



Technical Standards and Safety Authority
www.tssa.org
14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X2K4
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
- a facility with a fixed propane storage capacity of
USWG of portable propane storage capacity on:

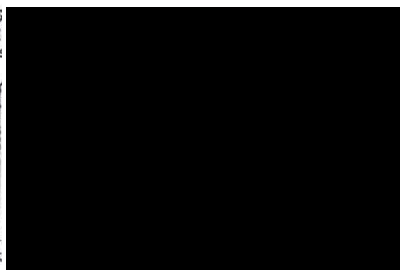
Failure to fully complete this form may result in rejection.
Making a false statement may result in a fine or prosecution
under the *Technical Standards and Safety Act*

License Number: **D076365628-C**

Check applicable type of propane operations:

Cylinder Motor Fill Filling Plant Coupling/lock

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: **Picnic Island Resort Ltd.** Ontario Corporation No., if applicable: _____
Operator Name (if different from above): **Same**

Telephone No.: **705-756-2421** Fax No.: **705-756-1405** E-mail: **picnicisland.com**

B Street No.: **175** Street Name / B11 Number / Address, if applicable: **Picnic Island Road**
Town / City or Township / County: **Honey Harbour** Province: **On** Postal Code: **P0E 1E0**

Mailing address if different from above:

C Street No.: **175** Street Name / B11 Number / Address, if applicable: **Picnic Island Road P O Box 58**
Town / City or Township / County: **Honey Harbour** Province: **On** Postal Code: **P0E 1E0**

D Information on Container Refill Centre or Filling Plant
Location of facility:
Street No.: **175** Street Name / B11 Number / Address, if applicable: **Picnic Island Road** Nearest Major Intersection: **City Rd 5 (Honey Harbour Rd. & Picnic Island Road)**
Town / City or Township / County: **Honey Harbour** Province: **On** Postal Code: **P0E 1E0**

Name of License Holder: **Picnic Island Resort Ltd.**

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): **Ken Aquino** ROT type: **PTI 100-9 Cert # 111703 (PPD-3)**

Municipality (or municipalities if the facility or its hazard distance touches multiple borders): **Township of Georgian Bay**

Hours of operation:

This document is valid until the next license 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 License Holder: Picnic Island Resort Ltd.	Signature:	Date (dd-mm-yyyy): 08 05 2012
Name of Senior Management person as defined in the Regulation holding the Record of Training: Ken Aquino		



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SECTION A: GENERAL INFORMATION (cont'd)

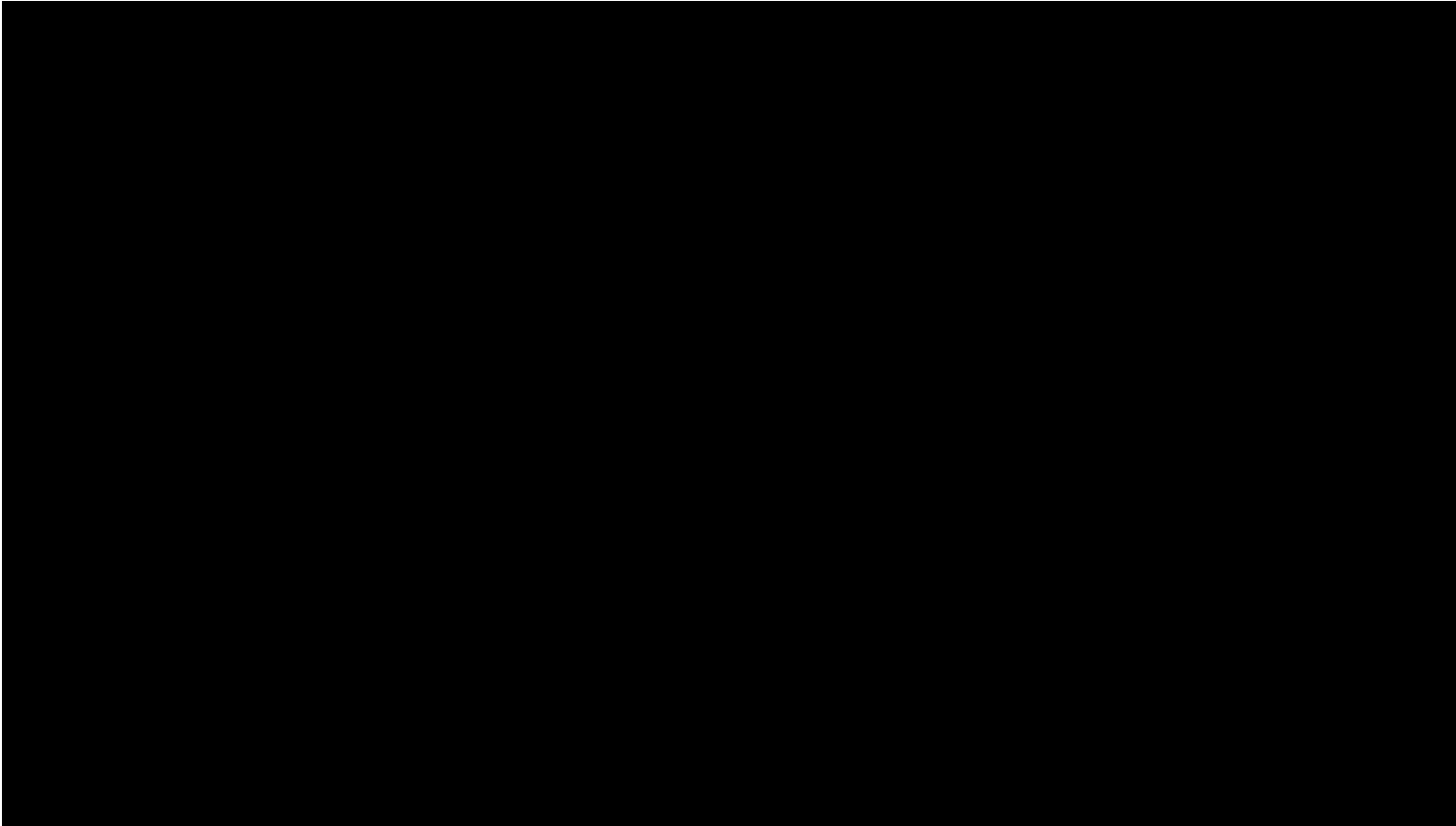
Indicate the year the facility was established. 1972	Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. None
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Identify the psig rating and serial number for each fixed propane storage tank on site.

	PSIG	Serial Number
Tank1:	250	6746
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: 1450 USWG Portable: 0 Mobile: 0



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Name of person completing this form (please print) Jason Greenway	Official Title Manager	
Signature 	Telephone No. 705-756-2421	Date (dd-mm-yyyy) 08 05 2012



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

Name of Propane Supplier(s) Superior Propane - Regional Operation Centre			
Street No. 251	Street Name / 911 Number / Address, if applicable Woodland Road East Unit 217		
Town / City or Township / Country Guelph		Province On	Postal Code N1H 8J1
Telephone No. 877-873-7467	Fax No. 519-836-7766	Contact Name Bruce Graham	
E-mail grahamb@superiorpropane.com			

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>			
Superior Propane			
Street No. 789	Street Name / 911 Number / Address, if applicable Bayview Drive		
Town / City or Township / Country Barry		Province On	Postal Code L4N 9A5
Telephone No. 705-762-4396	Fax No. 519-836-7766	Contact Name Wayne Larocque	
E-mail larocquW@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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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 - 3 Gasoline tanks 2 are 23,000 litres 1 is 6,000 litres total of 75,000 litres Underground tank (Refer to site map)

Diesel - 1x 23,000 litre tank Underground tank (Refer to site map)

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

A-B-C Fire Extinguishers. Dry Chemical AMEPEX ABC 20lb Mod Ay11

1 located @ Propane dispenser

1 located @ office

1 located @ gas dock 1 located @ Fry Hut

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 - isolation valve between the tank and the downstream propane dispensing equipment.

2. Emergency Shut Off - at propane tank. This shuts down the pump and closes a solenoid valve upstream of hoses.

3. Power supply breaker inside the gas bar building. This cuts all power to the propane system - shuts down pump; closes solenoid valve.

Maintenance and testing schedule for fire protection controls and devices.

Maintenance and testing is undertaken by Superior Propane according to Superior's Maintenance Standards. Schedule for key equipment is:

1- Pumps - (pumps every 3 months; pump motor: check belts monthly; grease pump every 6 months).

2- ISC valve (test for closure every 6 months).

3- Storage tank Relief Valves - inspected every 2 years; replacement schedule as per provincial regulations.

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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 Jason Greenway		Name Jason Greenway	
Official Title Manager		Official Title Manager	
Telephone No. 705-756-2421	Fax No. 705-756-1405	Cell No. 905-308-5972	Fax No. 705-756-1405
E-mail info@picnicisland.com		E-mail info@picnicisland.com	
Role and responsibilities in emergency Co-ordinate site response plan (ERP)		Role and responsibilities in emergency Co-ordinate site response plan (ERP)	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Jason Greenway		Name Jason Greenway	
Official Title Manager		Official Title Manager	
Telephone No. 705-756-2421	Fax No. 705-756-1405	Telephone No. 705-756-2421	Fax No. 705-756-1405
E-mail info@picnicisland.com		E-mail info@picnicisland.com	
Role and responsibilities in emergency Co-ordinate site response plan (ERP)		Role and responsibilities in emergency Co-ordinate site response plan (ERP)	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Jim Boswell	For Office Use - Party No.	Name Superior Propane Hot Line	For Office Use - Party No.
Official Title Director of Protection Services/Fire Chief		Official Title	
Telephone No. 705-538-2765	Fax No. 705-538-1328	Telephone No. 877-873-7467	Fax No. N/A
E-mail jboswell@gbtownship.ca		E-mail n/a	
Role and responsibilities in emergency Coordinate Emergency Response / advise on Fire Service Response. Liaise with police services.		Role and responsibilities in emergency Identify and dispatch Superior Propane and or LPERGC emergency response personal as required	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Lindsay Matthews	For Office Use - Party No.	Name Susan Boonstra	
Official Title Fire Prevention Officer		Official Title Clerk	
Telephone No. 705-538-2765	Fax No. 705-538-1328	Telephone No. 705-538-2337 x 231	Fax No. 705-538-1850
E-mail lmatthews@gbtownship.ca		E-mail sboonstra@gbtownship.ca	
Role and responsibilities in emergency Coordinate Emergency Response / advise on Fire Response when key contact is not available and liaise with police services.		Municipality Township of Georgian Bay	

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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.

E-stop located @ the dispenser area to cut the electrical in the event of an emergency, shutting the power of to the solenoid stopping the flow of propane.

Lined area for additional safety measures.

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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-mm-yyyy) None	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) None	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) 03-05-2011	Print Name of Training Provider: FSN Training & Development Inc.	Please Note - a ROT is valid for 3 years
	Print Name of Instructor: Bill Bird	
Training Date (dd-mm-yyyy) 26-08-2011	Print Name of Training Provider: FSN Training & Development Inc.	Please Note - a ROT is valid for 3 years
	Print Name of Instructor: Bill Bird	
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) Q3-2012	Print Name of Training Provider: Key Contact or Alternate Please note: Canadian Propane Gas Association
	Print Name of Instructor: to be arranged has currently developed the course PTI 911-02
Target Date (dd-mm-yyyy)	Print Name of Training Provider: content and it and its provider is available to be
	Print Name of Instructor: taught in the first half of this 2012.
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) Q3-2012	Print Name of Training Provider: Key Contact to train staff
	Print Name of Instructor: to be arranged
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) Q3-2012	Print Name of Training Provider: FSN Training & Development Inc. Please Note - a ROT is valid for 3 years
	Print Name of Instructor: Bill Bird Note: To call training provider if any training is required
Target Date (dd-mm-yyyy)	Print Name of Training Provider: in 2012
	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 operator or alternate will contact emergency services by calling 911 and will provide warnings outlined in the attached: "Propane Emergency Response Procedures" placard (to be posted on site and part of the employee training). If it is safe to do so this could involve advising neighbors to evacuate. The owner/operator may also contact Superior Propane via the emergency number identified in the ERP.

Describe what action is to be taken and by whom when a warning is issued (including details of a meeting place in a safe identified area and activating the evacuation plan, if necessary).
 The owner /operator or alternate should first follow the actions in the ERP provided herein. Stage evacuation, if the release of propane cannot be stopped by cutting electrical power may be required. Note a specific muster point is not advisable, since a propane plume can blow in any direction.
 Actions will be taken by an on duty ROT person(s)

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 event and implement the appropriate emergency response actions. When the system is not in operation, the ISC valve (main isolation valve) is closed, and the propane system is unattended. Any accident involving the propane tank during such times will require the intervention of random, nearby individuals.

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 area that is easily accessible.
 The fire access routes are identified in the attached site plan.

Describe how the licence holder will ensure continual flow of updated information to authorities.
 The critical information required from the license holder is (a) how to shut the system down and (b) the fill level in the tank (if known)
 Fill level is relevant from a time-to-BLEVE perspective (a near empty tank will BLEVE sooner than a full tank if there is a fire impingement on the tank).
 This information will be provided to the authorities by Jason Greenfield or alternate.

How long will it take the facility liaison person to respond to the site.
 Key Contact: 5 to 10 minutes to arrive at the facility in the event of an emergency

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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) | None _____ | |
| 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) | 9.6 m - Lake Huron _____ | |

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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.

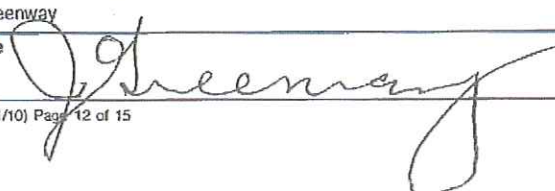
The licence holder will submit a scaled aerial map of the surrounding area showing the following information:

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) 15-04-2012	Capacity of single largest propane storage vessel (USWG) 1450 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 64.1 m	Right side property line: 9.5 m
Rear: 10.1 m	Left side property line: 29.1 m
GPS coordinates of single largest vessel: 44.863888 -79.826341	

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

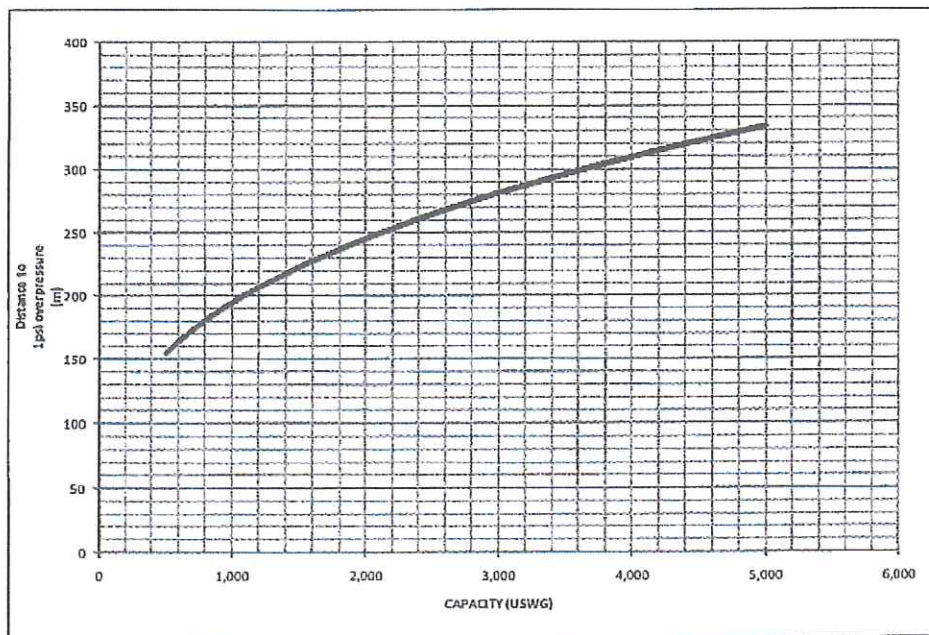
Table 1: Distance Table

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: <u>None</u> Address: _____ City: _____ Province _____ Postal Code _____	x				0 m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted]		x			24 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>Picnic Island Resort Ltd (Fry Hut - Gas Hut)</u> Address: <u>175 Picnic Island Road</u> City: <u>Honey Harbour</u> Province <u>On</u> Postal Code <u>P0E 1E0</u>			x		10 m
Commercial building units - continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>Picnic Island Resort (Cabins / Trailers)</u> Address: <u>175 Picnic Island Road</u> City: <u>Honey Harbour</u> Province <u>On</u> Postal Code <u>P0E 1E0</u>				x	160 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				0 m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>None</u> Address: _____ City: _____ Province _____ Postal Code _____	x				0 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) Jason Greenway	Official Title Manager
Signature 	Telephone No. 705-756-2421
	Date (dd-mm-yyyy) 08 05 2012



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

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

Portable Storage Additional Information Sheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	0	0
# 100	29.5	0	0
# 40	11.75	0	0
# 33.3	9.62	0	0
# 30	8.8	0	0
# 20	5.8	0	0
# 10	2.9	0	0
# 5	1.5	0	0
Total Cylinder Capacity 0			

Tanks Stored On-site Not Connected for Use

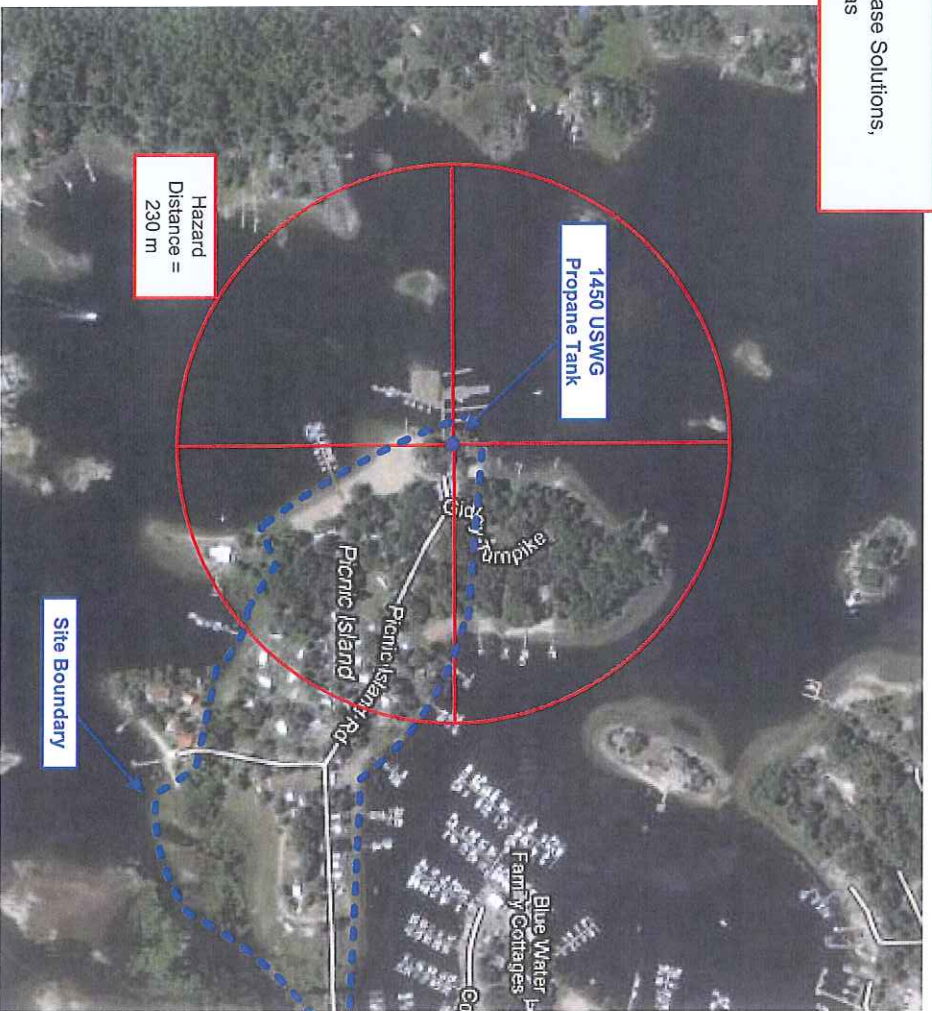
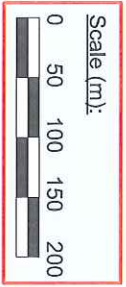
Tank Size in USWG	Quantity	Total Volume in USWG
0	0	0
Total Tank Capacity 0		

Total Cylinder Capacity	0
Total Tank Capacity	1450 USWG
Total Portable Capacity	0

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 Greenway	Official Title Manager	
Signature 	Telephone No. 705-756-2421	Date (dd-mm-yyyy) 08 05 2012

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 Map data ©2012 Google, Tele Atlas



Setback Distances to Site Boundary
 North: 9.6 m East: 64.1 m
 South: 29.1 m West: 10.1 m
 Approximate Due to Water Levels

Municipality (ies) within the 1 psi overpressure circle:
 Township of Georgian Bay

Map of Surrounding Area

Capacity of Propane Storage Tank = 1450 USWG

Municipal Contact
 Susan Boonstra
 Clerk, Township of Georgian Bay
 99 Lone Pine Road, Port Severn, Ontario, L0K 1S0
 Tel: 705-538-2337 Fax: 705-538-1850
 email: sboonstra@gbtownship.ca

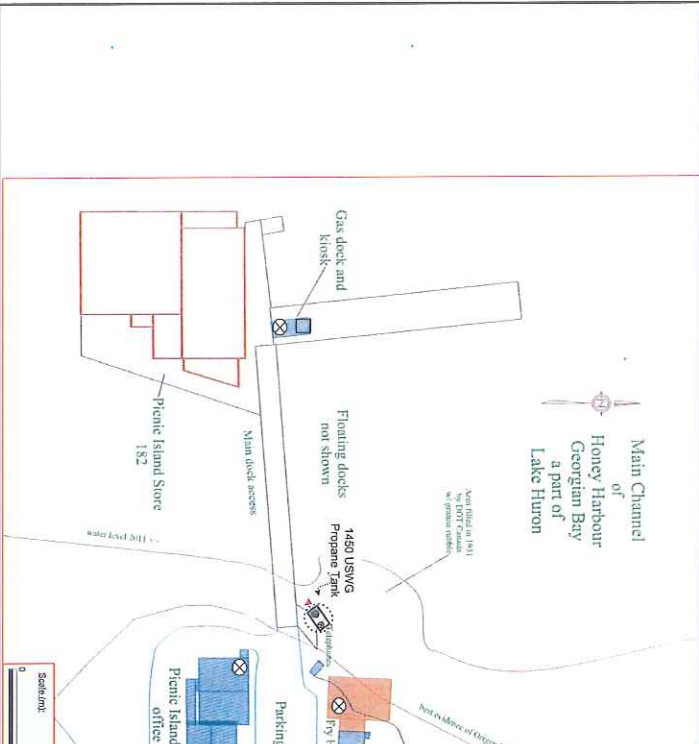
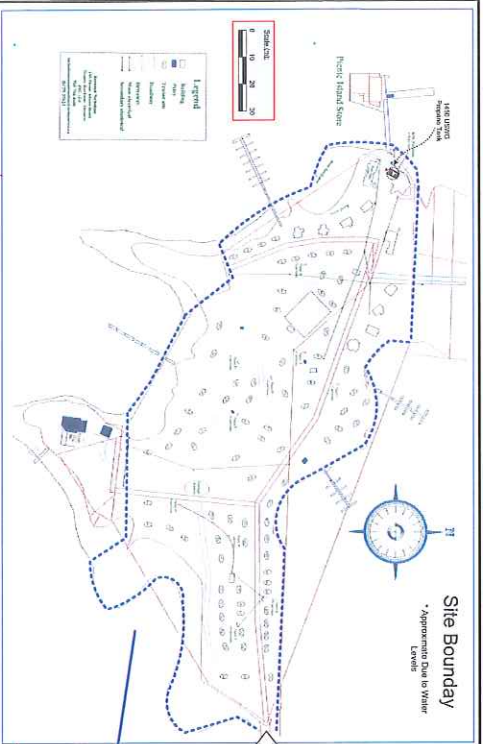
Picnic Island Resort Ltd.
 175 Picnic Island Rd, Box 58 Honey Harbour, ON P0E 1E0

GPS Co-ordinates of Propane Storage Tank
 GPS Co-ordinates = 44.863888, -79.826341

Legal Description
 175 Picnic Island Rd FR: 322 9 .0000 ISLAND 34
 OR PICNIC ISLAND RP 35R12685 PARTS 1 TO 4

Drawn by: L. Willis Date: April 16, 2012

Circular Distance to 1 psi overpressure:
 Denoted by circle centred on tank; radial distance = 230 m

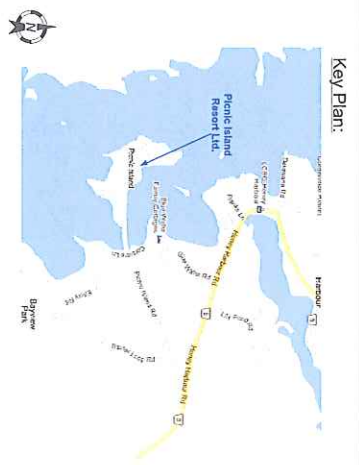


Underground Tanks:
 Gasoline 2223,000 L
 1x6,000 L
 Diesel 1x23,000 L



Site Plan for
 175 Picnic Island Road
 Honey Harbour
 Showing existing
 structures

Prepared by:
 Honey Harbour
 182 Picnic Island Road
 Honey Harbour, Ontario
 T9S 2S6
 M5N 3A9
 416-291-2222



Notes:
 1. Tank distances to property lines:

Property Line Distance	Distance
North	9.6 m
South	29.1 m
East (Front)	64.1 m
West	10.1 m

- 2. Fire Extinguisher
- 3. Egress/Fire Access Route:
 Egress/access points off Picnic Island Road or by boat
- 4. E-Stop
- 5. Propane Cylinder Storage Area (none)

FSN Training & Development

Site Plan
 Picnic Island Resort Ltd.
 175 Picnic Island Rd, Box 58, Honey Harbour, ON P0E 1E0

Legal Description
 175 Picnic Island Rd FRS-322 9.0000 ISLAND 34 OR PICNIC ISLAND RP 35R12885
 PARTS 1 TO 4

Edited by: L. Willis
 Date: April 15, 2012
 Checked by:
 Rev 0