



Technical Standards and Safety Authority
www.tssa.org

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

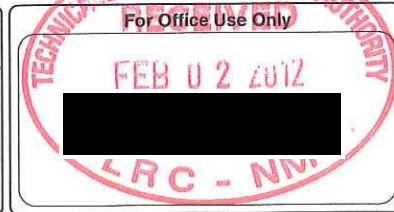
Failure to fully complete this form may result in rejection.
Making a false statement may result in a fine or prosecution
under the Technical Standards and Safety Act

Licence Number 0033984001-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 Jack's Auto Service and Gas Bar Ontario Corporation No., if applicable 712303 Ontario Limited

Operator Name (If different from above) _____

Telephone No. 519 776-7507 Fax No. 519 776-5508 E-mail anthonyasaad@hotmail.com

B Street No. 200 Street Name / 911 Number / Address, if applicable Talbot St South

Town / City or Township / County Essex Province ON Postal Code N8M 1B6

Mailing address if different from above.

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

Town / City or Township / County _____ Province _____ Postal Code _____

Information on Container Refill Centre or Filling Plant

D Location of facility.

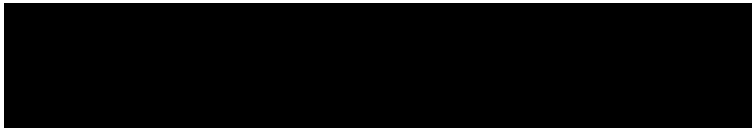
Street No. 200 Street Name / 911 Number / Address, if applicable Talbot St South Nearest Major Intersection Talbot St S and Arner Townline

Town / City or Township / County Essex Province ON Postal Code N8M 1B6

Name of Licence Holder Jack's Auto Service and Gas Bar

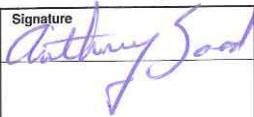
Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT). Anthony Saad ROT type 47835

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

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 Name of Licence Holder <u>Anthony Saad</u>	Signature 	Date (dd-mm-yyyy) <u>01-11-2011</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Anthony Saad</u>		



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Technical Standards and Safety Act
Propane Storage and Handling Regulation

SECTION A: GENERAL INFORMATION (cont'd)

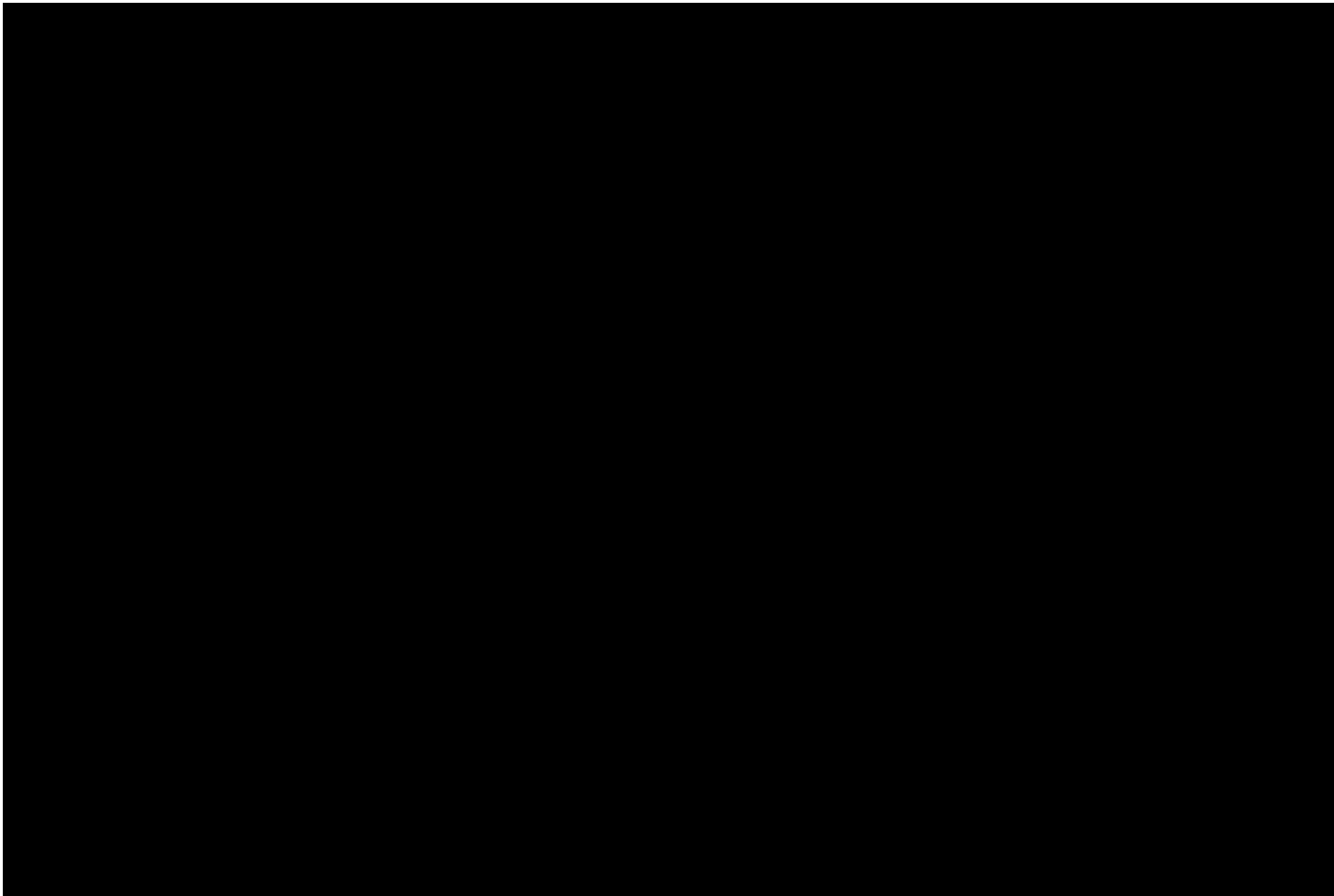
Indicate the year the facility was established. 1987 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment. 2003

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

	PSIG	Serial Number
Tank 1:	<u>250 PSIG</u>	<u>9J80-7494-1</u>
Tank 2:	<u>0</u>	<u>0</u>
Tank 3:	<u>0</u>	<u>0</u>

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: 250 PSIG 2000 Portable: 4 23.20 uswg Mobile: 0



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Name of person completing this form (please print) <u>Anthony Saad</u>	Official Title <u>Owner</u>	
Signature 	Telephone No. <u>519 776-7507</u>	Date (dd-mm-yyyy) <u>01-11-2011</u>



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SECTION A: GENERAL INFORMATION (cont'd)

Activity Information

Name of Propane Supplier(s) Aabco Propane			For Office Use - Party No. [REDACTED]	
Street No. 5475	Street Name / 911 Number / Address, if applicable D'Cocco Court			
Town / City or Township / Country Oldcastle			Province ON	Postal Code NOR 1L0
Telephone No. 519 737-9635	Fax No. 519 737-9137	Contact Name Andy Burton		
E-mail aabcopropane.com				

Name of Propane Transporter. If same as above, please check box. <input checked="" type="checkbox"/>			For Office Use - Party No. [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 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	Postal Code
Telephone No.	Fax No.	Contact Name		

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

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Name of person completing this form (please print) Rhonda Saad		Official Title Bookkeeper	
Signature 		Telephone No. 519 776-7507	Date (dd-mm-yyyy) 01-11-2011



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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.

unleaded gas tanks - 2 tanks X 25,000 L max = 50,000 l maximum

prem gas tank - 1 tank X 15,000 L maximum

diesel fuel tank - 1 tank X 4,500 L maximum

oxygen tanks - 2 X 248.68 = 497.36 cu ft max // acetylene tanks - 2 X 129.83 = 259.66 cu ft // 1 argon tank - 1 X 123.77 cu ft

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

- Fire extinguishers (PLEASE SEE PHOTOS)

- Fire hydrants

- Emergency shut off switch

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

- Emergency shut off switch for propane

- Fire extinguishers - Propane shut off fuse

- Security system with fire button to dispatch security company

- Monitored surveillance cameras - Air horn at propane refill station

Maintenance and testing schedule for fire protection controls and devices.

- Daily visual inspection (PLEASE SEE PHOTOS AND SITE MAP)

- Annual inspection of fire extinguishers (last inspection July 11-2011)

- Annual inspection from Essex Fire Department

- Annual inspection from Aabco Propane

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	Date (dd-mm-yyyy) 01-11-2011



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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 Anthony Saad	For Office Use - Party No. [Redacted]	Name Anthony Saad	For Office Use - Party No. [Redacted]
Official Title Owner		Official Title Owner	
Telephone No. 519 776-7507	Fax No. 519 776-5508	Cell No. 519 919-1212	Fax No. 519 776-5508
E-mail anthonyasaad@hotmail.com		E-mail anthonyasaad@hotmail.com	
Role and responsibilities in emergency key holder, contact person		Role and responsibilities in emergency key holder, contact person	
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name Michael Saad	For Office Use - Party No. [Redacted]	Name Rhonda Saad	For Office Use - Party No. [Redacted]
Official Title Owner		Official Title Bookkeeper	
Telephone No. 519 324-0508	Fax No. 519 776-5508	Telephone No. 519 322-1461	Fax No. 519 776-5508
E-mail		E-mail rhondasaad@live.ca	
Role and responsibilities in emergency key holder, contact person		Role and responsibilities in emergency key holder	
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name Ed Pillon	For Office Use - Party No.	Name Paul Lauzon	For Office Use - Party No.
Official Title Fire Chief	E-mail epillon@essex.ca	Official Title regulatory compliance officer	E-mail p.lauzon@aabcopropane.com
Telephone No. 519 7766476 ext #11	Fax No. 519 776-7171	Telephone No. 519 737-9635	Fax No. 519 737-9137
Role and responsibilities in emergency Incident Command		Role and responsibilities in emergency Supplier only	
Fire Services Address 20 Victoria St Essex , ON		Propane Supplier Address 5475 D'Cocco Court Oldcastle, ON N0R 1L0	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name Rick Malott	For Office Use - Party No.	Name Town of Essex	For Office Use - Party No. [Redacted]
Official Title Fire inspector	E-mail rmalott@essex.ca	Official Title Clerk : Cheryl Bondy	
Telephone No. 519 776-6476 ext #22	Fax No. 519 776-7171	Telephone No. 519 776-7336 ext #32	Fax No. 519 776-8811
Role and responsibilities in emergency Alternate incident command		E-mail cbondy@essex.ca	
Fire Services Address 20 Victoria Ave Essex, ON		Municipality Name and Address Town of Essex 33 Talbot St. South Essex, ON N8M 1A8	

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Name of person completing this form (please print) Rhonda Saad	Official Title Bookkeeper
Signature 	Telephone No. 519 776-7507
	Date (dd-mm-yyyy) 01-11-2011



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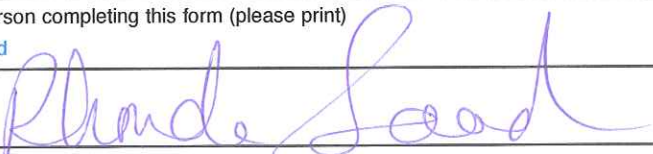
SECTION B: EMERGENCY AND PREPAREDNESS RESPONSE PLAN (cont'd)

2. Additional Safety Measures

Describe any other measures in place at the facility that exceed the minimum Code and Standards requirements.

- Emergency shut off switch
- Surveillance camera aimed at the propane pumps
- Motion detectors
- Fire button on security panel which is monitored by Safeguard Security
- Our facility is at minimum standards at this time

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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) 01-08-2011	Print Name of Training Provider: Jack's Auto Service
	Print Name of Instructor: Anthony Saad
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) 08-08-2011	Print Name of Training Provider: Jack's Auto Service
	Print Name of Instructor: Anthony Saad
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) 03-06-2010	Print Name of Training Provider: Aabco Propane
	Print Name of Instructor: Andy Burton
Training Date (dd-mm-yyyy) 10-07-2010	Print Name of Training Provider: Aabco Propane
	Print Name of Instructor: Andy Burton
Training Date (dd-mm-yyyy) 13-11-2010	Print Name of Training Provider: Aabco Propane
	Print Name of Instructor: Andy Burton
	30-12-2009 Aabco Propane - Andy Burton (SEE PHOTOCOPIES OF ROT)

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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) 05-01-2012	Print Name of Training Provider: <i>Jack's Auto Service</i>
	Print Name of Instructor: <i>Anthony Saad</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:

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

Target Date (dd-mm-yyyy) 05-01-2012	Print Name of Training Provider: <i>Jack's Auto Service</i>
	Print Name of Instructor: <i>Anthony Saad</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) 05-01-2012	Print Name of Training Provider: <i>Jack's Auto Service</i>
	Print Name of Instructor: <i>Anthony Saad</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:

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Name of person completing this form (please print) <i>Rhonda Saad</i>	Official Title <i>Bookkeeper</i>
Signature <i>Rhonda Saad</i>	Telephone No. <i>519 776-7507</i>
	Date (dd-mm-yyyy) <i>01-11-2011</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).
An Emergency Response Communication Plan has implemented by Jack's Auto Service with the help of the Essex Fire Department and Aabco Propane to notify the public of any emergency.

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).
An ERCP has been implemented that describes the action taken in case of emergency. It details who will issue the warnings and where to meet after an emergency evacuation.

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).
An ERCP has been implemented by the licence holder that outlines who, when and how the emergency response authorities will be contacted.

Describe provisions for fire department entry when there are no operations or staffing at the propane site.
There are two entrances at the corner of Talbot St. South and the Arner Townline. These entrances are always open and clear of any vehicles and any other objects. The business can be closed and access is still available from both entrances.

Describe how the licence holder will ensure continual flow of updated information to authorities.
Jack's Auto Service will have copies of the finalized report and will update any changes made to the records. Once any changes are made, a new copy will be forwarded to the Essex Fire Department.

How long will it take the facility liaison person to respond to the site.
It will take up to four minutes for emergency response units to reach the site.

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Signature 	Telephone No. 519 776-7507	Date (dd-mm-yyyy) 01-11-2011



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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)?
- 2. Is there adequate night lighting at the site?
- 3. Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials?
- 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?
- 5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders?
- 6. Are weighing systems validated for accuracy?
- 7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)?
- 8. Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves)
- 9. Is the schedule of maintenance and testing activities retained on site?

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?
- 2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location?
- 3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only) 10 metres
- 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) 10 metres

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Signature 	Telephone No. 519 776-7507
	Date (dd-mm-yyyy) 01-11-2011

Essex Fire & Rescue Services

This Level 1 RSMP review and comments have been prepared by:
Richard A. Malott
Fire Inspector/Public Educator, Essex Fire & Rescue Services
2610 County Rd 12
Essex, On
519-776-6476

Signature  Feb 28, 2012

This review and comments have been authorized by:
Ed T. Pillon
Fire Chief (CFO), Essex Fire & Rescue Services
2610 County Rd 12
Essex, On
519-776-6476

Signature  02/29/2012



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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.

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
<input checked="" type="checkbox"/>	<input type="checkbox"/>

If not, please explain (e.g., no fire services).

Fire services comments, if any:

Please see attached Appendix A-2 for Fire service comments.

To be completed by the Licence Holder

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

Jack's Auto Service will work with the Essex Fire Department to meet all recommended requirements.

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 <i>Appendix A-2</i>	<i>[Signature]</i>	<i>[Date]</i>

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Name of person completing this form (please print) Rhonda Saad	Official Title Bookkeeper	Date (dd-mm-yyyy) 01-11-2011
Signature <i>Rhonda Saad</i>	Telephone No. 519 776-7507	

Essex Fire & Rescue Services

Appendix A-2

February, 28, 2012

RSMP- Fire Service Comments
Jack's Auto Service and Gas Bar
200 Talbot St South. Essex, On

Section B - P.4

- Location of MSDS sheets/binder is not identified
- Location of power supply breaker is not identified

Section B – P.6

- A description of the actions that should be taken to control a transfer hose leak, propane piping leak, or a fire under a propane tank , including the steps to limit the consequences has not been provided
- A safe meeting place outside the hazard distance has not been identified
- A description of how and when to activate the power supply breaker inside the store has not been provided
- A description on lock out procedure identified on Page 10 not provided.
- A description of quality assurance program or process identified on Page 10 not provided

Section B – P.7

Training on the emergency response plan and procedures

- Records of the above have not been provided

Section B - P.9

- Propane emergency procedures were not written by the Essex Fire & Rescue Service
- The muster location for evacuation outside the hazard distance is not identified
- How staff will evacuate patrons and staff is not identified



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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) 30-08-2011	Capacity of single largest propane storage vessel (USWG) 2000 USWG
Tank setback coordinates. Indicate placement on the map.	
Front: 30.48 metres	Right side property line: 14.3002 metres
Rear: 3.048 metres	Left side property line: 27.4193 metres
GPS coordinates of single largest vessel: + 42.168408 deg - 82.813775 deg	

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Signature 	Telephone No. 519 776-7507	Date (dd-mm-yyyy) 01-11-2011



246m Blast Radius outlined in red on the satellite map.

GPS Coordinates: $+42.168408^\circ$, -82.813775°

Legend



= Propane Storage

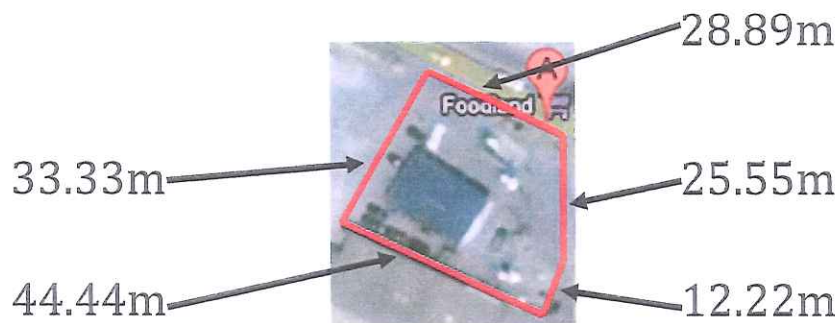


= Gas Station Address



1cm = 11.11m

1m = 3.280ft



Legend



= Propane Storage



= Gas Station Address



SECTION C: SUBMISSIONS (cont'd)

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

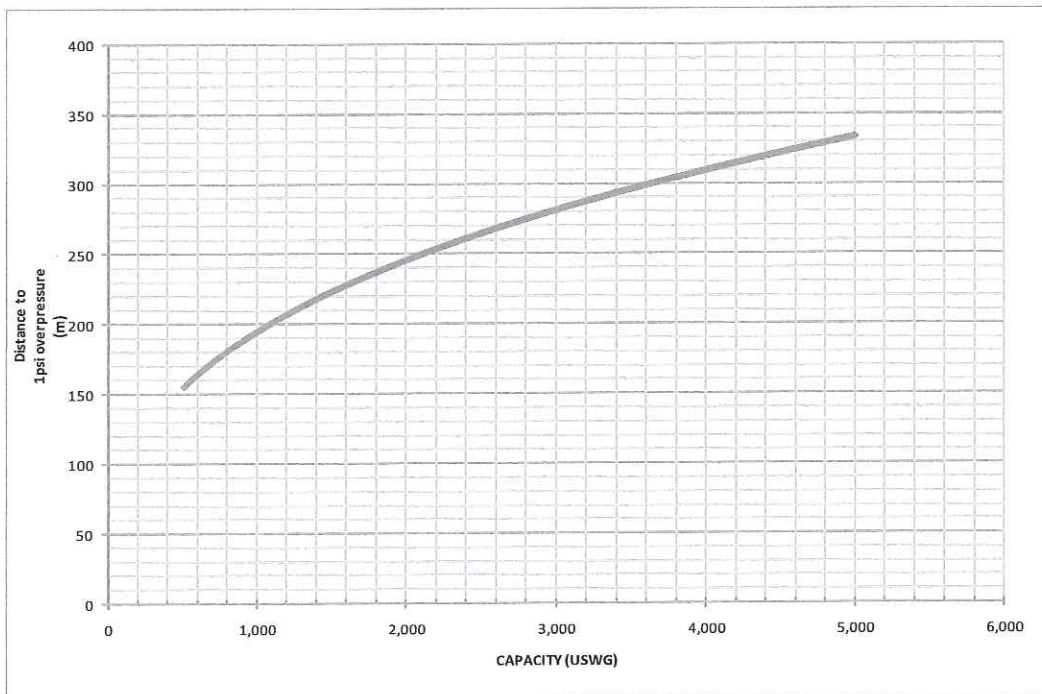
Table 1: Distance Table

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>N/A</u> Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments Name: _____ Address: _____ City: _____				X	<u>100</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>1 Essex Arena complex, 2 restaurants, 1 grocery store, 1 variety store, 2 pharmacies, 1 accountant</u> Address: <u>1 MP office - 180, 191, 216, Talbot St S., 26 Fairview Ave West</u> City: <u>Essex</u> Province <u>ON</u> Postal Code _____			X		<u>30</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>N/A</u> Address: _____ City: _____ Province _____ Postal Code _____	X				<u>0</u> m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: <u>1 continuing education adult school, 2 medical clinics, 1 library, 1 day care</u> Address: <u>186 and 190 Talbot St S, 35 Gosfield Townline, 169 Irwin Ave</u> City: <u>Essex</u> Province <u>ON</u> Postal Code _____			X		<u>30</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>1 OPP station</u> Address: <u>31 Gosfield Townline W</u> City: <u>Essex</u> Province <u>ON</u> Postal Code _____		X			<u>20</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>Rhonda Saad</u>	Official Title <u>Bookkeeper</u>
Signature 	Telephone No. <u>519 776-7507</u>
	Date (dd-mm-yyyy) <u>01-11-2011</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		
# 40	11.75		
# 33.3	9.62		
# 30	8.8		
# 20	5.8	4	23.20
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			

Tanks Stored On-site Not Connected for Use

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

Total Cylinder Capacity	23.20 USWG
Total Tank Capacity	0
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	23.20 USWG