



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X 2X4
Fax: 416.231.4903
Customer Service: 1.877.682.8772

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

This Level 1 RSMP applies to:

- a facility with a total propane storage capacity of 5,000 USWG or less; or
- a facility with a fixed propane storage capacity of exactly 5,000 USWG and no more than 500 USWG of portable propane storage capacity on site.

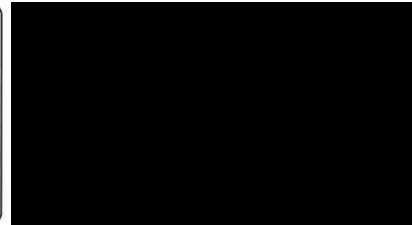
Failure to fully complete this form may result in rejection.
Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number 0076400928-C

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 BRADFORD RENTAL SALES & SERVICE LTD Ontario Corporation No., if applicable 100616416

Operator Name (if different from above)

Telephone No. 905-775-7101 Fax No. 905-775-4089 E-mail bradfordrental@bellnet.ca

B Street No. 192 Street Name / 911 Number / Address, if applicable BRIDGE ST

Town / City or Township / County BRADFORD Province ONTARIO Postal Code L3Z 2B4

C Mailing address if different from above.

Street No. PO BOX 959 Street Name / 911 Number / Address, if applicable

Town / City or Township / County BRADFORD Province ONTARIO Postal Code L3Z 2B4

Information on Container Refill Centre or Filling Plant

D Location of facility.

Street No. 192 Street Name / 911 Number / Address, if applicable BRIDGE ST Nearest Major Intersection HWY 11

Town / City or Township / County BRADFORD Province ONTARIO Postal Code L3Z 2B4

Name of Licence Holder BRADFORD RENTAL SALES & SERVICE LTD.

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). DAN PORTER ROT type 7344 (PDD-3)

Municipality (or municipalities if the facility or its hazard distance touches multiple borders) TOWN OF BRADFORD WEST & WILLIMBURY

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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Name of Licence Holder <u>GARY PORTER</u>	Print name	Signature	Date (dd-mm-yyyy) <u>04-05-2012</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>GARY PORTER</u>			



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SECTION A: GENERAL INFORMATION (cont'd)

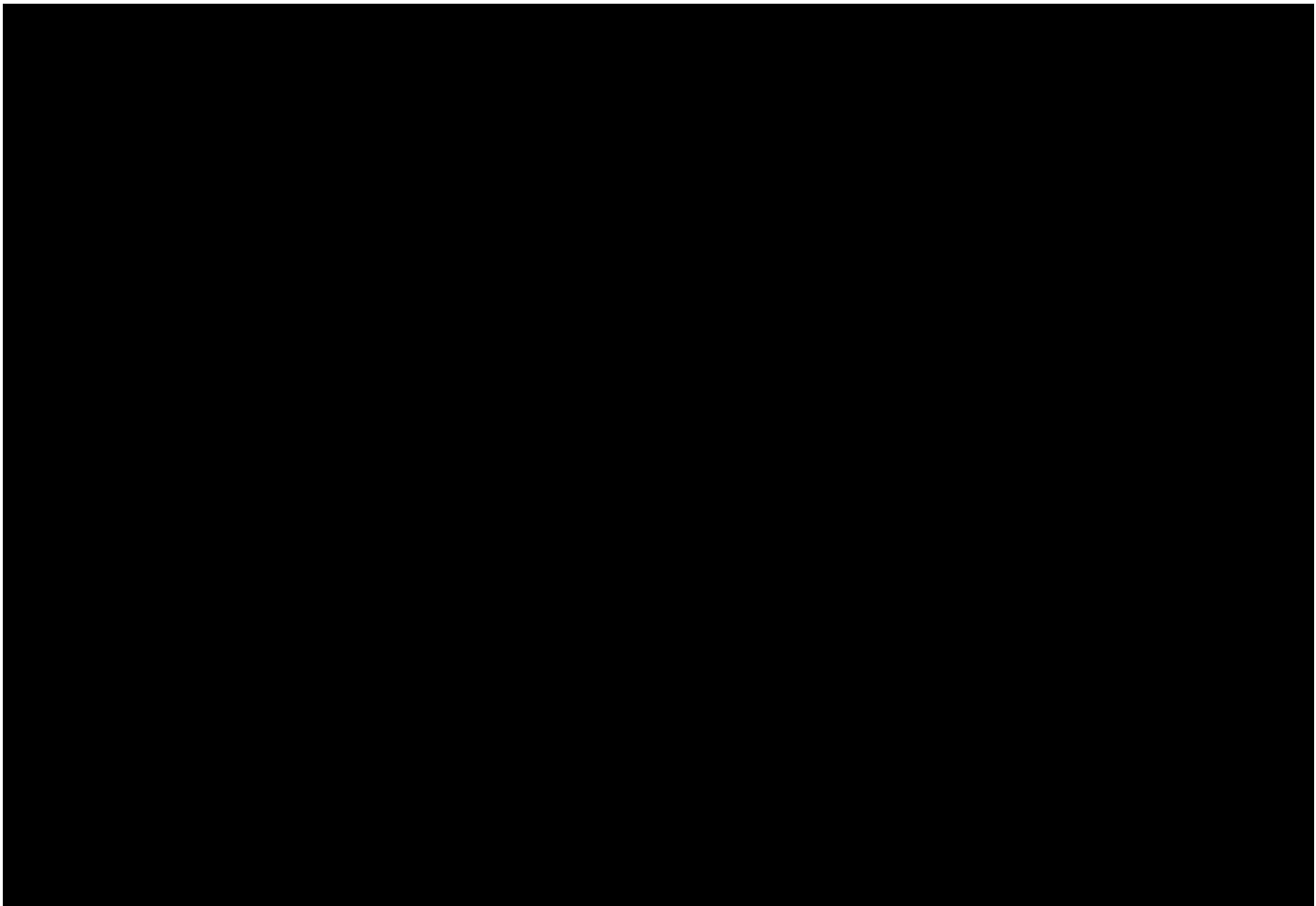
Indicate the year the facility was established. 1993 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.

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

	PSIG	Serial Number
Tank 1:	<u>250 PSI AT 120°F</u>	<u>5592867</u>
Tank 2:	_____	_____
Tank 3:	_____	_____

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

Fixed: 2000 USWG - 1 TANK Portable: 2848.35 Mobile: 0



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Name of person completing this form (please print) <u>GARY PORTER</u>	Official Title <u>PRESIDENT</u>	
Signature <u>[Signature]</u>	Telephone No. <u>905-775-7101</u>	Date (dd-mm-yyyy) <u>13-03-2012</u>



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

Name of Propane Supplier(s) <i>SUPERIOR PROPANE</i>				[Redacted]	
Street No. <i>789</i>	Street Name / 911 Number / Address, if applicable <i>BAYVIEW DRIVE</i>				
Town / City or Township / Country <i>BARRIE</i>			Province <i>ONTARIO</i>	Postal Code <i>L4N 9A5</i>	
Telephone No. <i>811-813-7467</i>	Fax No. <i>705-722-4762</i>	Contact Name <i>JACK LAROCQUE</i>			
E-mail					

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>				[Redacted]	
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 <i>N/A</i>	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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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.

TWO 1345 LTR DIESEL ABOVE GROUND TANKS
REGULAR GAS CANS - NINE - 20LTR, 10 - 5 LTR, THREE - 10 LTR.
ACETYLENE, ARGOSHIELD, HELIUM

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

FIRE EXTINGUISHERS - ONE IN PROPANE DISPENSER CABINET
- FOUR INSIDE 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.

- 1) FUSIBLE LINK ON ISC VALVE
- 2) EMERGENCY STOP PUSH BUTTON MOUNTED OUTSIDE COMPOUND ON FENCE
- 3) ISC VALVE SHUT WITH LEVER.
- 4) POWER SHUT OFF WITH BREAKER INSIDE BUILDING

Maintenance and testing schedule for fire protection controls and devices.

MAINTENANCE & TESTING UNDER TAKEN BY SUPERIOR PROPANE. ACCORDING TO SUPERIOR PROPANE'S MAINTENANCE STANDARD SCHEDULE FOR KEY EQUIPMENT. TESTING PUMP - 3 MONTHS, ISC VALVE - 6 MONTHS, PRUS - EVERY 2 YEARS - VISUAL. REPLACEMENT AS PER PROVINCIAL REGULATIONS. EMERGENCY STOP IS TESTED ONCE A MONTH.

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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact

Name GARY PORTER
Official Title PRESIDENT
Telephone No. 905-775-3262 Fax No. 905-775-4089
E-mail
Role and responsibilities in emergency
COORDINATE SITE RESPONSE

5. Facility 24-Hour Contact Person

Name DAN PORTER
Official Title SECRETARY/TREASURER
Cell No. 905-715-2917 Fax No. 905-775-4089
E-mail
Role and responsibilities in emergency
COORDINATE SITE RESPONSE

2. Facility Contact Personnel - Alternate Contact

Name DAN PORTER
Official Title SECRETARY/TREASURER
Telephone No. 905-775-7889 Fax No. 905-775-4089
E-mail
Role and responsibilities in emergency
COORDINATE SITE RESPONSE

6. Name of Facility Manager

Name GARY PORTER
Official Title PRESIDENT
Telephone No. 905-775-3262 Fax No. 905-775-4089
E-mail
Role and responsibilities in emergency
COORDINATE SITE RESPONSE

3. Local Fire Services - Key Contact

Name KEVIN GALLANT For Office Use - Party No.
Official Title FIRE CHIEF E-mail KGALLANT@TOWNOFBWB.COM
Telephone No. (905) 775-7311 EXT 4101 Fax No. (905) 775-0163
Role and responsibilities in emergency
SITE INCIDENT COMMANDER / ADVISOR TO COUNCIL
Fire Services Address
75 MELBOURNE DR. P.O. BOX 1226 BLADFORD, ONT

7. Propane Supplier Key Contact Person

Name SUPERIOR PROPANE HOT LINE For Office Use - Party No.
Official Title E-mail
Telephone No. 811-873-7467 Fax No.
Role and responsibilities in emergency IDENTIFY + DISPATCH SUPERIOR PROPANE AND/OR LP ERGC EMERGENCY RESPONSE PERSONNEL AS REQUIRED
Propane Supplier Address

4. Local Fire Services - Alternate Contact

Name MICHAEL ROZARIO For Office Use - Party No.
Official Title DEPUTY FIRE CHIEF E-mail MROZARIO@TOWNOFBWB.COM
Telephone No. (905) 775-7311 EXT 4102 Fax No. (905) 775-0163
Role and responsibilities in emergency
INCIDENT COMMANDER / SAFETY OFFICER
Fire Services Address
75 MELBOURNE DR. BLADFORD, ONT

8. Municipal Contact

Name GLEN KNOX
Official Title ACTING CLERK
Telephone No. (905) 775-5366 Fax No. (905) 775-1050153
E-mail GKNOX@TOWNOFBWB.COM
Municipality Name and Address
100 DISSETTE ST UNIT 7/8 BLADFORD, ONT L3Z 2A7

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Name of person completing this form (please print) <u>GARY PORTER</u>	Official Title <u>PRESIDENT</u>
Signature <u>[Signature]</u>	Telephone No. <u>905-775-7101</u> Date (dd-mm-yyyy) <u>13-03-2012</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.

EMERGENCY STOP BUTTON WHICH WILL TRIP THE DISPENSER PUMP & CLOSES THE SOLENOID VALVE UPSTREAM OF THE HOSES.

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	905-775-7101	13-03-2012



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

3. Record of Emergency Training Provided - For most recent 12-month period.

Training on Emergency Response Plan and Procedures provided to facility key contacts.

Training Date (dd-mm-yyyy) 16-03-2012	Print Name of Training Provider: PTI-911-02. VERSION 1.01
	Print Name of Instructor: SELF DIRECTED PROGRAM
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) 21-03-2012	Print Name of Training Provider: BRADFORD RENTAL.
	Print Name of Instructor: GARY PORTER
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) 17-12-2010	Print Name of Training Provider: ALAN BRAKE #279
	Print Name of Instructor: ALAN BRAKE #279
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

4. Emergency Training Plan for Coming Year

Training on Emergency Response Plan and Procedures provided to facility key contacts.

Target Date (dd-mm-yyyy) <i>AS REQUIRED</i>	Print Name of Training Provider: <i>AS REQUIRED BY TSSA.</i>
	Print Name of Instructor:
Target Date (dd-mm-yyyy) <i>10-02-2013</i>	Print Name of Training Provider: <i>SELF DIRECTED PROGRAM</i>
	Print Name of Instructor:
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Target Date (dd-mm-yyyy) <i>01-03-2013</i>	Print Name of Training Provider: <i>GARY PORTER.</i>
	Print Name of Instructor: <i>GARY PORTER.</i>
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)	Print Name of Training Provider: <i>TO BE ARRANGED AS NEEDED</i>
	Print Name of Instructor:
Target Date (dd-mm-yyyy) <i>10-11-2013</i>	Print Name of Training Provider: <i>ALAN BRAKE *</i>
	Print Name of Instructor: <i>ALAN BRAKE</i>
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

**CURRENT ROT GOOD FOR 3 YEARS.
AS REQUIRED BY TSSA*

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	Date (dd-mm-yyyy) <i>13-03-2012</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).

THE ROT PERSON(S) ON DUTY WILL CONTACT 911 FOR EMERGENCY SERVICES AND WILL PROVIDE WARNINGS OUTLINED IN THE ATTACHED PROPANE EMERGENCY RESPONSE PROCEDURES PLACARD IF SAFE TO DO SO. WILL ALSO CALL KEY CONTACT IF POSSIBLE.

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).

ACTIONS & WARNING WILL BE TAKEN BY THE ROT PERSON(S) ON DUTY AS PER ATTACHED ERP. THE MUSTER LOCATION IS INSIDE BUILDING AT FRONT SALES COUNTER. A SPECIAL MUSTER POINT IS NOT ADVISABLE SINCE PROPANE PLUME CAN BLOW IN ANY DIRECTION. THE FACILITY IS WIDE OPEN ALLOWING PEOPLE TO SELF EVACUATE.

Communication with Emergency Response Authorities

Describe when and how the licence holder will give early warning to emergency response authorities (including a process to ensure that a call is placed to 911).

WHEN THE SYSTEM IS OPERATIONAL, A ROT PERSON WILL BE ON DUTY & BE IN PROPANE TANK AREA. HE WILL BE ABLE TO ASCERTAIN ANY ABNORMAL ACCIDENT EVENTS & IMPLEMENT THE APPROPRIATE ACTIONS. WHEN THE SYSTEM IS NOT IN OPERATION, THE ISC VALVE IS OFF & ANY ACCIDENT INVOLVING THE PROPANE TANK 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 IS IN A WIDE OPEN AREA & EASILY ACCESSIBLE BY BRIDGE STREET.

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

THE CRITICAL INFORMATION REQUIRED FROM THE LICENCE HOLDER IS FILL LEVEL OF THE TANK. FILL LEVEL IS RELEVANT FROM A TIME-TO-BLEVE (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 BY DAN OR GARY PORTER.

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

OWNER OPERATOR GARY PORTER OR DAN PORTER WILL RESPOND IN APPROXIMATELY 30 MINUTES AFTER EMERGENCY CALL.

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Signature 		Telephone No. 905-775-7101	Date (dd-mm-yyyy) 13-03-2012



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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 checked="" type="checkbox"/>	<input type="checkbox"/>
2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only)		<u>16m</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:

To be completed by the Licence Holder

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

The licence holder will respond to the Local Fire Services comments by: _____

(dd-mm-yyyy)

LOCAL FIRE SERVICES

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

Print name	Signature	Date (dd-mm-yyyy)
Local Fire Services Name CHIEF KEVIN GALLAGHER		13/04/2012

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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) <u>23-10-1993</u>	Capacity of single largest propane storage vessel (USWG) <u>2000 USWG</u>
Tank setback coordinates. Indicate placement on the map.	
Front: <u>50 FEET 15.24m</u>	Right side property line: <u>10 FEET 3.05m</u>
Rear: <u>752 FEET 229.21m</u>	Left side property line: <u>249 FEET 75.90m</u>
GPS coordinates of single largest vessel: <u>44.0638 LAT; 79.3257 LONG.</u>	

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SECTION C: SUBMISSIONS (cont'd)

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

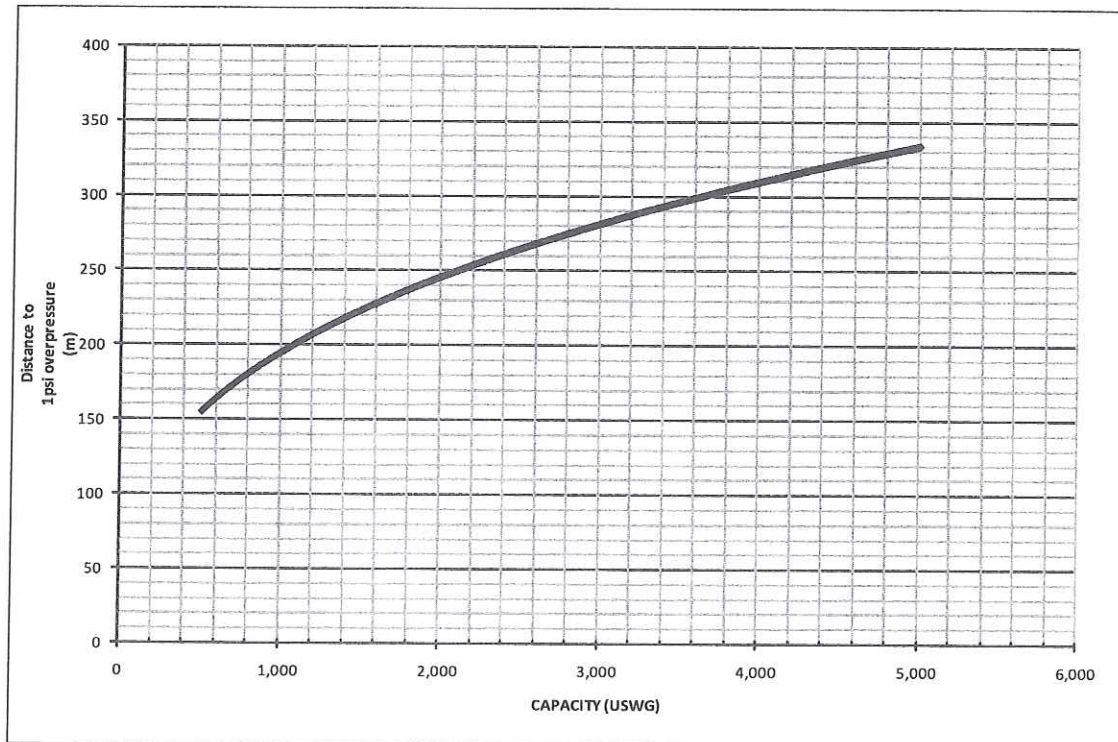
Table 1: Distance Table

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)





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

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>TIM HORTONS</u> Address: <u>185 BRIDGE ST</u> City: <u>BRADFORD</u> Province <u>ONTARIO</u> Postal Code <u>L3Z 3H2</u>		X			<u>64</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. [Redacted]		X			<u>30</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>ZIR IMPORTS</u> Address: <u>248 BRIDGE ST, Box 519</u> City: <u>BRADFORD</u> Province <u>ONTARIO</u> Postal Code <u>L3Z 2B1</u>		X			<u>75</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: <u>BUG FIRE SERVICE + SOUTH SIMCOE POLICE</u> Address: <u>MELBORNE ST</u> City: <u>BRADFORD</u> Province <u>ONTARIO</u> Postal Code <u>L3Z 2A8</u>		X			<u>3200</u> 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>GARY PORTER</u>	Official Title <u>PRESIDENT</u>
Signature 	Telephone No. <u>905-775-7101</u> Date (dd-mm-yyyy) <u>13-03-2012</u>



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14th Floor - Centre Tower
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Level 1 Risk and Safety Management Plan (RSMP)
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WORKSHEET

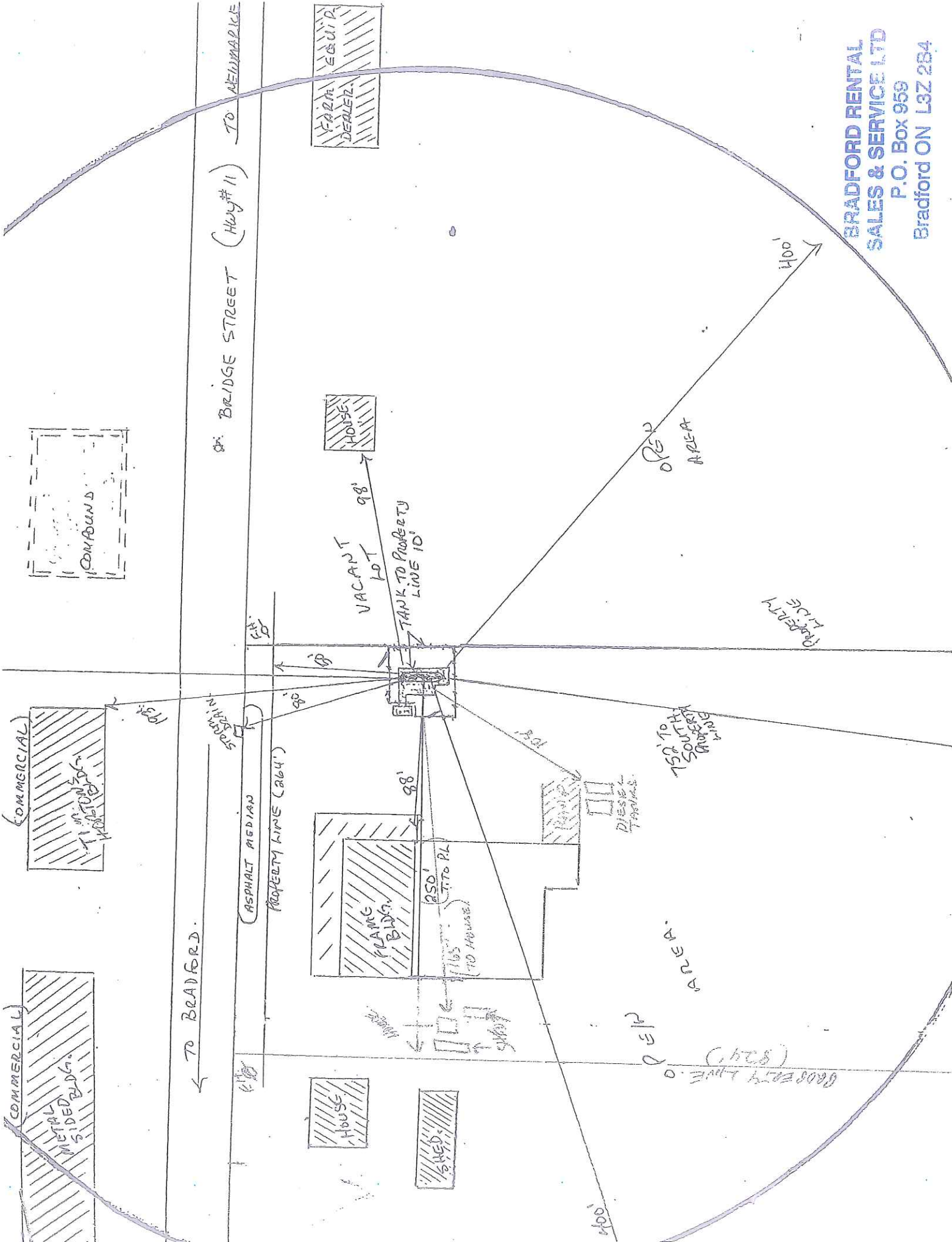
Portable Storage Additional Information Worksheet

Cylinder Size	Capacity in USWG	Quantity	Total Volume in USWG
# 420	123.9	0	—
# 100	29.5	70	2065.
# 40	11.75	5	58.75
# 33.3	9.62	40	384.80
# 30	8.8	5	44
# 20	5.8	50	290
# 10	2.9	2	5.8
# 5	1.5	0	—
Total Cylinder Capacity			2848.35.

Tanks Stored On-site Not Connected for Use

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

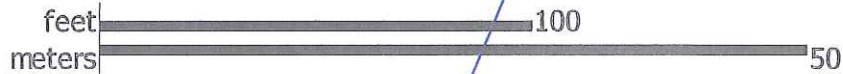
Total Cylinder Capacity	
Total Tank Capacity	
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	



BRADFORD RENTAL
 SALES & SERVICE LTD
 P.O. Box 959
 Bradford ON L3Z 2B4

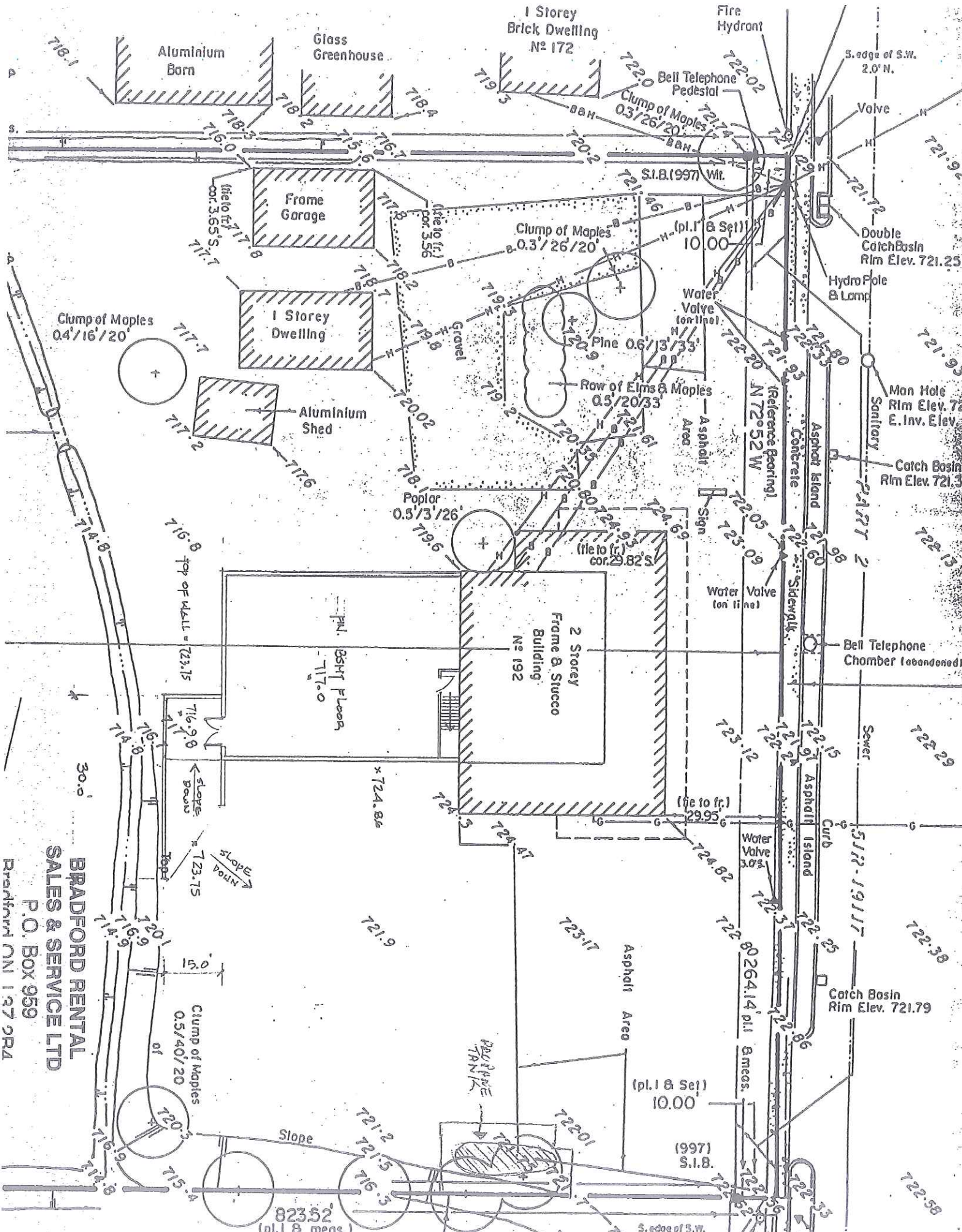


Google earth



LOCATION: 192 BRIDGE ST BRADFORD, ONTARIO
PREPARED: MAY 8, 2012.

2000 USWG HORIZONTAL TANK.
TANK SETBACKS - 50 FT SOUTH, 752 FT NORTH, 10 FT EAST, 249 FT WEST.
RADIUS: 400 FT
GPS CO-ORDINATES - 44° 06' 38.88 N 79° 32' 57.12 W
MUNICIPALITY - TOWN OF BRADFORD WEST & WILLIMBURY
CITY CLERK - GLEN KNOX
ADDRESS - 100 DISSETTE ST, #7+8, BRADFORD, ONT L3Z 2A7



BRADFORD RENTAL
 SALES & SERVICE LTD
 P.O. Box 959
 Bradford ON L2T 2P4

1 Storey
 Brick Dwelling
 N° 172

Frame
 Garage

1 Storey
 Dwelling

Aluminium
 Shed

2 Storey
 Frame & Stucco
 Building
 N° 192

FIN. BSH Floor
 -117.0

Clump of Maples
 0.5/40/20

Clump of Maples
 0.4/16/20

Poplar
 0.5/3/26

Row of Elms & Maples
 0.5/20/33

Pine 0.6/13/33

Clump of Maples
 0.3/26/20

Fire Hydrant

Bell Telephone Pedestal

Clump of Maples 0.3/26/20

S.I.B.(1997) Wtr.

(pl. I & Set) 10.00

Water Valve (on line)

Double Catch Basin Rim Elev. 721.25

Hydro Pole & Lamp

Man Hole Rim Elev. 72 E. Inv. Elev.

Catch Basin Rim Elev. 721.31

Asphalt Island

Concrete

Reference (Asphalting) N 72° 52' W

Sidewalk

Bell Telephone Chamber (abandoned)

Sewer

Curb

Catch Basin Rim Elev. 721.79

Asphalt Area

(pl. I & Set) 10.00

(1997) S.I.B.

S. edge of S.W. 1.9'S.

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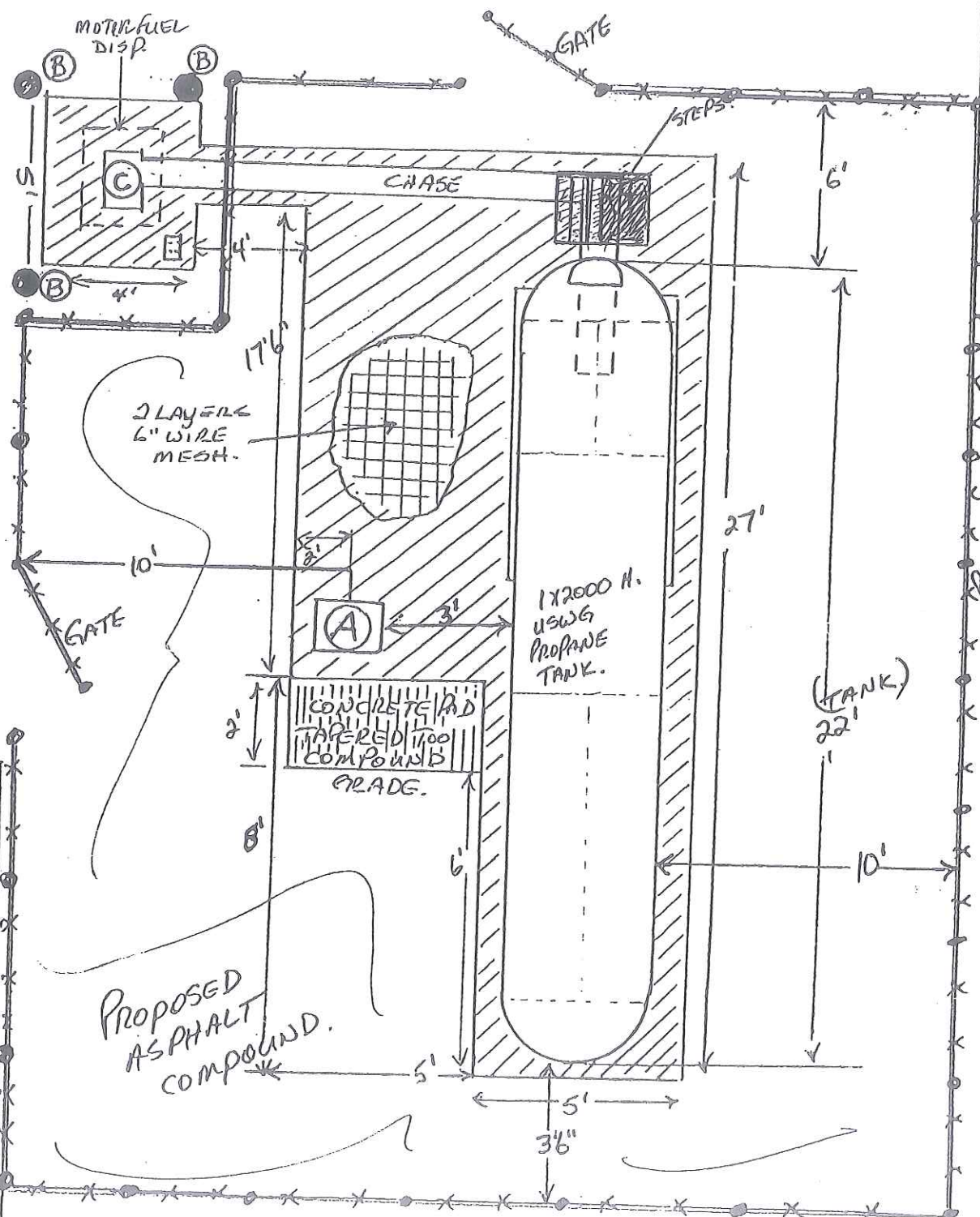
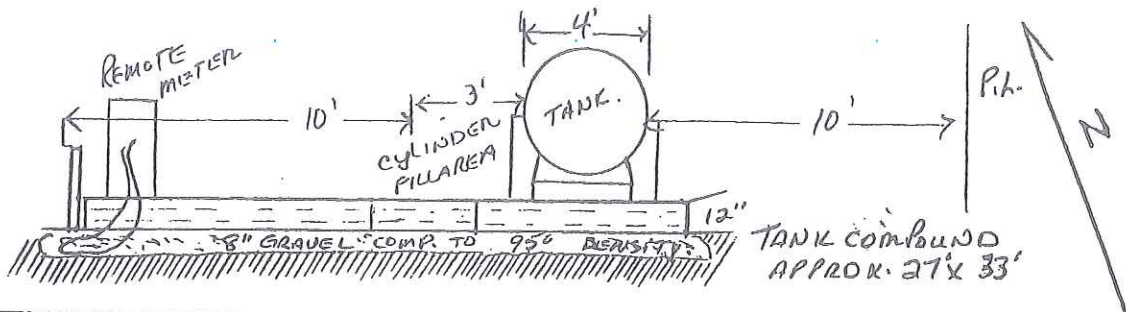
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SALES & SERVICE LTD
P.O. Box 959
Bradford ON L3Z 2B4