



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

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.

**A** Company Name: V. G. Cox Limited    Corporation No.: 1824009  
 Operator Name (if different from above):  
 Parry Sound Fuels  
 Telephone No.: (705) 746-5481    Fax No.:    E-mail: jcox@vianet.ca

**B** Street No.: 114    Street Name / 911 Number / Address, if applicable: Bowes Street  
 Town / City or Township / County: Parry Sound    Province: ON    Postal Code: P2A 2L7

**C** 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.  
**D** Street No.: 114    Street Name / 911 Number / Address, if applicable: Bowes Street    Nearest Major Intersection: Bowes St & Highway 400  
 Town / City or Township / County: Parry Sound    Province: ON    Postal Code: P2A 2L7

Name of Licence Holder: James Cox  
 Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): Mark Edington    ROT type: PPO-1  
 Municipality (or municipalities if the facility or its hazard distance touches multiple borders): Town of Parry Sound

Hours of operation:

This document is valid until the next licence renewal date. You are required by law to notify TSSA of any change of information.

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

Name of Licence Holder: James Cox	Signature:	Date (dd-mm-yyyy): 28/04/2016
Name of Senior Management person as defined in the Regulation holding the Record of Training: James Cox		



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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. \_\_\_\_\_

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

	PSIG	Serial Number
Tank 1:	250	374-16
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: 2,000 USWG Portable: 2364.65 USWG Mobile: \_\_\_\_\_

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Name of person completing this form (please print) Kristina Tobler	Official Title Manager, RSMP & Compliance, BPC Inc.	
Signature <i>Kristina Tobler</i>	Telephone No. (519) 848-5800	Date (dd-mmm-yyyy) 02-May-2016



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

Activity Information

Name of Propane Supplier(s) V. G. Cox Limited			For Office Use - Party No.		
Street No. 114	Street Name / 911 Number / Address, if applicable Bowes Street				
Town / City or Township / Country Parry Sound			Province ON	Postal Code P2A 2L7	
Telephone No. (705) 746-5481	Fax No.	Contact Name James Cox			
E-mail jcox@vianet.ca					

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		Capacity stored off-site, in USWG 3,499 USWG	For Office Use - Party No.		
Street No. 400	Street Name / 911 Number / Address, if applicable Ravenscliffe Road				
Town / City or Township / Country Huntsville			Province ON	Postal Code P1H 1L7	
Telephone No. (705) 746-5481	Fax No.	Contact Name James Cox			

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

3,499 uswg.  
5 Industrial Blvd. Seguin ON. P2A 0B2.  
(705) 746-5481 James Cox.

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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.

1 x 50,000 litres of Clear Diesel - underground      1 x 15,000 litres of Dyed Diesel - underground

1 x 10,000 litres of Premium Gasoline - underground      1 x 40,000 litres of Regular Gasoline - underground

Various lubricants in small packages ie. 10W30, 5W30 etc.

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

Fire Extinguishers

Emergency Stops

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 pull chain. If propane transfer system is exposed to fire the link will melt and the tank valve will automatically close.

Excess flow valve will automatically close if propane flow exceeds maximum flow rate of 50 gallons per minute.

Emergency Stop located on the south west corner of the garage and one located at the cylinder filling dispenser

Maintenance and testing schedule for fire protection controls and devices.

Annual third party testing on all fire extinguishers

Pre-use inspections

Annual inspection of tank

Monthly inspection of fire extinguishers by owner

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

1. Contacts for Emergency Response

<b>1. Facility Contact Personnel - Key Contact</b>		<b>5. Facility 24-Hour Contact Person</b>	
Name <u>James Cox</u>	For Office Use - Party No.	Name <u>James Cox</u>	For Office Use - Party No.
Official Title <u>Vice President</u>		Official Title <u>Vice President</u>	
Telephone No. <u>(705) 746-5481</u>	Fax No.	Cell No. <u>(705) 774-0752</u>	Fax No.
E-mail <u>jcaox@vianet.ca</u>		E-mail <u>jcox@vianet.ca</u>	
Role and responsibilities in emergency <u>First Responder. See Supervisor responsibilities in "Schedule 1" for complete list</u>		Role and responsibilities in emergency <u>First Responder. See Supervisor responsibilities in "Schedule 1" for complete list</u>	
<b>2. Facility Contact Personnel - Alternate Contact</b>		<b>6. Name of Facility Manager</b>	
Name <u>Mark Edington</u>	For Office Use - Party No.	Name <u>Mark Edington</u>	For Office Use - Party No.
Official Title <u>Manager</u>		Official Title <u>Manager</u>	
Telephone No. <u>(705) 746-5481</u>	Fax No.	Telephone No. <u>(705) 746-5481</u>	Fax No.
E-mail <u>marke@vianet.ca</u>		E-mail <u>marke@vianet.ca</u>	
Role and responsibilities in emergency <u>Act as alternate first responder with same responsibilities as above.</u>		Role and responsibilities in emergency <u>Act as alternate first responder with same responsibilities as above.</u>	
<b>3. Local Fire Services - Key Contact</b>		<b>7. Propane Supplier Key Contact Person</b>	
Name <u>Dave Thompson</u>	For Office Use - Party No.	Name <u>James Cox</u>	For Office Use - Party No.
Official Title <u>Fire Chief</u>	E-mail <u>dthompson@townofparrysound.co</u>	Official Title <u>Vice President</u>	E-mail <u>jcox@vianet.ca</u>
Telephone No. <u>(705) 746-2101 ext 305</u>	Fax No.	Telephone No. <u>(705) 746-5481</u>	Fax No.
Role and responsibilities in emergency <u>Coordinate emergency response</u>		Role and responsibilities in emergency <u>Proceed to site if required - Activate if ERAP is required.</u>	
Fire Services Address <u>4 Church St., Parry Sound ON P2A 1Y3</u>		Propane Supplier Address <u>114 Bowes St., Parry Sound ON P2A 2L7</u>	
<b>4. Local Fire Services - Alternate Contact</b>		<b>8. Municipal Contact</b>	
Name <u>John Tuck</u>	For Office Use - Party No.	Name <u>Jackie Boggs</u>	For Office Use - Party No.
Official Title <u>Fire Prevention Officer</u>	E-mail <u>jtuck@townofparrysound.com</u>	Official Title <u>Clerk</u>	
Telephone No. <u>(705) 746-2101 ext. 303</u>	Fax No.	Telephone No. <u>(705) 746-2101 ext. 224</u>	Fax No. <u>(705) 746-7461</u>
Role and responsibilities in emergency <u>Coordinate emergency response if Fire Chief is not available</u>		E-mail <u>jboggs@townofparrysound.com</u>	
Fire Services Address <u>4 Church St., Parry Sound ON P2A 1Y3</u>		Municipality Name and Address <u>52 Seguin St. Parry Sound ON P2A 1B4</u>	

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Signature <u>Kristina Tobler</u>	Telephone No. <u>(519) 848-5800</u>
	Date (dd-mmm-yyyy) <u>02-May-2016</u>



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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.

*Video Surveillance - not monitored but recorded, covers the gas pump area and car wash area*

[Lined area for additional safety measures]

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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) 29-Mar-2016	Print Name of Training Provider: <a href="#">Beatty Petroleum Consulting Inc.</a>
	Print Name of Instructor: <a href="#">Alex Beatty</a>
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) 29-Mar-2016	Print Name of Training Provider: <a href="#">Beatty Petroleum Consulting Inc.</a>
	Print Name of Instructor: <a href="#">Alex Beatty</a>
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) 29-Mar-2016	Print Name of Training Provider: <a href="#">Beatty Petroleum Consulting Inc.</a>
	Print Name of Instructor: <a href="#">Alex Beatty</a>
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) 29-Mar-2017	Print Name of Training Provider: <i>V. G. Cox Limited</i>
	Print Name of Instructor: <i>James Cox</i>
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) 29-Mar-2017	Print Name of Training Provider: <i>V. G. Cox Limited</i>
	Print Name of Instructor: <i>James Cox</i>
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) 29-Mar-2017	Print Name of Training Provider: <i>V. G. Cox Limited</i>
	Print Name of Instructor: <i>James Cox</i>
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) <i>02-May-2016</i>





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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).

[See Schedule 1](#)

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).

[See Schedule 1](#)

**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).

[See Schedule 1](#)

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

[See Schedule 1](#)

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

[See Schedule 1](#)

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

[James Cox - 5 minutes from home, 60 minutes from his cottage](#)

[Mark Edington - 10 minutes from home](#)

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Signature 	Telephone No. <a href="#">(519) 848-5800</a>	Date (dd-mmm-yyyy) <a href="#">02-May-2016</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.

**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 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>30 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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**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 Concerns*

**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>Dave Thompson</i>	<i>Dave Thompson</i>	<i>02-05-2016</i>

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Signature <i>Kristina Tobler</i>	Telephone No. <i>(519) 848-5800</i>
	Date (dd-mmm-yyyy) <i>28-Apr-2016</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) 06-Apr-2016	Capacity of single largest propane storage vessel (USWG) 2,000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 81 feet 24.69M	Right side property line: 200 feet 60.96M
Rear: 250 feet 76.2M	Left side property line: 25 feet 7.62M
GPS coordinates of single largest vessel: 45°20'38.93" N 80°00'40.39" W	

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

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

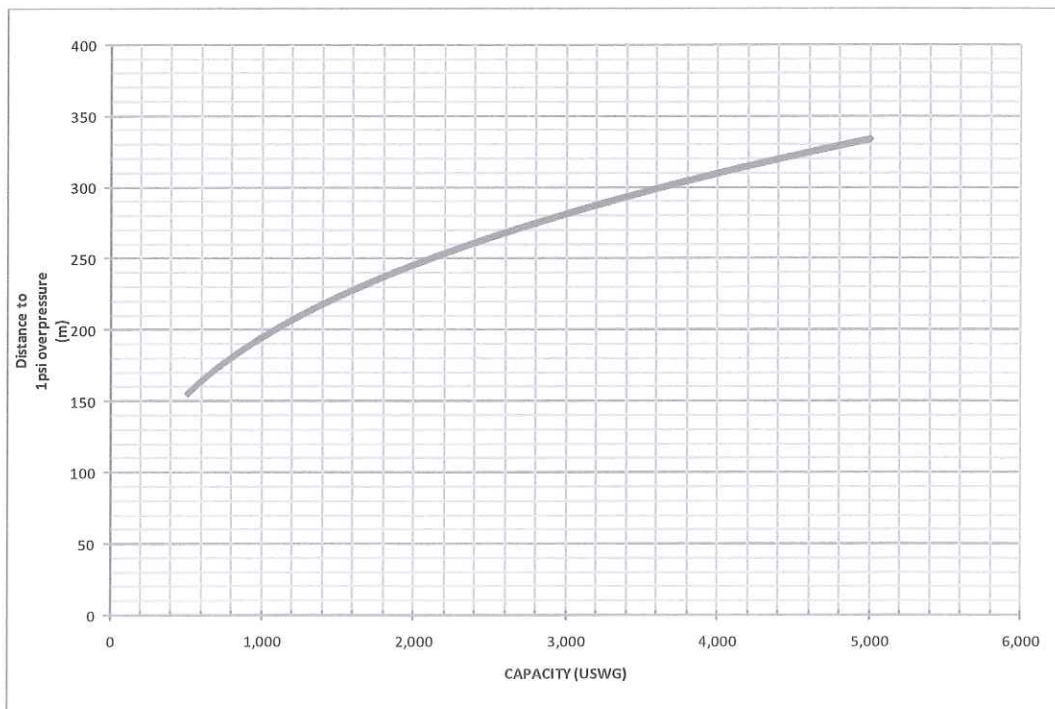
Table 1: Distance Table

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: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: _____ Address: _____ City: _____			X		143 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Pizza Hut</u> Address: <u>112 Bowes Street</u> City: <u>Parry Sound</u> Province <u>ON</u> Postal Code <u>P2A 2L7</u>				X	10 m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>Comfort Inn</u> Address: <u>120 Bowes Street</u> City: <u>Parry Sound</u> Province <u>ON</u> Postal Code <u>P2A 2L7</u>			X		212 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

*confirmed with Kristina  
on May 10, 2016 @ 9:39am  
K.F.*

\* 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>Kristina Tobler</u>	Official Title <u>Manager, RSMP &amp; Compliance, BPC Inc.</u>
Signature <u>Kristina Tobler</u>	Telephone No. <u>(519) 848-5800</u>
	Date (dd-mmm-yyyy) <u>02 May 2016</u>



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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	17	501.5
# 40	11.75	13	152.75
# 33.3	9.62		
# 30	8.8	23	202.4
# 20	5.8	260	1508
# 10	2.9		
# 5	1.5		
<b>Total Cylinder Capacity</b>			<b>2,364.65</b>

**Tanks Stored On-site Not Connected for Use**

Tank Size In USWG	Quantity	Total Volume in USWG
<b>Total Tank Capacity</b>		<b>0</b>

<b>Total Cylinder Capacity</b>	<b>2,364.65</b>
<b>Total Tank Capacity</b>	<b>0</b>
<b>Total Portable Capacity</b> (Total Cylinder Capacity + Total Tank Capacity)	<b>2,364.65</b>

Technical Standards and Safety Authority

Fuels Safety Division

**DRAWING REVIEWED**

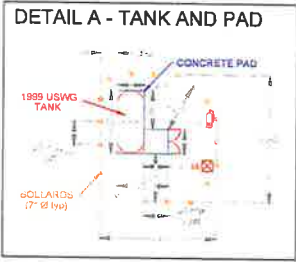
Revisions/Notes: Yes / No

Name: SOLOMON K90

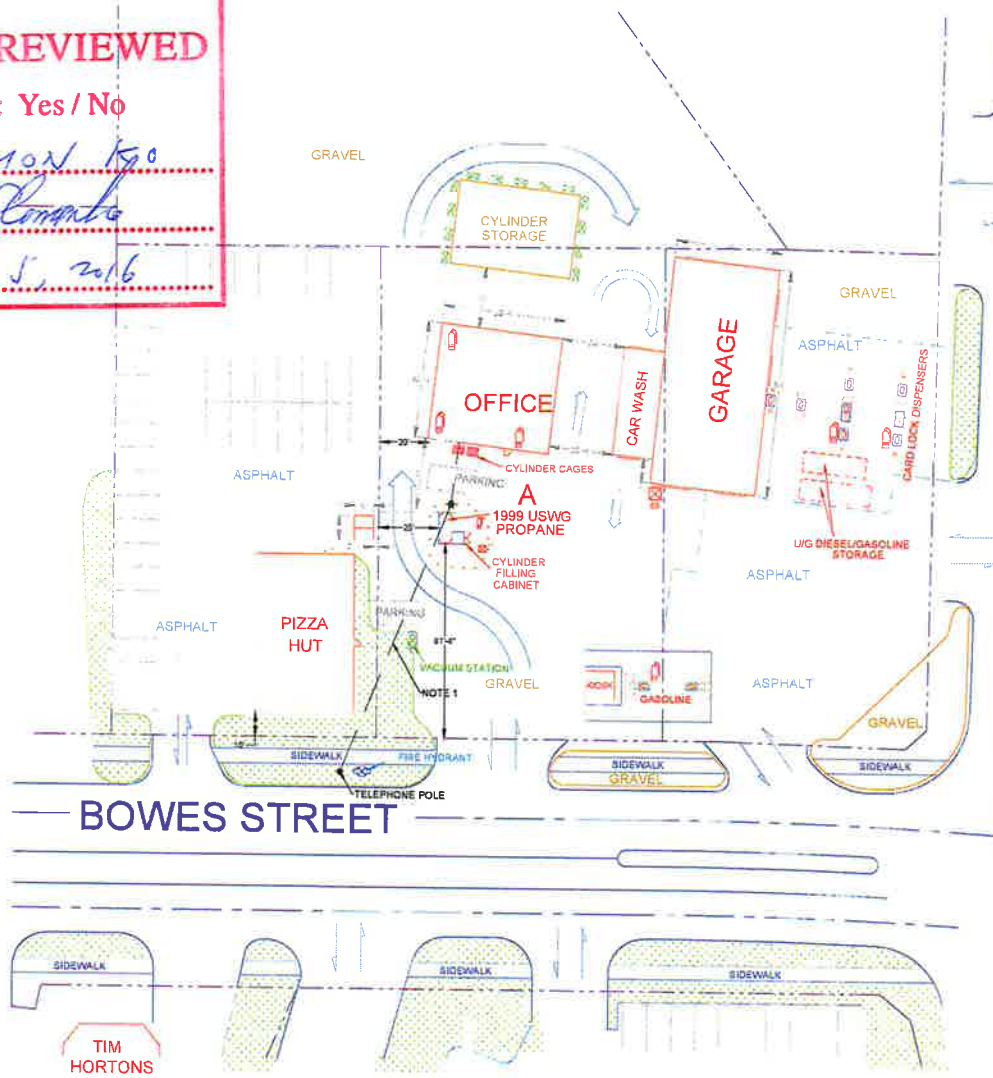
Signature: *[Signature]*

Date: July 5, 2016

- Update Tank Capacity from 2,000 → 1,999 USWG  
 - Telephone post & line shown



NOTES:  
 1. DASHED LINE IS TELEPHONE LINE ONLY



DISTANCE TABLE	
(distances in ft)	
	TANK A
NORTH PROPERTY LINE	250
EAST PROPERTY LINE	200
SOUTH PROPERTY LINE	81
WEST PROPERTY LINE	25.0

CYLINDER STORAGE	
QTY	SIZE
17	100 LB
13	40 LB
23	30 LB
260	20 LB
TOTAL	2385 USWG

LEGEND	
	Property Line
	Emergency Stop
	Industrial Building
	Non-Industrial Building
	Vehicle Barriers
	Egress Points
	Traffic Flow
	Fire Extinguisher
	Storm Sewer
	Chain Link Fence
	Fire Hydrant
	Overhead Lighting
	Existing Telephone Pole

REFERENCE DOCUMENTS	
DRAWING NUMBER	DESCRIPTION

3	06/30/16	-revise to show existing telephone lines - change tank to 1999 USWG
2	05/24/16	-revise to show existing hydro pole
1	04/15/16	-revise to show current property lines
0	04/14/16	-initial approval
REV	DATE	DESCRIPTION
DWG NO: PSF-PS-S-01-1R3		
APPROVED BY:		beatty petroleum consulting inc 182 George St. PO Box 884, Arthur, Ontario N0G 1A0
PARRY SOUND FUELS - Parry Sound, ON SITE DRAWING		
PREPARED BY:	CHECKED BY:	
Jeff Collinson	Alex Beatty	
REV:	3	Signature: _____ Date: _____

SITE PLAN