



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.

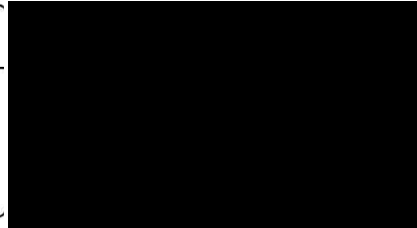
Failure to fully complete this form may result in rejection.
 Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number

Check applicable type of propane operations.

Cylinder Motor Fill Filling Plant Card/Keylock

Submit along with this completed application a Facility Site Plan and a Map of the Surrounding Area.



SECTION A: GENERAL INFORMATION

The Undersigned applies to TSSA for a review for an RSMP under Ontario's *Technical Standards and Safety Act*, Propane Storage and Handling Regulation.

Company Name: McCarthy-Ellis Mercantile Ltd. Ontario Corporation No., if applicable: _____

Operator Name (if different from above): Steven McCarthy

Telephone No.: 416-636-7480 Fax No.: 416-636-8345 E-mail: ctdlr214@gmail.com

Street No.: 2360 Street Name / 911 Number / Address, if applicable: Eglinton Ave. W

Town / City or Township / County: Toronto Province: Ontario Postal Code: M6M 1S6

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 or Filling Plant

Location of facility.

Street No.: 2360 Street Name / 911 Number / Address, if applicable: Eglinton Ave. W Nearest Major Intersection: Eglinton and Caledonia

Town / City or Township / County: Toronto Province: Ontario Postal Code: M6M 1S6

Name of Licence Holder: McCarthy-Ellis Mercantile Ltd.

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): Steven McCarthy ROT type: PTI Course: 100-08

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

Hours of operation:

Intake Group
 AUG 22 2013
RECEIVED

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-mm-yyyy)
Name of Licence Holder: <u>Steven McCarthy</u>		<u>08/15/13</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training: <u>Steven McCarthy</u>		<u>08/15/13</u>



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established.

2003

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

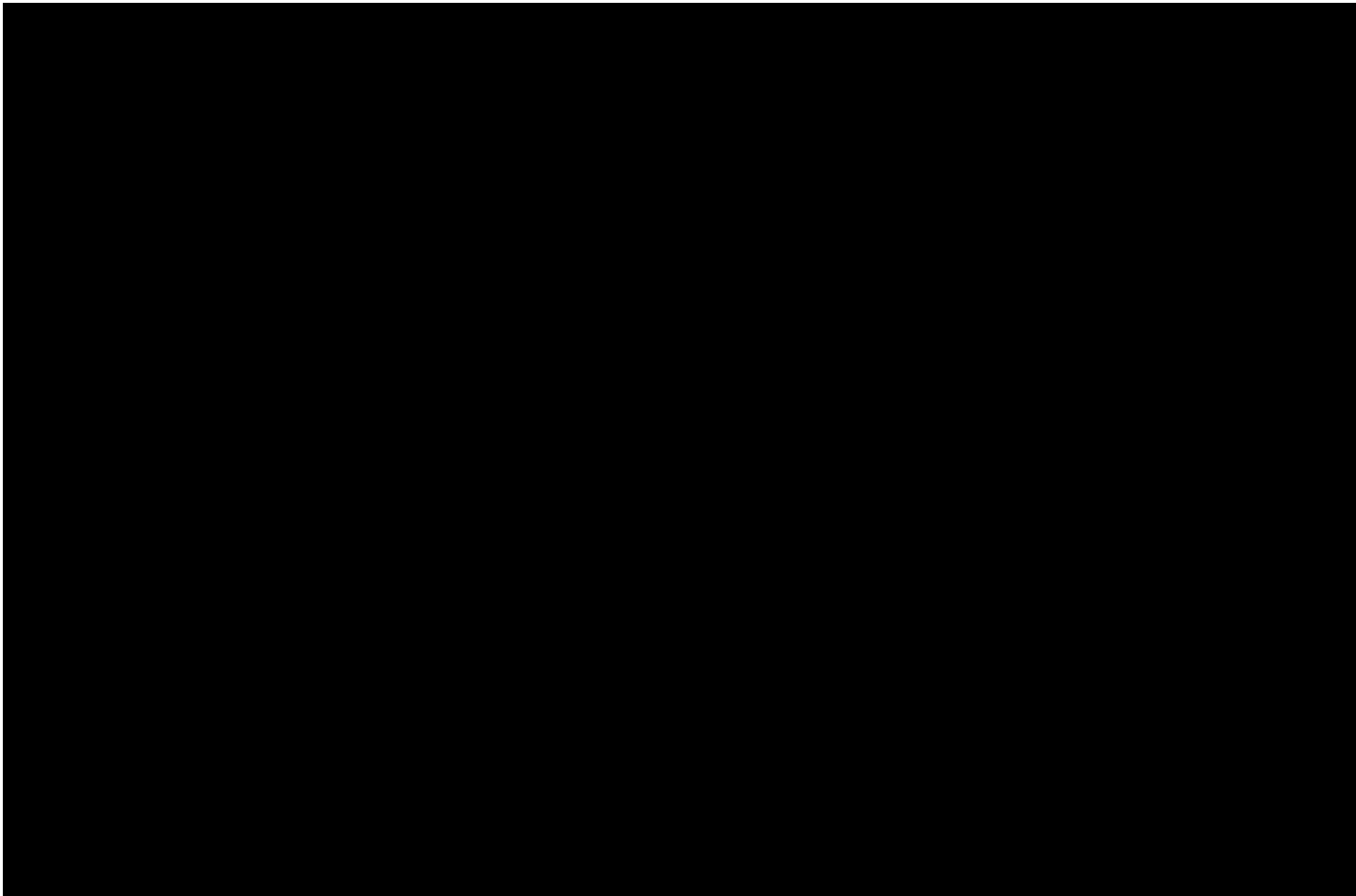
n/a

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

	PSIG	Serial Number
Tank 1:	250	802-2
Tank 2:		
Tank 3:		

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

Fixed: 2000 Portable: 280 Mobile: n/a



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Name of person completing this form (please print) Steven McCarthy	Official Title President
Signature 	Telephone No. Date (dd-mm-yyyy) (416) 636-7480 15/08/13



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SECTION A: GENERAL INFORMATION (cont'd)
Activity Information

Name of Propane Supplier(s) Superior Propane - Ontario Regional Operations Centre			
Street No. 251	Street Name / 911 Number / Address, if applicable Woodlawn Road West, Unit 217		
Town / City or Township / Country Guelph		Province Ontario	Postal Code N1H 8J1
Telephone No. 1-877-873-7467	Fax No. 519-836-7766	Contact Name Mike Mullins	
E-mail mullinsm@superiorpropane.com			

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>			
Superior Propane - Whitby Propane Bulk Plant			
Street No. 505	Street Name / 911 Number / Address, if applicable Victoria St. E		
Town / City or Township / Country Whitby		Province Ontario	Postal Code L1N 5S4
Telephone No. 1-877-873-7467	Fax No. n/a	Contact Name Mark Wakeford	
E-mail wakefordm@superiorpropane.com			

Off-site Cylinder and/or Mobile Storage None	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
Telephone No.	Fax No.	Contact Name

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

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	Date (dd-mm-yyyy) 15/08/13



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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.

N/A

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

1. Fire extinguishers - In the propane equipment cabinet enclosure for easy access.

List of fire protection controls (e.g., fire detection systems, fire notification systems, alarm systems, automatic shut off devices, fusible links, etc.) and describe their function, use and operation.

1. Fusible link on ISC valve, shuts of propane supply to dispensing equipment if it melts from a potential fire.

2. ISC interlock cable with cabinet door. ISC valve closes when door is closed. 4. Emergency shut off switch inside service man door by bay #1, shuts down all power if triggered.

5. Emergency stop located just outside of cabinet, shuts down all power if triggered. 6. Pump shut off switch in cabinet 7. Fire pull stations in shop.

Maintenance and testing schedule for fire protection controls and devices.

Maintenance inspection and testing completed annually by Superior Propane on all components of system as per code requirements.

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Name of person completing this form (please print) Steven McCarthy	Official Title President	
Signature 	Telephone No. (416) 636-7486	Date (dd-mm-yyyy) 15/08/13



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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 Steven McCarthy	For Office Use - Party No.	Name Pierre Vachon	For Office Use - Party No.
Official Title Dealer		Official Title General Manager	
Telephone No. 416-636-7480	Fax No. 416-636-8345	Cell No. 416-770-3040	Fax No. N/A
E-mail ctdlr214@gmail.com		E-mail pep.vachon@gmail.com	
Role and responsibilities in emergency Co-ordinate site response.		Role and responsibilities in emergency Co-ordinate site response.	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Pierre Vachon	For Office Use - Party No.	Name Steven McCarthy	For Office Use - Party No.
Official Title General Manager		Official Title Dealer	
Telephone No. 416-636-7480	Fax No. 416-636-8345	Telephone No. 416-636-7480	Fax No. 416-636-8345
E-mail pep.vachon@gmail.com		E-mail ctdlr214@gmail.com	
Role and responsibilities in emergency Co-ordinate site response if Dealer not available.		Role and responsibilities in emergency Co-ordinate site response.	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Debbie Higgins	For Office Use - Party No.	Name Superior Propane Hotline	For Office Use - Party No.
Official Title Deputy Fire Chief - Fire Prevention - Toronto Fire Services		Official Title	
Telephone No. 416-338-9055	Fax No.	Telephone No. 1-877-873-7467	Fax No.
E-mail dhiggin@toronto.ca		E-mail	
Role and responsibilities in emergency Co-ordinate/advise on Toronto Fire Service response. Liase with police.		Role and responsibilities in emergency Identify and dispatch Superior Propane and or LPERGC emergency response personnel as required.	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Jim Stoops	For Office Use - Party No.	Name Brad Eyre	
Official Title Division Chief - Fire Prevention		Official Title Emergency Management Coordinator - Office of Emergency Management	
Telephone No. 416-338-9102	Fax No.	Telephone No. 416-338-8747	Fax No. 416-392-3833
E-mail jstoops@toronto.ca		E-mail beyre@toronto.ca	
Role and responsibilities in emergency Alternate - Co-ordinate/advise on Toronto Fire Service REsponse. Liase with police.		Municipality City of Toronto	

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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.

None

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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) N/A	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

Training on the facility's Emergency Management Procedures provided to staff.

Training Date (dd-mm-yyyy) N/A	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Training Date (dd-mm-yyyy) N/A	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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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) Q3-2013	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

Training on the facility's Emergency Management Procedures provided to staff.

Target Date (dd-mm-yyyy) Q3-2013	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Target Date (dd-mm-yyyy) Q3-2013	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

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

5. Emergency Response Communications Plan

Warnings and Actions

Describe who gives warnings to whom, and how and when the warning will be given (including public notification as appropriate).
The ROT person(s) on duty will contact the emergency services by calling 911 and will provide warnings outlined in the attached "Propane Emergency Response Procedures" placard, if it is safe to do so. If the store is affected during emergency, the ROT person(s) on duty will make announcements over the public address system, requesting occupants to leave the building. Before doing this, the ROT will activate the store alarm system.

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).

Action and warnings will be taken by on duty ROT person(s) on duty as per the attached ERP placard. The following has been designated as the meeting place: cart corral in the middle of the parking lot.

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 ensure that a call is placed to 911).

When the system is operational, a ROT person will be on duty and be in the propane tank area. This person will be able to visually ascertain any abnormal/accident events and implement the appropriate emergency response actions. When the system is not in operating, the ISC valve (main isolation 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 store staff.

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

The propane tank system is located in a wide open store parking lot area that is easily accessible.

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

Tank fill level will be given to authorities if it is safe to do so by facility key contact. Fill level gauge is located inside the dispensing cabinet.

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

1 hour.

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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 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"/> |

7. Water Supply

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

- | | Yes | No |
|---|-------------------------------------|--------------------------|
| 1. Is a pressurized water system available at the propane facility site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only) | | <u>40 metres</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>n/a</u> |

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Name of person completing this form (please print) <i>Steven McCauley</i>	Official Title <i>President</i>	
Signature <i>[Handwritten Signature]</i>	Telephone No. <i>(416) 636-7480</i>	Date (dd-mm-yyyy) <i>15/08/13</i>



Paul Dort <dort269@gmail.com>

Re: RSMP - Canadian Tire Store #214

1 message

Gordon Chabot <gchabot@toronto.ca>

Tue, Aug 20, 2013 at 1:25 PM

To: Paul Dort <dort269@gmail.com>

Hi Paul,

Attached, please find page 11 of 15.

The only page that the municipal Fire Dept must sign.

The RSMP is adequate and the only comment I have, is to ensure it is kept in the Fire Safety Plan Lock Box.

Sorry about the poor quality of our fax printout.

It is an old machine that is not going to be replaced.

Please let me know that you received this okay and if you would like me to send the whole RSMP to the TSSA inspector.

The email copy will look similar to this one. Poor quality as well.

All the best.

Contact me if there is anything else I can assist you with.

cell #416-528-5635

Gordon Chabot
Acting Captain, Ward 28
South Command
Toronto Fire Services
Tel: 416-338-9397
Fax: 416-338-9349

>>> Paul Dort <dort269@gmail.com> 8/20/2013 9:03 AM >>>
Good morning Gordon,

I'm just following up on my telephone message from yesterday regarding the status of our RSMP and the next step to take to expedite the process.

I spoke with Inspector Heyworth yesterday at TSSA and he informed me he is going on vacation Friday and I need to get the RSMP back from you and take it to his office to sign off so that he can unlock us by Friday.

Please advise at your earliest convenience.

Sincerely,



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Level 1 Risk and Safety Management Plan (RS 11)
 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.

B. 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 service).

Fire services comments, if any:

RSMP TO BE KEPT IN FIRE SAFETY PLAN LOCK BOX.

To be completed by the Licence Holder

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

[Handwritten initials]

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.

A/C GORDON CHABOT Local Fire Services Name	Print name	<i>[Signature]</i> Signature	Date (dd-mm-yyyy) 20/8/2013
TORONTO FIRE SERVICES			

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) Steven M. Conroy	Official Title president
Signature <i>[Signature]</i>	Telephone No. (416) 636-7481
TS 09/05 (1/10) Form 11 of 15	Date (dd-mm-yyyy) 15/08/13



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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		Yes	No
Has the local fire service had an opportunity to review the Emergency Response and Preparedness Plan?		<input type="checkbox"/>	<input type="checkbox"/>
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-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		

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Name of person completing this form (please print) <i>Steven McCarthey</i>	Official Title <i>President</i>	
Signature <i>[Signature]</i>	Telephone No. <i>(416) 636-7486</i>	Date (dd-mm-yyyy) <i>15/08/13</i>



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SECTION C: SUBMISSIONS

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

Facility Site Plan.

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

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

Map of Surrounding Area.

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

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

Required Mapping Information from Updated Site Plan

Date Map Prepared (dd-mm-yyyy) 29-03-2011	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 3 m	Right side property line: 3 m
Rear: 3 m	Left side property line: 3 m
GPS coordinates of single largest vessel:	43.6937, -79.4661

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Signature 	Telephone No. (416) 636-7480
	Date (dd-mm-yyyy) 15/08/13



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X2X4
Fax: 416.231.4903
Customer Service: 1.877.682.8772

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

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

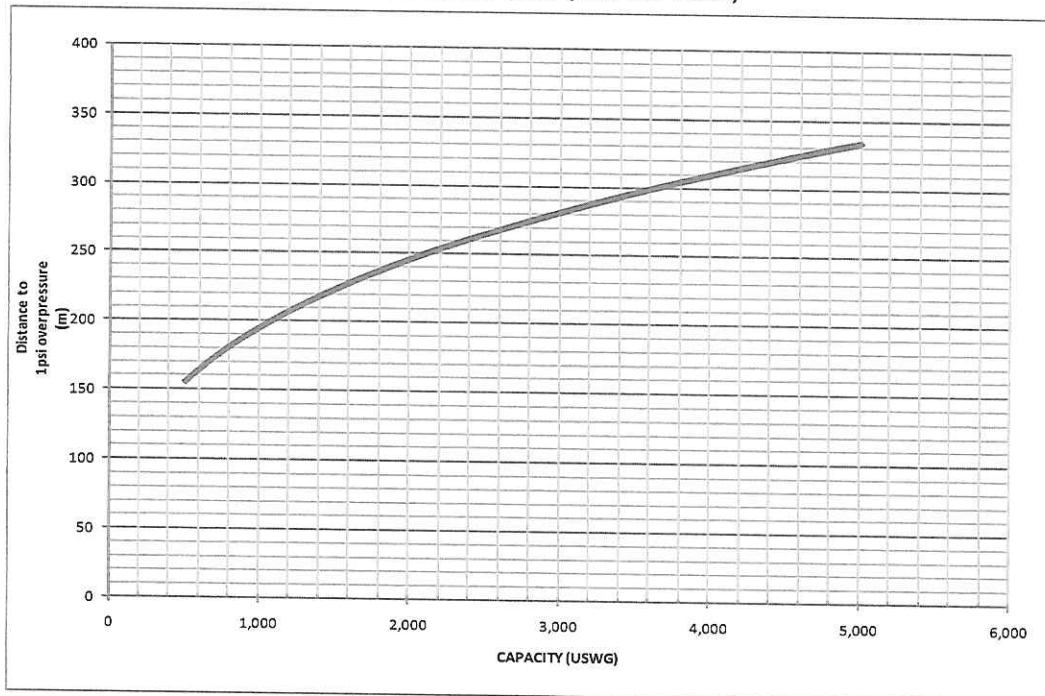
Table 1: Distance Table

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

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

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

Hazard Distance Chart (EPA-TNT model)



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

Name of person completing this form (please print) <i>Steven McCarthy</i>	Official Title <i>President</i>
Signature <i>[Handwritten Signature]</i>	Telephone No. <i>(416) 636-7480</i> Date (dd-mm-yyyy) <i>15/08/13</i>



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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>None</u> Address: _____ City: _____ Province _____ Postal Code _____	x				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: _____ Address: _____ City: _____				x	<u>50</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Rogers Plus</u> Address: <u>2400 Eglinton Avenue West</u> City: <u>Toronto</u> Province <u>Ontario</u> Postal Code <u>M6M 1S6</u>				x	<u>5</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>None</u> Address: _____ City: _____ Province _____ Postal Code _____	x				_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: <u>None</u> Address: _____ City: _____ Province _____ Postal Code _____	x				_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>None</u> Address: _____ City: _____ Province _____ Postal Code _____	x				_____ m

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

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SECTION C: SUBMISSIONS (cont'd)
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Portable Storage Additional Information Sheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9		
# 100	29.5		
# 40	11.75		
# 33.3	9.62		
# 30	8.8		
# 20	5.8	48	278.4
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			280

Tanks Stored On-site Not Connected for Use

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

Total Cylinder Capacity	280 USWG
Total Tank Capacity	0
Total Portable Capacity	280 USWG

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Signature <i>[Handwritten Signature]</i>	Telephone No. <i>(416) 636-7480</i>	Date (dd-mm-yyyy) <i>15/08/13</i>



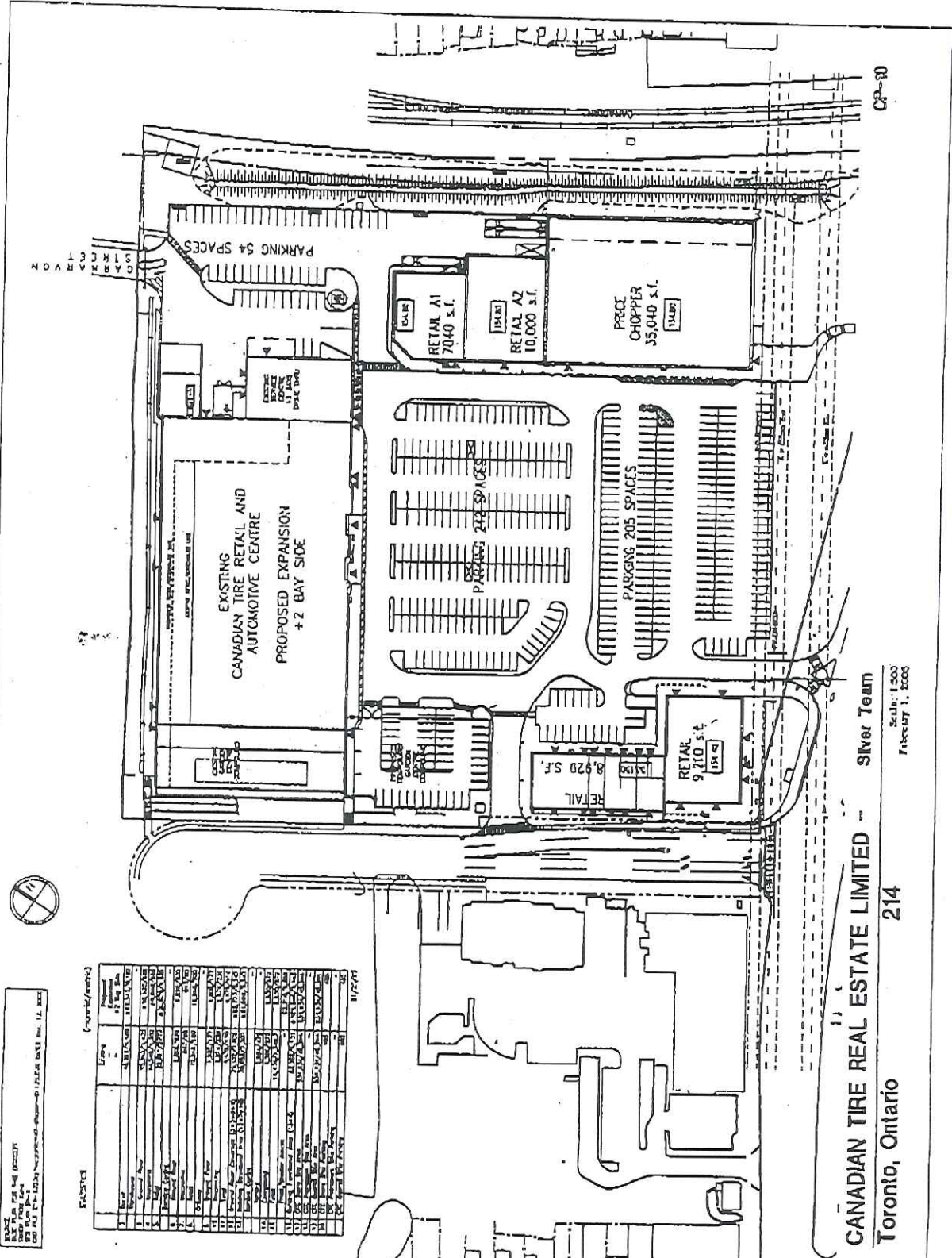
Location of Propane Storage Tank:
 Demarcated by ● in centre of circle.
 Capacity of Propane Storage Tank:
 Capacity of Propane Storage Tank = 2000 USWG
 GPS Coordinates of Propane Storage Tank:
 GPS Co-ordinates = 43.6937, -79.4661
 Circular Distance to 1 psi overpressure:
 Denoted by circle centred on tank radial distance = 246 m

Note: Property lines a setbacks shown on site plan.
 Municipality (ies): within the 1 psi overpressure circle:
 City of Toronto

Municipal Contact:
 Brad Eyre
 Emergency Management Coordinator
 City of Toronto
 T: 416-338-8747 F: 416-392-3822
 beyre@toronto.ca

Map of Surrounding Area

Canadian Tire - 2360 Eglinton Avenue West
 Legal Description: Part 1, plan of blocks 1,3,4,5,6,7
 & 8 registered plan 66m-2270, City of Toronto,
 Formerly City of York



NO.	DESCRIPTION	DATE	BY	REVISION
1	ISSUED FOR PERMIT	11/27/11
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CANADIAN TIRE REAL ESTATE LIMITED - Silver Team
 Toronto, Ontario 214
 Scale: 1:500
 Project: 1, 2008

CP-10