  
N/A

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

	PSIG	Serial Number
Tank1:	250	H5490.5
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: 5000 USWG      Portable: 35 USWG      Mobile: 0 USWG

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Name of person completing this form (please print) Claudia Borda	Official Title Plant Engineering Supervisor	
Signature 	Telephone No. 289-695-2306	Date (dd-mmm-yyyy) 16-06-2016



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**SECTION A: GENERAL INFORMATION (cont'd)**

Activity Information

<b>Name of Propane Supplier(s)</b>			For Office Use - Party No.		
P38 Energy Inc.					
Street No.	Street Name / 911 Number / Address, if applicable				
17360	Amell Road				
Town / City or Township / Country			Province	Postal Code	
St. Andrews West			Ontario	K0C 2A0	
Telephone No.	Fax No.	Contact Name			
613-938-9622	613-933-9624	Cathy Malyon			
E-mail					
cathy@p38energy.com					

<b>Name of Propane Transporter.</b> 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					

<b>Off-site Cylinder and/or Mobile Storage</b>		Capacity stored off-site, in USWG	For Office Use - Party No.
None			
Street No.	Street Name / 911 Number / Address, if applicable		
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	

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

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Name of person completing this form (please print)		Official Title	
Claudia Borda		Plant Engineering Supervisor	
Signature	Telephone No.	Date (dd-mmm-yyyy)	
	289-695-2306	16-06-2016	



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**SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN**

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

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

Waste oil tank - 500 gallon capacity, Waste Anti-Freeze Tank - 500 gallon capacity

Antifreeze coolant - less than 40 gallons - Automotive Lubricants - approximately 40 gallons

Consumer quantities of items such as spray paint, cleaners etc.

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

Building equipped with fire detection and notification system

Maintenance and testing schedule for fire protection controls and devices.

Fire extinguisher is inspected by outside company monthly and annually

Comprehensive dispenser inspection conducted annually by G2-LP certificate holder or higher

Facility inspection by TSSA completed annually

Building alarm system tested bi-monthly

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Signature <i>Claudia Borda</i>	Telephone No. 289-695-2306
	Date (dd-mmm-yyyy) 16-06-2016



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

1. Contacts for Emergency Response

**1. Facility Contact Personnel - Key Contact**

Name Richard Niman	For Office Use - Party No.
Official Title PM Sort Supervisor	
Telephone No. 613-670-6050 Ext 4080	Fax No.
E-mail rniman@ups.com	
Role and responsibilities in emergency Represents license holder on interaction with authorities and ensures regulations are met and adhered to.	

**5. Facility 24-Hour Contact Person**

Name Nicholas Baxter	For Office Use - Party No.
Official Title Operations Manager	
Cell No. 613-293-7929	Fax No.
E-mail nbaxter@ups.com	
Role and responsibilities in emergency Site liaison for enacting internal and external emergency procedures communication with emergency responders, suppliers and subcontractors	

**2. Facility Contact Personnel - Alternate Contact**

Name Leslie Shaw	For Office Use - Party No.
Official Title Preload Sort Supervisor	
Telephone No. 613-670-6050 Ext 4040	Fax No.
E-mail lshaw@ups.com	
Role and responsibilities in emergency Same as key contact if other unavailable	

**6. Name of Facility Manager**

Name Nicholas Baxter	For Office Use - Party No.
Official Title Operations Manager	
Telephone No. 613-670-6063	Fax No.
E-mail nbaxter@ups.com	
Role and responsibilities in emergency Ensure approved procedures are followed Ensure internal emergency procedures are current and employees aware	

**3. Local Fire Services - Key Contact**

Name Duncan McNaughton	For Office Use - Party No.
Official Title Chief Fire Prevention Officer	E-mail duncan.mcnaughton@ottawa.ca
Telephone No. 613-580-2424 ext. 29603	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	
Fire Services Address 101 Centrepointe Drive, 3rd Floor, Ottawa, ON, K2G 5K7	

**7. Propane Supplier Key Contact Person**

Name Guy Marchand	For Office Use - Party No.
Official Title President of P38 Energy Inc.	E-mail guy@budgetpropane.com
Telephone No.	Fax No.
Role and responsibilities in emergency Technical assistance, dispatch of service technicians and specialized equipment. Activate Emergency Response Assistance Plan by LPGERC	
Propane Supplier Address 17360 Amell Road, St. Andrews West, ON, K0C 2A0	

**4. Local Fire Services - Alternate Contact**

Name	For Office Use - Party No.
Official Title	E-mail
Telephone No.	Fax No.
Role and responsibilities in emergency Same as Fire Services - Key Contact	
Fire Services Address 101 Centrepointe Drive, 3rd Floor, Ottawa, ON, K2G 5K7	

**8. Municipal Contact**

Name Marika Atfield	For Office Use - Party No.
Official Title Development Information Officer	
Telephone No. 613-580-2424 ext. 41488	Fax No.
E-mail marika.atfield@ottawa.ca	
Municipality Name and Address City of Ottawa, 110 Laurier Avenue W, Ottawa, ON, K1P 1J1	

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Signature 	Telephone No. 289-695-2306
	Date (dd-mmm-yyyy) 16-06-2016



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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.

Internal valves are equipped with nitrogen charged actuators with fusible plugs

Limited scope of filling, Only UPS 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

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

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

Training on Emergency Response Plan and Procedures provided to facility key contacts.

Training Date (dd-mmm-yyyy) Prior to activation	Print Name of Training Provider: EDPRO Energy Group Inc.
	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 Emergency Management Procedures provided to staff.

Training Date (dd-mmm-yyyy) Prior to activation	Print Name of Training Provider: EDPRO Energy Group Inc.
	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 provided to certificate holders / persons with Records of Training.

Training Date (dd-mmm-yyyy) Prior to activation	Print Name of Training Provider: EDPRO Energy Group Inc.
	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:

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

4. Emergency Training Plan for Coming Year

Training on Emergency Response Plan and Procedures provided to facility key contacts.

Target Date (dd-mmm-yyyy)	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:

Training on the facility's Emergency 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 provided 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:

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	Date (dd-mmm-yyyy) 16-06-2016





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

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

5. Emergency Response Communications Plan

**Warnings and Actions**

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).  
In the event of a fire/significant propane leak the operator will activate the Emergency Stop control on the dispenser and/or vehicle

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

UPS Canada will oversee localized evacuation of employees, customers and any others to the identified evacuation point

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 Emergency Evacuation Assembly Area as identified on the site plan.

**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

Canada Notification Sequence for Emergency Response guidelines attached

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

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

Contact information is updated as required and updated license information is forwarded to the local fire authorities annually

How long will it take the facility liaison person to respond to the site.  
Business Hours - Instant - Management personnel always on site. Off Hours - Local management representative can be on-site within 1 hour

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	Date (dd-mmm-yyyy) 16-06-2016



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

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

**6. Building and Site Security and Procedures**

	Yes	No
1. Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Is there adequate night lighting at the site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Are there procedures that capture and record the daily inspection of hoses and inspection requirements for filling systems and mechanical devices used in the transfer of propane?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Are weighing systems validated for accuracy?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Is the schedule of maintenance and testing activities retained on site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**7. Water Supply**

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

	Yes	No
1. Is a pressurized water system available at the propane facility site?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)	135m	
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)	N/A	

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

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

8. Licence holder and local Fire Services Review

**To be completed by the Local Fire Services**

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

Yes

No

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

Fire services comments, if any:

*No Comments*

**To be completed by the Licence Holder**

In response to the above comments, the following action(s) is required:

The licence holder will respond to the Local Fire Services comments by: \_\_\_\_\_

(dd-mmm-yyyy)

**LOCAL FIRE SERVICES**

The undersigned has reviewed Section B of the Risk and Safety Management Plan Fire Services.

<i>DUNCAN</i> Local Fire Services Name	Print name <i>MCNAUGHTON</i>	Signature <i>[Signature]</i>	Date (dd-mmm-yyyy) <i>June 15/2016</i>
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Name of person completing this form (please print) Claudia Borda	Official Title Plant Engineering Supervisor	
Signature <i>[Signature]</i>	Telephone No. 289-695-2306	Date (dd-mmm-yyyy) 021-06-



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**SECTION C: SUBMISSIONS**

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

**Facility Site Plan.**

The licence holder will submit a copy of the original facility site plan updated with the following information:

1. The storage location of fixed, portable, and mobile vessels.
2. The maximum volume, types and storage location of hazardous materials.
3. Location of permanent structures on site.
4. Access and egress points and location of barriers.
5. Location of fire and emergency equipment (e.g., sprinkler systems, extinguishers, suppression systems) on site and location of fire hydrant or water supply where available.
6. Location of emergency shut off/shut down switches/valves.

**Map of Surrounding Area.**

The licence holder will submit a scaled aerial map of the surrounding area showing the following information:

7. The capacity and placement of the single largest propane storage vessel, including its setback from the front, rear and side property lines.
8. GPS co-ordinates of the single largest vessel.
9. Visual indication of the single largest fixed vessel and a circle made using the distance in Table 1 as the radius from the single largest fixed vessel.
10. Clear indication of the municipality or municipalities present within the circle.
11. Visual indication of property line information.
12. The location and name of roads within or abutting the site.
13. Key note to the drawing indicating the facility's municipal address, municipal lot number(s) and concession lines as applicable, and the date the map was prepared.
14. Address and contact information for each municipality (municipal clerk or secretary-treasurers of planning board). (Refer to page 5.)
15. Complete "Required Mapping Information from Updated Site Plan" in table below .

**Required Mapping Information from Updated Site Plan**

Date map prepared (dd-mmm-yyyy) 26-05-2016	Capacity of single largest propane storage vessel (USWG) 5000
Tank setback coordinates. Indicate placement on the map.	
Front: 69.7 _____	Right side property line: 81.9 _____
Rear: 67.4 _____	Left side property line: 18.0 _____
GPS coordinates of single largest vessel: 45° 22' 42.27" N, 75° 36' 47.00" W _____	

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**SECTION C: SUBMISSIONS (cont'd)**

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

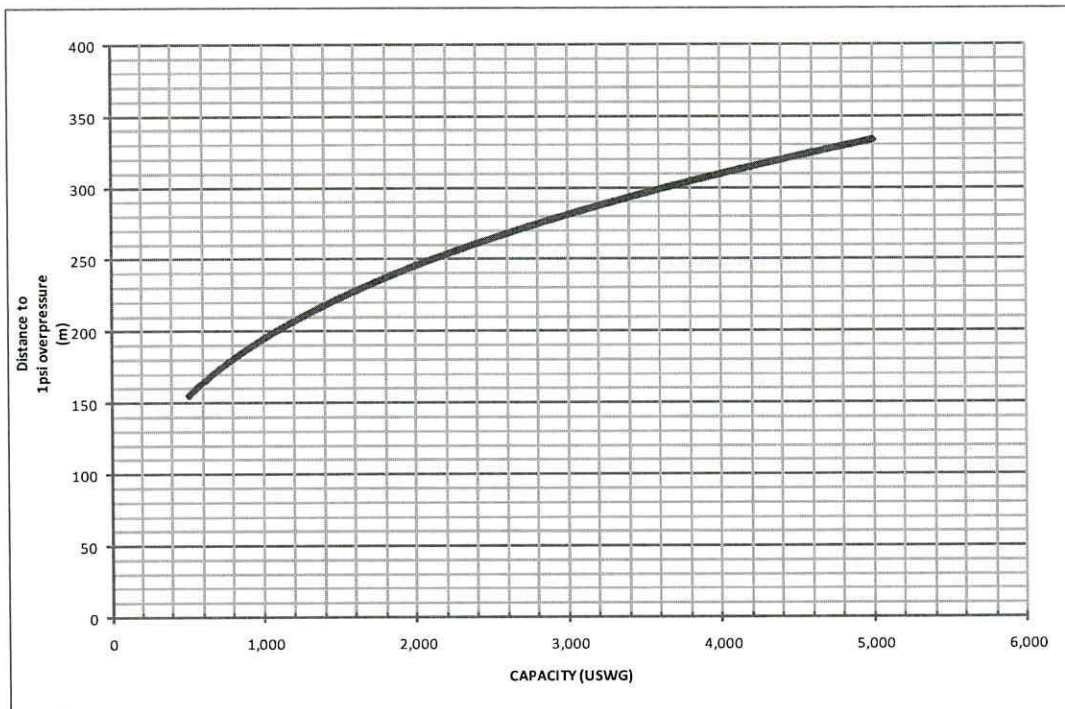
**Table 1: Distance Table**

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

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

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

**Hazard Distance Chart (EPA-TNT model)**





**Technical Standards and Safety Authority**  
www.tssa.org

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

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

**SECTION C: SUBMISSIONS (cont'd)**

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

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

**Table 2: Buildings and Features**

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: Interstone Marble and Granite Ltd. Address: 2730 Swansea Crescent City: Ottawa Province Ontario Postal Code K1G 5J7				X	58 m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: [REDACTED] Address: [REDACTED] City: [REDACTED]				X	215 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				N/A m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				N/A m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				N/A m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				N/A m

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

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

Name of person completing this form (please print) Claudia Borda	Official Title Plant Engineering Supervisor
Signature <i>Claudia Borda</i>	Telephone No. 289-695-2306
	Date (dd-mmm-yyyy) 16-06-2016



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**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	6	35
# 10	2.9	0	0
# 5	1.5	0	0
<b>Total Cylinder Capacity</b>			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
0	0	0
0	0	0
<b>Total Tank Capacity</b>		0

<b>Total Cylinder Capacity</b>	0
<b>Total Tank Capacity</b>	0
<b>Total Portable Capacity</b> (Total Cylinder Capacity + Total Tank Capacity)	35

# EMERGENCY EVACUATION PLAN

MEETING LOCATION: - SEE DRAWING

## IN CASE OF FIRE

### UPON DISCOVERY OF FIRE

LEAVE FIRE AREA IMMEDIATELY  
WALK, DO NOT RUN  
SOUND FIRE ALARM  
LEAVE BUILDING VIA NEAREST EXIT  
CALL 911

### UPON HEARING FIRE ALARM

GUIDE ANYONE WHO MAY NEED HELP  
LEAVE BUILDING VIA NEAREST EXIT  
CAUTION: REMAIN CALM

FACILITY NAME: OTTAWA CENTRE









FACILITY ADDRESS: 2281 STEVENAGE DR.  
OTTAWA, ONTARIO  
K1G 3W1

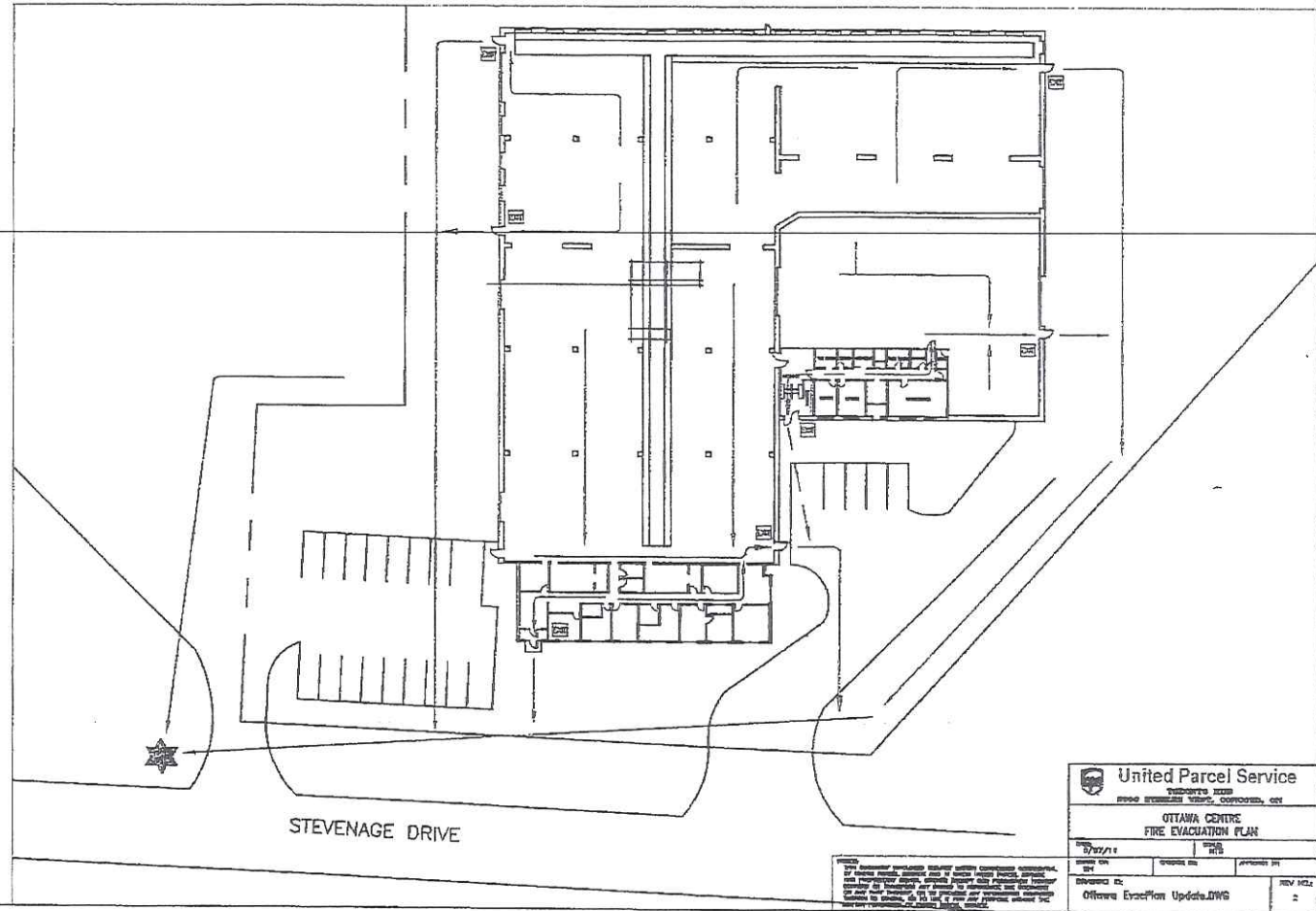
MAJOR INTERSECTION: HAWTHORNE & CHEMIN HUNT CLUB

IF NECESSARY, IMMEDIATELY  
CONTACT THE FOLLOWING:

POLICE: 911

FIRE DEPT: 911

	FIRE EXTINGUISHER
	EMERGENCY EYE WASH STATION
	EMERGENCY SHOWER STATION
	FIRST AID KIT
	FIRE MEETING AREA
	NON-EVAC MEETING AREA
	EMERGENCY FIRE PLAN
	EXIT DOOR

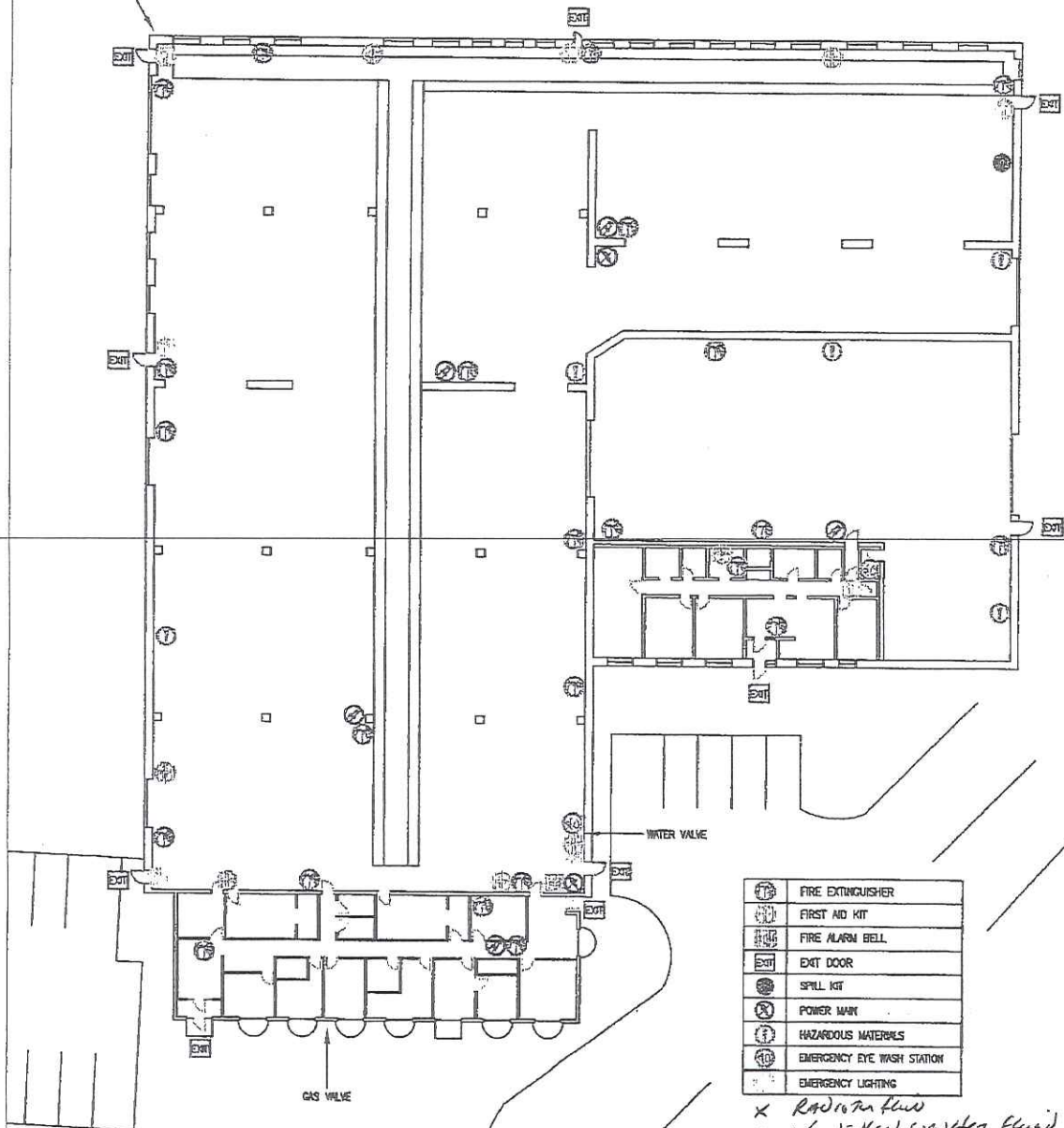


United Parcel Service  
 8800 STEVENAGE DRIVE, OTTAWA, ONT  
 OTTAWA CENTRE  
 FIRE EVACUATION PLAN  
 DATE: 07/27/11  
 DRAWN BY: JTB  
 CHECKED BY: JTB  
 APPROVED BY: JTB  
 PROJECT NO: Ottawa Evacuation Update.DWG  
 REV NO: 2

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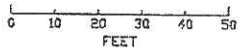


PROPANE EMERGENCY SHUT OFF



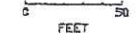
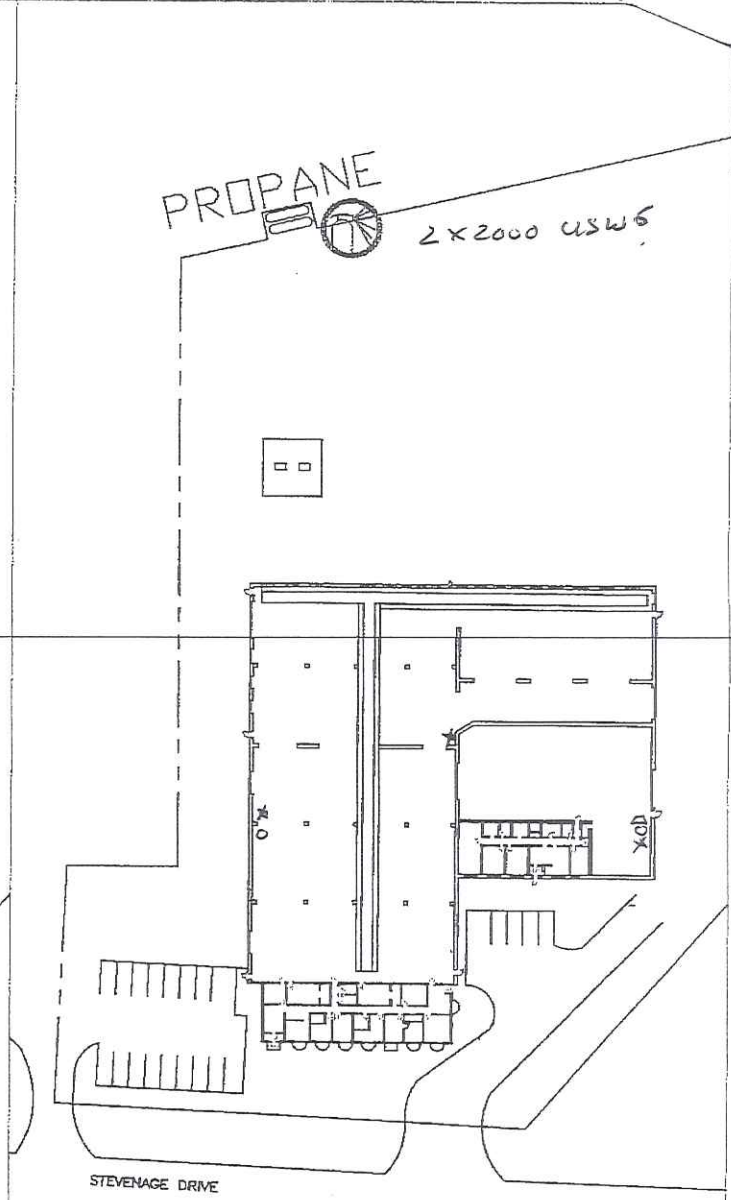
	FIRE EXTINGUISHER
	FIRST AID KIT
	FIRE ALARM BELL
	EXIT DOOR
	SPILL KIT
	POWER MARK
	HAZARDOUS MATERIALS
	EMERGENCY EYE WASH STATION
	EMERGENCY LIGHTING

X Radiation flow  
 O Effluents Need water flow  
 I Waste oil



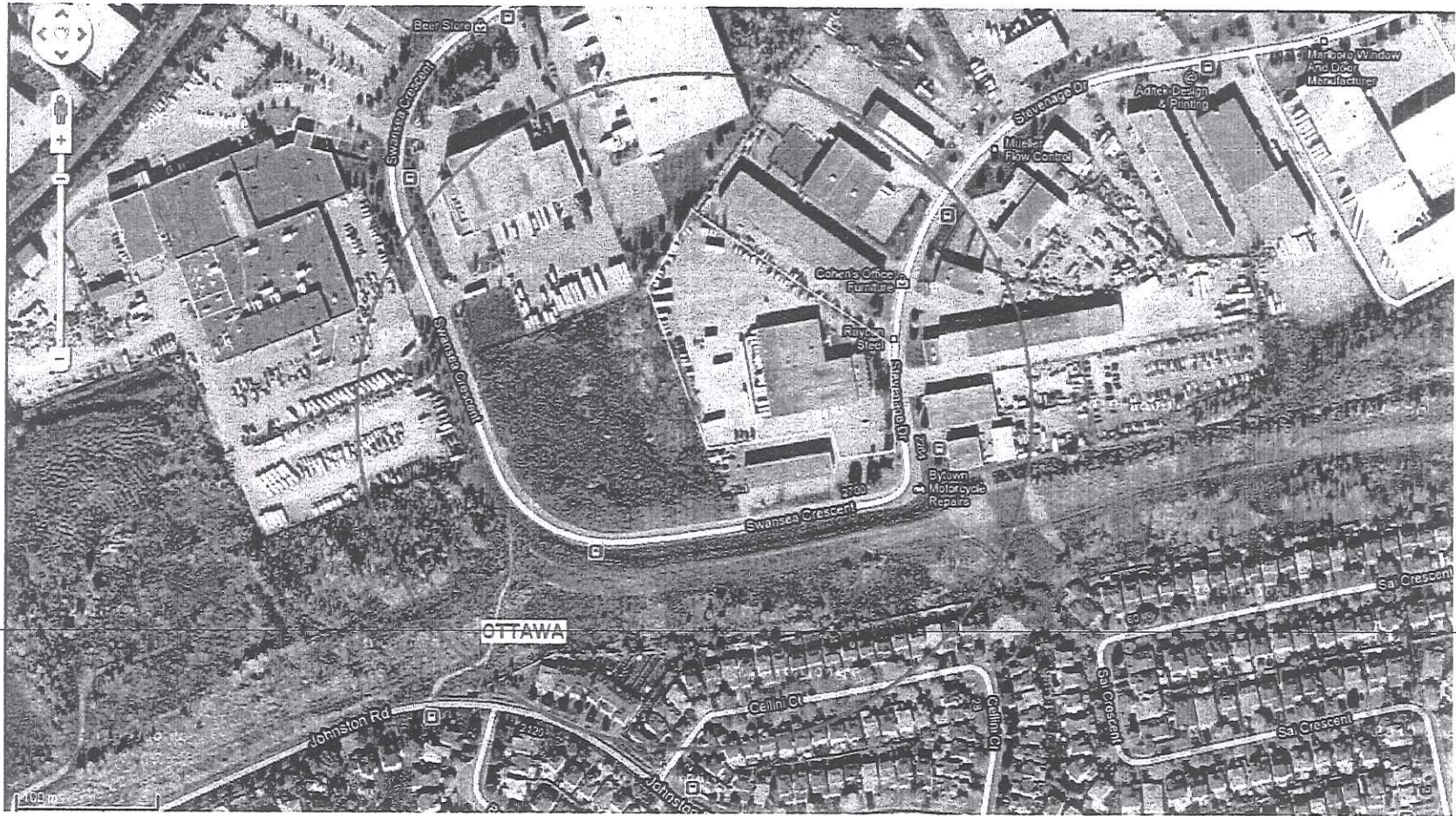
PROPANE

2 X 2000 USWB



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1	ORIGINAL ISSUE				
REV	REVISION RECORD	DESIGN	CHECK	APP'D	DATE
<b>United Parcel Service</b> OTTAWA CENTRE OTTAWA, ONT					
<b>OTTAWA CENTRE</b> <b>SITE PLAN</b>					
DATE	FEB 07 2011	SCALE	NIS		
DWG BY	HC	CHECKED BY		APPROVED BY	
DWG ID	Site Plan.dwg	REV	1		



**Facility Address:**

2281 Stevenage Drive  
 Ottawa, ON  
 K1G 3W1

**Municipality Contact:**

*VICKI PAMONIC*  
 City Clerk's Office  
 613-580-2424  
 City of Ottawa

**GPS position of tank:**

45.37797, -75.613092

**Capacity of tank:**

2000 USWG x 2

**Setbacks**

Front: 150 m

Left: 120 m

Rear: 5 m

Right: 40 m

● INDICATES LOCATION OF TANKS

Date Prepared: Jan 20, 2011