



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 e) 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 000185199 (previous) - applying for change of ownership

Check applicable type of propane operations.

Cylinder Motor Fill Filling Plant Card/Keylock

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



SECTION A: GENERAL INFORMATION

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

A Company Name BB-Renton Corporation No. 2483003 Ontario Inc

Operator Name (if different from above)

Telephone No. 519-209-2611 Fax No. E-mail bb-renton@hotmail.com

B Street No. 4717 Street Name / 911 Number / Address, if applicable Hwy #3

Town / City or Township / County Simcoe (Renton) Province Ontario Postal Code N3Y 4K4

Mailing address if different from above.

C Street No. same Street Name / 911 Number / Address, if applicable

Town / City or Township / County Province Postal Code

Information on Container Refill Centre or Filling Plant

D Location of facility.
 Street No. same as above Street Name / 911 Number / Address, if applicable Nearest Major Intersection Hwy #3 and Cockshutt road

Town / City or Township / County Province Postal Code

Name of Licence Holder BB-Renton

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). Glen Barker ROT type PPO-03

Municipality (or municipalities if the facility or its hazard distance touches multiple borders) Norfolk County (Simcoe)

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.

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Print name	Signature	Date (dd-mmm-yyyy)
Name of Licence Holder <u>BB-Renton</u>		<u>15-11-2015</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Glen Barker</u>		



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established. 1980's Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. None aware of (14 years ago?)

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

	PSIG	Serial Number
Tank1:	<u>250</u>	<u>427-04</u>
Tank2:	_____	_____
Tank3:	_____	_____

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

Fixed: 2,000uswg Portable: 139.2 Mobile: n/a

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Name of person completing this form (please print) <u>Glen Barker</u>		Official Title <u>Owner</u>
Signature 	Telephone No. <u>519-209-2611</u>	Date (dd-mmm-yyyy) <u>15-11-2015</u>



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) Dowler-Karn Limited		For Office Use - Party No.	
Street No. 43841	Street Name / 911 Number / Address, if applicable Talbot line		
Town / City or Township / Country St Thomas		Province Ontario	Postal Code N5P 3S7
Telephone No. 519-631-3810	Fax No. 519-631-4755	Contact Name Chris Cattrysse	
E-mail info@dowlerkarn.com			

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>		For Office Use - Party No.	
Street No.	Street Name / 911 Number / Address, if applicable		
Town / City or Township / Country		Province	Postal Code
Telephone No.	Fax No.	Contact Name	
E-mail			

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

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

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	Date (dd-mmm-yyyy) 15-11-2015



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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.

Gasoline - regular, premium, diesel

Underground storage tanks - 1x22,730l (premium), 2x22,730l - reg unleaded, 1x22,730l - diesel

refer to site map for location

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

Fire extinguishers at dispenser, fuel pumps, and within building

Emergency shutoff near dispenser

video surveillance of property

fuel system/ propane shutoff in main building at service counter.

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

Emergency propane shutoff installed per b-149 (On gas code). - allows for hydro shutoff at dispenser, closing valve and stopping propane flow.

Fusible links on tank as described under b-149 - heat sensitive closure valve is activated with the main valve spring closing because the line breaks under heat, restricting the flow of gas/ liquids.

Maintenance and testing schedule for fire protection controls and devices.

Annual inspection of tank and emergency shut-off system as per requirements of B-149. Copy left on site.

Annual fire extinguisher inspections

Daily visual inspections

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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 Glen Barker	For Office Use - Party No.	Name Glen Barker	For Office Use - Party No.
Official Title Owner		Official Title Owner	
Telephone No. 519-209-2611	Fax No.	Cell No. 519-209-2611	Fax No.
E-mail bb-renton@hotmail.com		E-mail bb-renton@hotmail.com	
Role and responsibilities in emergency Execute the ER plan and implement its components (alert authorities, confirm evacuation of people onsite).		Role and responsibilities in emergency Execute the ER plan and implement its components (alert authorities, confirm evacuation of people onsite) during off hours.	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Cheryl Barker	For Office Use - Party No.	Name Cheryl Barker	For Office Use - Party No.
Official Title Owner		Official Title Owner	
Telephone No. 519-209-2611	Fax No.	Telephone No. 519-209-2611	Fax No.
E-mail bb-renton@hotmail.com		E-mail bb-renton@hotmail.com	
Role and responsibilities in emergency Execute the ER plan and to implement its components (alert authorities, confirm evacuation of people onsite). - in the absence key contact		Role and responsibilities in emergency Execute the ER plan and implement its components (alert authorities, confirm evacuation of people onsite).	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Terry Dicks	For Office Use - Party No.	Name Chris Catrysse	For Office Use - Party No.
Official Title Fire Chief	E-mail terry.dicks@norfolkcounty.ca	Official Title Sales Rep	E-mail info@dowlerkarn.com
Telephone No. 519-426-4115	Fax No. 519-426-4140	Telephone No. 519-631-3810	Fax No. 519-631-4755
Role and responsibilities in emergency Responsible for admin of fire services and advisor to council. Lead and coordinate emergency services response in the event of an emergency.		Role and responsibilities in emergency Address any concerns, alert support personnel as required, implement supplier erp. Participate in service requirements that may be necessary for restart.	
Fire Services Address 95 Culver Street Simcoe, Ontario N3Y 2V5		Propane Supplier Address 43841 Talbot line, St Thomas, Ontario N5P 3S7	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Bob Davidson / Brian Stackhouse	For Office Use - Party No.	Name Andy Grozelle	For Office Use - Party No.
Official Title Deputy Fire Chiefs	E-mail bob.davidson@norfolkcounty.ca	Official Title Clerk, Manager of Council Services	
Telephone No. 519-426-4115	Fax No. 519-426-4140	Telephone No. 519-426-5870	Fax No.
Role and responsibilities in emergency Lead and coordinate emergency services resources and response in the event of an emergency.		E-mail andy.grozelle@norfolkcounty.ca	
Fire Services Address 95 Culver Street Simcoe, Ontario N3Y 2V5		Municipality Name and Address Norfolk County - County Admin Building, 50 Colborne St., S., Simcoe, ON N3Y 4H3	

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Signature 	Telephone No. 519-209-2611
	Date (dd-mmm-yyyy) 15-1102015



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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.

Facility meets all codes and regulations.

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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) 12/10/2015	Print Name of Training Provider: <u>Inhouse Training</u>
	Print Name of Instructor: <u>Glen / Cheryl Barker</u>
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) 12/10/2015	Print Name of Training Provider: <u>Inhouse Training</u>
	Print Name of Instructor: <u>Glen/ Cheryl Barker</u>
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) <u>As required (3 year expiry dates)</u>	Print Name of Training Provider: <u>PTI certified trainers</u>
	Print Name of Instructor: <u>Glen Barker</u>
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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Signature 	Telephone No. <u>519-209-2611</u>
	Date (dd-mmm-yyyy) <u>15-11-2015</u>



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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) 25-11-2016	Print Name of Training Provider: Inhouse training
	Print Name of Instructor: Glen and Cheryl Barker
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) 25-11-2016	Print Name of Training Provider: Inhouse training
	Print Name of Instructor: Glen and Cheryl Barker
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) As required (3 year expiry dates)	Print Name of Training Provider: PTI Certified Trainer
	Print Name of Instructor: Glen Barker
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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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).
Emergency response coordinator is point person for executing the ERP. In the event of a confirmed emergency, verbal warnings and evacuation will occur on-site for all customers and employees to assemble at the designated evacuation site per the ERP. All other communications will be through the emergency response personnel once on-site. In the absence of the EC, the backup or a designate will assume this role.

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).
In the event that a warning has been issued, an evacuation will be undertaken and the emergency coordinator will attempt to activate emergency shutoff and hydro shutoffs if feasible and immediately contact 911 with pertinent information specific to the location and details of the emergency. All is noted in the ERP.

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).
In the event of a suspected leak, spill, fire or explosion, the emergency coordinator (or backup) is to call 911 once employees and customers have been ushered to safety and the evacuation point. All steps and details are listed in the ERP

Describe provisions for fire department entry when there are no operations or staffing at the propane site.
All equipment relevant to propane is accessible outside the building, including the emergency shutoff. The main hydro and fuel system shutoff is located inside the building (see site plan). Should access be required and personnel are not on site, then emergency service personnel will have to determine the best course of action to obtain entry.

Describe how the licence holder will ensure continual flow of updated information to authorities.
Via phone or cell phone until such time as they arrive. Upon arrival, the EC will liaise with the Emergency services personnel to provide update. At that stage control will be given to the Fire Service to manage the emergency. In a proactive manner, BB-Renton will provide site and contact information along with a copy of their ERP to the fire services when the RSMP is reviewed.

How long will it take the facility liaison person to respond to the site.
10 minutes from point of contact.(Glen and Cheryl Barker)

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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 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 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 type="checkbox"/>	<input checked="" type="checkbox"/>
2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)	<u>n/a</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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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).

Copy provided and invitation to attend site provided.

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-yyyy)

LOCAL FIRE SERVICES

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

Print name	Signature	Date (dd-mmm-yyyy)
Local Fire Services Name <i>Fire Chief Terry Dicks</i>		

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Name of person completing this form (please print) <i>Glen Barker</i>	Official Title <i>Owner</i>	
Signature 	Telephone No. <i>519-209-2611</i>	Date (dd-mmm-yyyy) <i>15-11-2015</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-mmm-yyyy) updated 11/15/2015	Capacity of single largest propane storage vessel (USWG) 2,000uswg
Tank setback coordinates. Indicate placement on the map.	
Front: <u>9.67m</u>	Right side property line: <u>26.95m</u>
Rear: <u>76.6m</u>	Left side property line: <u>59.7m</u>
GPS coordinates of single largest vessel:	<u>42deg51'34.83"N/80deg13'14.86"W</u>

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SECTION C: SUBMISSIONS (cont'd)

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

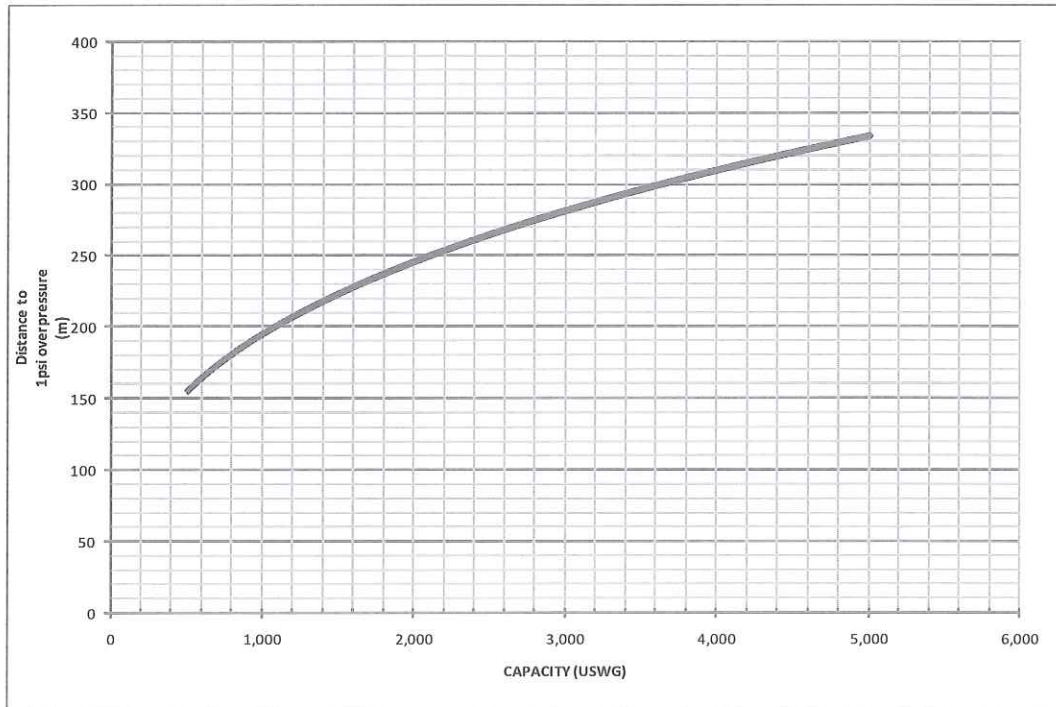
Table 1: Distance Table

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)





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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: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted]				x	75.3 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Townsend Auto Shop</u> Address: <u>1126 Cockshutt rd.</u> City: <u>Simcoe</u> Province <u>ON</u> Postal Code <u>N3Y 4K4</u>			x		167 m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ 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: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	x				_____ 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) <u>Glen Barker</u>	Official Title <u>Owner</u>
Signature 	Telephone No. <u>519-209-2611</u>
	Date (dd-mmm-yyyy) <u>11-15/2015</u>



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

WORKSHEET

Portable Storage Additional Information Worksheet

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	24	139.2
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			139.2 uswg

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
n/a		
Total Tank Capacity		

Total Cylinder Capacity	139.2 uswg
Total Tank Capacity	2,000uswg (fixed)
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	139.2



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SECTION A: GENERAL INFORMATION (cont'd)

Indicate the year the facility was established. 1980's Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. None aware of (14 years ago?)

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

	PSIG	Serial Number
Tank1:	<u>250</u>	<u>427-04</u>
Tank2:	_____	_____
Tank3:	_____	_____

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

Fixed: 2,000uswg Portable: 139.2 Mobile: n/a

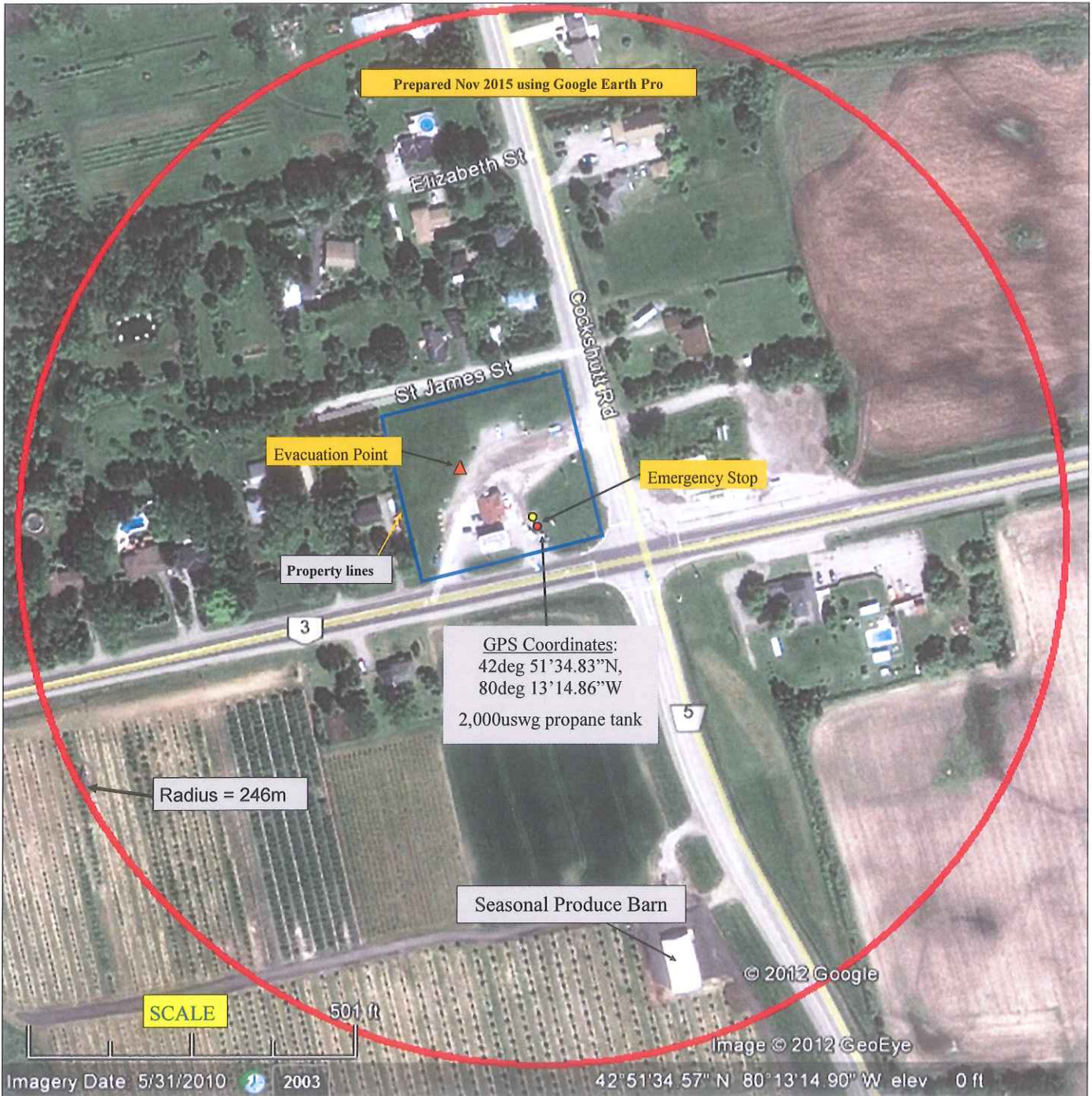
Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

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Signature 	Telephone No. <u>519-209-2611</u>	Date (dd-mmm-yyyy) <u>15-11-2015</u>

BB—Renton

Owners—Glen and Cheryl Barker

4717 Hwy 3 (Lot 1, RR#4)
Simcoe (Norfolk County), Ontario N3Y 4K4

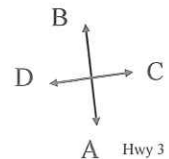


Norfolk County:
County Clerk - Andy Grozelle, Ext. 1228

50 Colborne Street South, Simcoe N3Y 4H3
Andy.grozelle@norfolkcounty.ca
Telephone: 519-426-5870

Set back from property lines (outlined in blue)

- 9.67m a
- 76.6m b
- 26.95m c
- 59.7m d

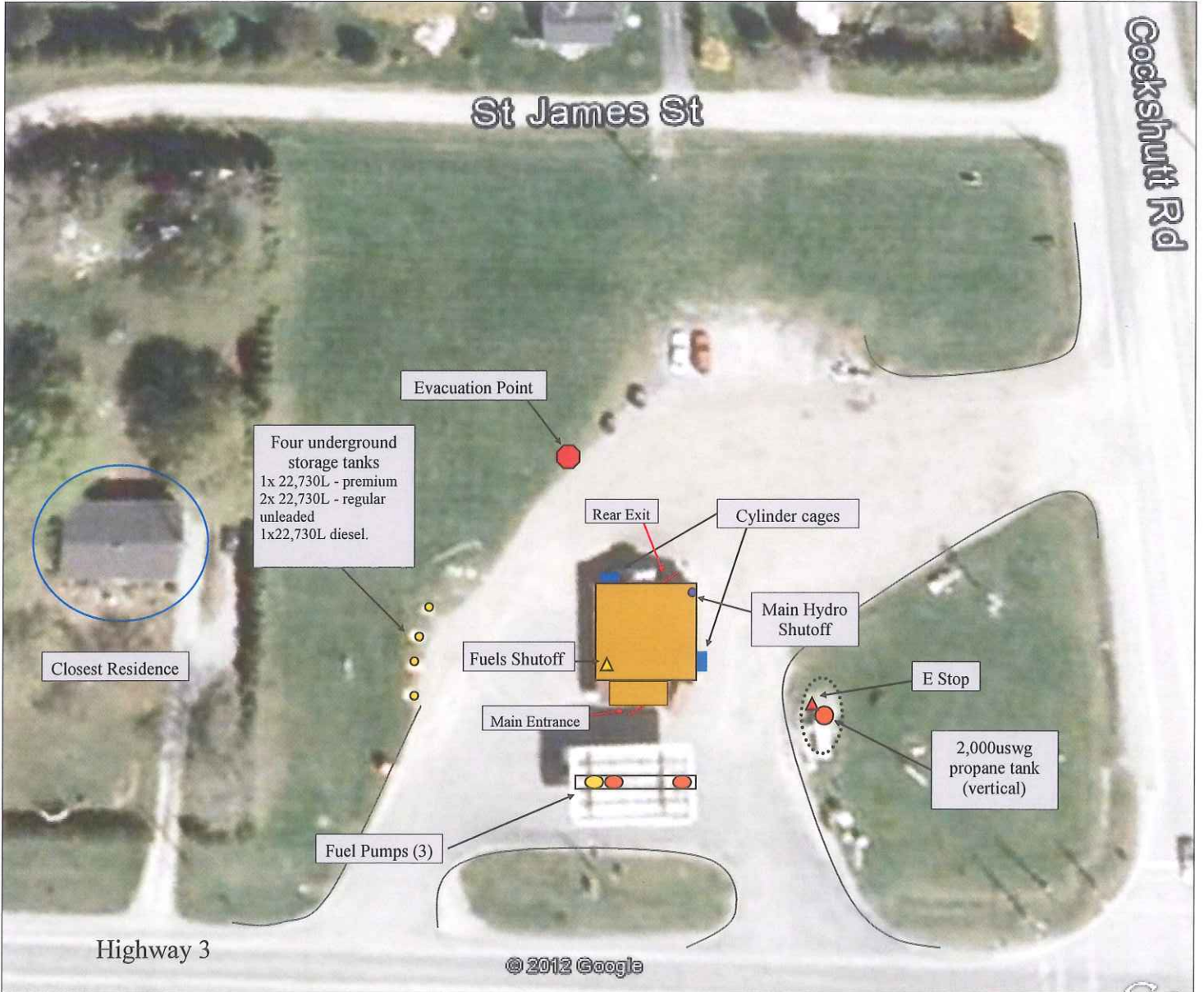


BB- Renton (2483003 Ontario Inc)

c/o Bradshaw Bros. Petroleum Limited

4717 Hwy 3 (Lot 1, RR#4)

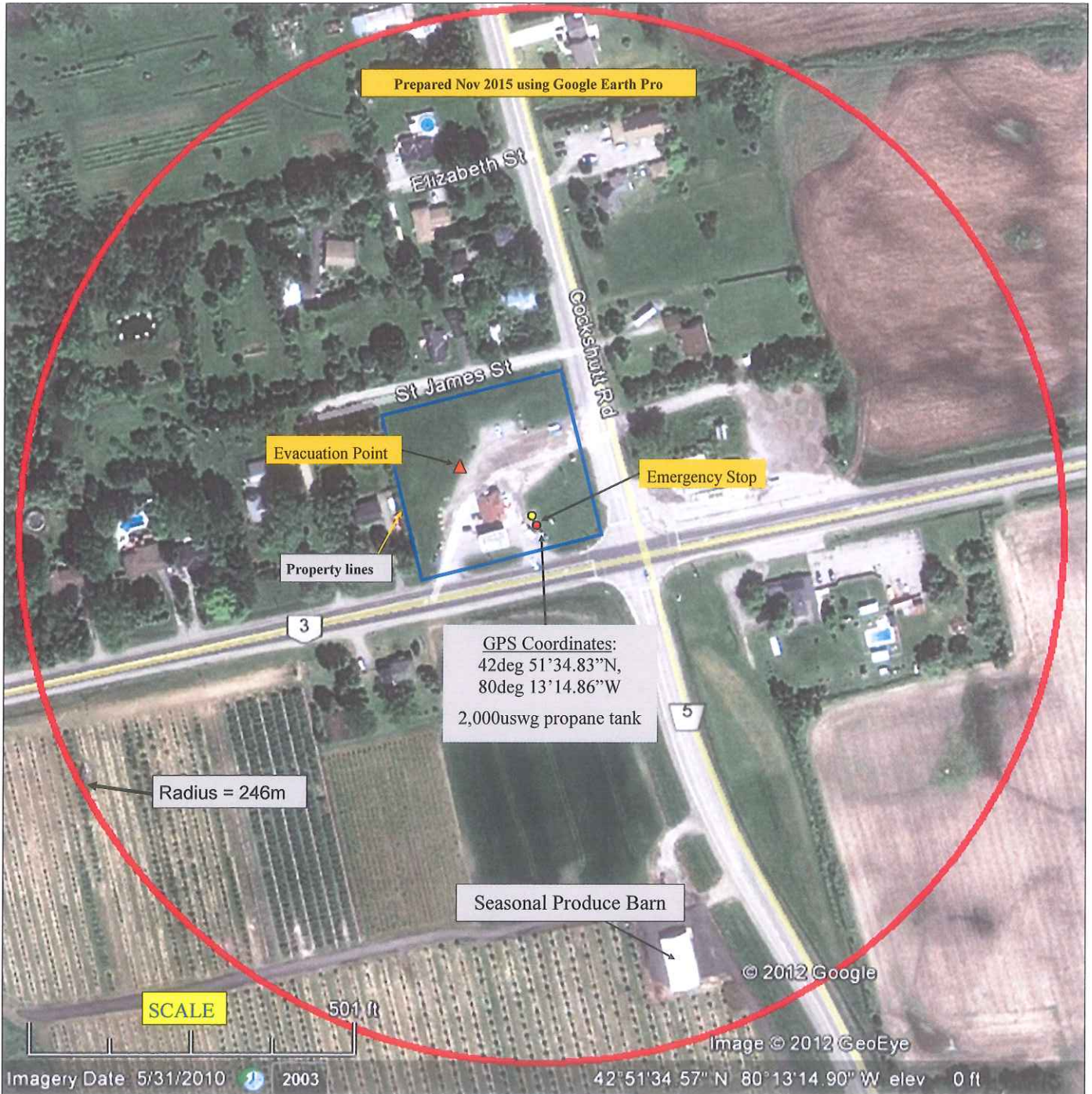
Simcoe (Norfolk County), Ontario N3Y 4K4



BB—Renton

Owners—Glen and Cheryl Barker

4717 Hwy 3 (Lot 1, RR#4)
Simcoe (Norfolk County), Ontario N3Y 4K4

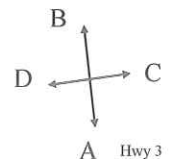


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