



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X2X4
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.

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: The Corporation of the City of Kitchener Corporation No.

Operator Name (if different from above)

Telephone No. 519-741-2600 Fax No. 519-741-2873 E-mail mike.born@kitchener.ca

B Street No. 131 Street Name / 911 Number / Address, if applicable Goodrich Dr.

Town / City or Township / County Kitchener Province Ont. Postal Code N2C 2E8

Mailing address if different from above.

C 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

D Location of facility.

Street No. 131 Street Name / 911 Number / Address, if applicable Goodrich Dr. Nearest Major Intersection Wilson Ave

Town / City or Township / County Kitchener Province Ont. Postal Code N2C 2E8

Name of Licence Holder Michael Born

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). ROT type 100-11

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

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.

Print name	Signature	Date (dd-mmm-yyyy)
Name of Licence Holder <u>Michael Born</u>		<u>25-02-2016</u>
Name of Senior Management person as defined in the		<u>25-02-2016</u>



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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.
2000 2000

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

	PSIG	Serial Number
Tank1:	250	6-02
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 Portable: 444 Mobile: _____

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Name of person completing this form (please print) Jason Smith	Official Title Account Manager	
Signature 	Telephone No. 519-246-1019	Date (dd-mmm-yyyy) 25-02-2016



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) McRobert Fuels		For Office Use - Party No.	
Street No. 4755	Street Name / 911 Number / Address, if applicable Egremont Dr.		
Town / City or Township / Country Strathroy		Province Ont.	Postal Code N7G 3H3
Telephone No. 519-246-1019	Fax No. 519-246-1160	Contact Name Jason Smith	
E-mail jason@mcrobertfuels.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		Province	Postal Code
Telephone No.	Fax No.	Contact Name	

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

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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.

Fenced in compound on southeast corner of building where compressed gases are stored 102m away. Above ground 78,000 litre diesel tank 33.8m away. Above ground 39,000 litre gas tank 50.3m away from projected dispenser location

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

Indoor sprinkler system, fire route around perimeter of building. Four fire hydrants located at the north, east, south and west side of main building.

Fire extinguishers located at fuel tanks and salt storage building.

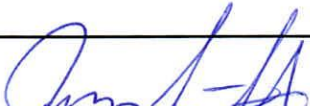
List of fire protection controls (e.g., fire detection systems, fire notification systems, alarm systems, automatic shut off devices, fusible links, etc.) and describe their function, use and operation.

Main fire panel which controls the whole building. A nitrogen system will be used that will be tied to the emergency stop. The actuator is only open when the motor is running and closed when not in use. There will be a fusible plug on the actuator that will melt and dump the nitrogen in the event of a fire.

Maintenance and testing schedule for fire protection controls and devices.

Testing done monthly on fire alarm. Annual fire drill performed and inspection of fire alarm and sprinkler system.

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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 <u>Jim Edmondson</u>	For Office Use - Party No.	Name <u>Corporate Contact Centre</u>	For Office Use - Party No.
Official Title <u>Manager of Facilities Management</u>		Official Title <u>Corporate Contact Centre</u>	
Telephone No. <u>519-741-2600 Ext.4754</u>	Fax No. <u>519-741-2693</u>	Cell No. <u>519-741-2345</u>	Fax No. <u>519-741-2872</u>
E-mail <u>jim.edmondson@kitchener.ca</u>		E-mail <u>info@kitchener.ca</u>	
Role and responsibilities in emergency <u>Key Contact</u>		Role and responsibilities in emergency <u>Corporate Contact/Customer Service</u>	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name <u>Albert Tenbrugencate</u>	For Office Use - Party No.	Name <u>Jim Edmondson</u>	For Office Use - Party No.
Official Title <u>Facilitator-Corporate Emergency Preparedness</u>		Official Title <u>Manager of Facilities Management</u>	
Telephone No. <u>519-741-2600 Ext.4903</u>	Fax No. <u>519-741-2693</u>	Telephone No. <u>519-741-2600 Ext.4754</u>	Fax No. <u>519-741-2693</u>
E-mail <u>albert.tenb@kitchener.ca</u>		E-mail <u>jim.edmondson@kitchener.ca</u>	
Role and responsibilities in emergency <u>Control person</u>		Role and responsibilities in emergency <u>Key Contact</u>	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name <u>Direct Detect</u>	For Office Use - Party No.	Name <u>Jason Smith</u>	For Office Use - Party No.
Official Title <u>Dispatch</u>	E-mail <u>fire@kitchener.ca</u>	Official Title <u>Account Manager</u>	E-mail <u>jason@mcrobertfuels.com</u>
Telephone No. <u>519-741-2494</u>	Fax No. <u>519741-2696</u>	Telephone No. <u>519-246-1019</u>	Fax No. <u>519-246-1160</u>
Role and responsibilities in emergency <u>Dispatch</u>		Role and responsibilities in emergency <u>Initiate emergency calls within company</u>	
Fire Services Address <u>270 Strasburg Rd, Kitchener, Ont.</u>		Propane Supplier Address <u>4755 Egremont Dr, Strathroy, Ont.</u>	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name <u>General Inquiries</u>	For Office Use - Party No.	Name <u>Jim Edmondson</u>	For Office Use - Party No.
Official Title	E-mail <u>fire@kitchener.ca</u>	Official Title <u>Manager of Facilities Management</u>	
Telephone No. <u>519-741-2496</u>	Fax No. <u>519-741-2697</u>	Telephone No. <u>519-741-2600 Ext.4754</u>	Fax No. <u>519-741-2693</u>
Role and responsibilities in emergency <u>Key Contact</u>		E-mail <u>jim.edmondson@kitchener.ca</u>	
Fire Services Address <u>270 Strasburg Rd, Kitchener, Ont.</u>		Municipality Name and Address <u>City of Kitchener 200 King St. W. Kitchener, Ont. N2G 4G7</u>	

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Name of person completing this form (please print) <u>Jason Smith</u>	Official Title <u>Account Manager</u>
Signature 	Telephone No. <u>519-246-1019</u>
	Date (dd-mmm-yyyy) <u>25-02-2016</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.

- 7.12.4 A tank and its equipment shall not be less than 7.5m from any drain or pit unless the pit is equipped with an automatic flammable vapour leak detection system.
The closest drain or sewer opening is 32.9m away from projected dispenser location.
- 7.1.7 A propane tank shall not be installed within a diked area containing a tank of flammable or combustible liquid and shall be located not less than 20ft (6m) from the centreline of the dike.
- 7.1.8 Except as prohibited in Clause 7.1.7, a propane tank of 125 USWG (475 L) capacity or less may be installed adjacent to a tank containing combustible or flammable liquid, provided that the capacity of the tank of such liquid is 250 gal (1150 L) or less. When the capacity of either tank is in excess of the applicable limits, the separation between the propane tank and the combustible or flammable liquid tank shall be not less than 20 ft (6 m). In the case of an underground tank, the separation may be reduced to 10 ft (3 m).
Above ground diesel tank is 33.8m away and above ground gas tank is 50.3m away.

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

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

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

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

Training Date (dd-mmm-yyyy) 04-12-2015	Print Name of Training Provider: Michael Born
	Print Name of Instructor: Butch Desjardine
Training Date (dd-mmm-yyyy) 04-12-2015	Print Name of Training Provider: Sean Kirby
	Print Name of Instructor: Butch Desjardine
Training Date (dd-mmm-yyyy) 04-12-2015	Print Name of Training Provider: David Fries
	Print Name of Instructor: Butch Desjardine

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Signature 	Telephone No. 519-248-1019
	Date (dd-mmm-yyyy) 25-02-2016

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McRobert Fuels

2016-04-15 10:07



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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)	Print Name of Training Provider:
	Print Name of Instructor:
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)	Print Name of Training Provider:
	Print Name of Instructor:
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) 04-12-2015	Print Name of Training Provider: Michael Born
	Print Name of Instructor: Butch Desjardine
Training Date (dd-mmm-yyyy) 04-12-2015	Print Name of Training Provider: Sean Kirby
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Training Date (dd-mmm-yyyy) 04-12-2015	Print Name of Training Provider: David Fries
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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) 15-05-2016	Print Name of Training Provider: McRobert Fuels
	Print Name of Instructor: Butch Desjardine
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) 15-05-2016	Print Name of Training Provider: McRobert Fuels
	Print Name of Instructor: Butch Desjardine
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) 15-05-2016	Print Name of Training Provider: McRobert Fuels
	Print Name of Instructor: Butch Desjardine
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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Signature 	Telephone No. 519-246-1019
	Date (dd-mmm-yyyy) 25-02-2016



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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).
Key contact has the authority to enact the emergency plan or not enact the plan. In his absence the alternate contact or another manager shall activate the emergency plan.

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).

Emergency evacuation to a safe spot meeting location, north, east, south or west. Look for wind indicator and proceed upwind of the incident.

Example: flag or wind sock indicating wind direction

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).

Key contact, alternate contact or another manager shall call emergency services immediately upon discovery of any hazard that may result in a dangerous situation by telephone or a cellular device.

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

Fire Department is provided with a lock box containing a building master key and a fob for card readers. Fire alarm automatically opens entry gates.

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

Either by phone or email.

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

Jim Edmondson is key contact - 5 minutes

Albert Tenbruggencate is alternate contact - 15 minutes

McRobert Fuels - Al or Ray McRobert - 1hr

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Signature 	Telephone No. 519-246-1019
	Date (dd-mmm-yyyy) 25-02-2016



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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 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)	103	_____
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)	103	_____

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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:

Kitchener Fire Department has no concerns with the proposed tank installation as their are no sensitive receptors located within the blast area as submitted by applicant.

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 Phil Mellor		25-02-2016

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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 or 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) 24/02/2016	Capacity of single largest propane storage vessel (USWG) 5000
Tank setback coordinates. Indicate placement on the map.	
Front: 334m	Right side property line: 152m
Rear: 264m	Left side property line: 166m
GPS coordinates of single largest vessel: 43° 24' 45.08"N 80° 26' 14.84" W	

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) Jason Smith	Official Title Account Manager
Signature 	Telephone No. 519-246-1019
	Date (dd-mmm-yyyy) 25-02-2016



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
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Level 1 Risk and Safety Management Plan (RSMP)
Technical Standards and Safety Act
Propane Storage and Handling Regulation

SECTION C: SUBMISSIONS
Applicant must include a Facility Site Plan and Map of Surrounding Area

Facility Site Plan.

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

1. The storage location of fixed, portable, and mobile vessels.
2. The maximum volume, types and storage location of hazardous materials.
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)	Capacity of single largest propane storage vessel (USWG) 5000
Tank setback coordinates. Indicate placement on the map.	
Front: 334m	Right side property line: 152m
Rear: 264m	Left side property line: 166m
GPS coordinates of single largest vessel: 43° 24' 45.08"N 80° 26' 14.64" W	

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

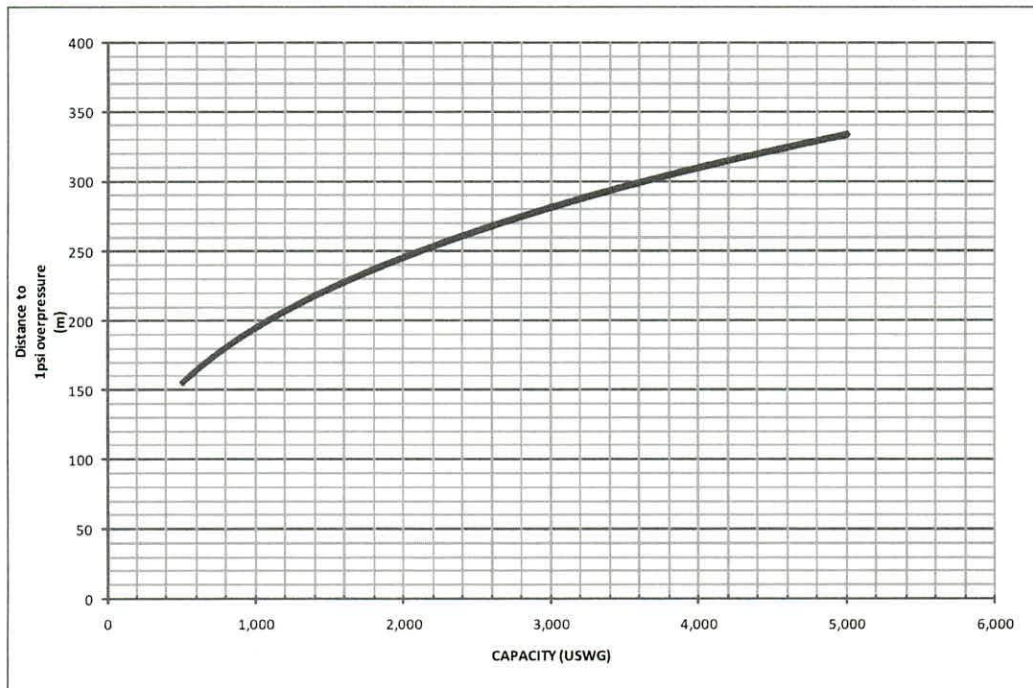
Table 1: Distance Table

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)





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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. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Fastenal Canada</u> Address: <u>900 Wabanaki Dr.</u> City: <u>Kitchener</u> Province <u>Ont.</u> Postal Code <u>N2C 2E8</u>			X		<u>190</u> 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".

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Signature 	Telephone No. <u>519-246-1019</u>
	Date (dd-mmm-yyyy) <u>25-02-2016</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	15	250
# 40	11.75		
# 33.3	9.62	25	150
# 30	8.8	2	12
# 20	5.8	8	32
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity 444			

Tanks Stored On-site Not Connected for Use

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

Total Cylinder Capacity	444
Total Tank Capacity	0
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	444