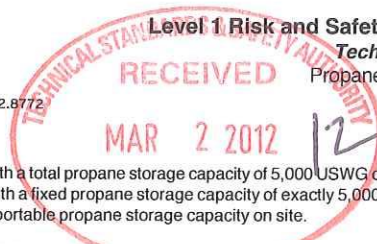




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 www.tssa.org
 14th Floor - Centre Tower
 3300 Bloor Street West
 Toronto Ontario M8X 2X4
 Fax: 416.231.4903
 Customer Service: 1.877.682.8772



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.

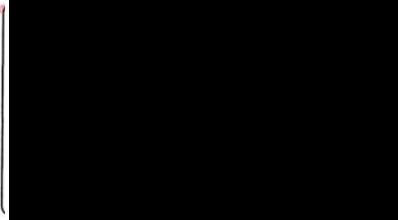
Failure to fully complete this form may result in rejection.
 Making a false statement may result in a fine or prosecution under the *Technical Standards and Safety Act*

Licence Number: 0034372001-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.*

Company Name: BRACEBRIDGE PROPANE DIVISION OF GEORGIAN BAY PROPANE INC. Ontario Corporation No., if applicable: _____

Operator Name (if different from above): _____

Telephone No. 705-645-4294 Fax No. 705-645-4186 E-mail michael@bracebridgepropane.ca

B Street No. 228 Street Name / 911 Number / Address, if applicable: TAYLOR ROAD

Town / City or Township / County: BRACEBRIDGE Province: ONTARIO Postal Code: P1L 1J9

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

Location of facility.


D Street No. 228 Street Name / 911 Number / Address, if applicable: TAYLOR ROAD Nearest Major Intersection: TAYLOR ROAD & HIGHWAY 11

Town / City or Township / County: BRACEBRIDGE Province: ONTARIO Postal Code: P1L 1J9

Name of Licence Holder: ALEX L. GOERK


Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT): ALEX L. GOERK ROT type: PPO 1-2-3

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

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-mm-yyyy)
Name of Licence Holder: <u>ALEX L. GOERK</u>		<u>24-02-2012</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training: <u>ALEX L. GOERK</u>		



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

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.

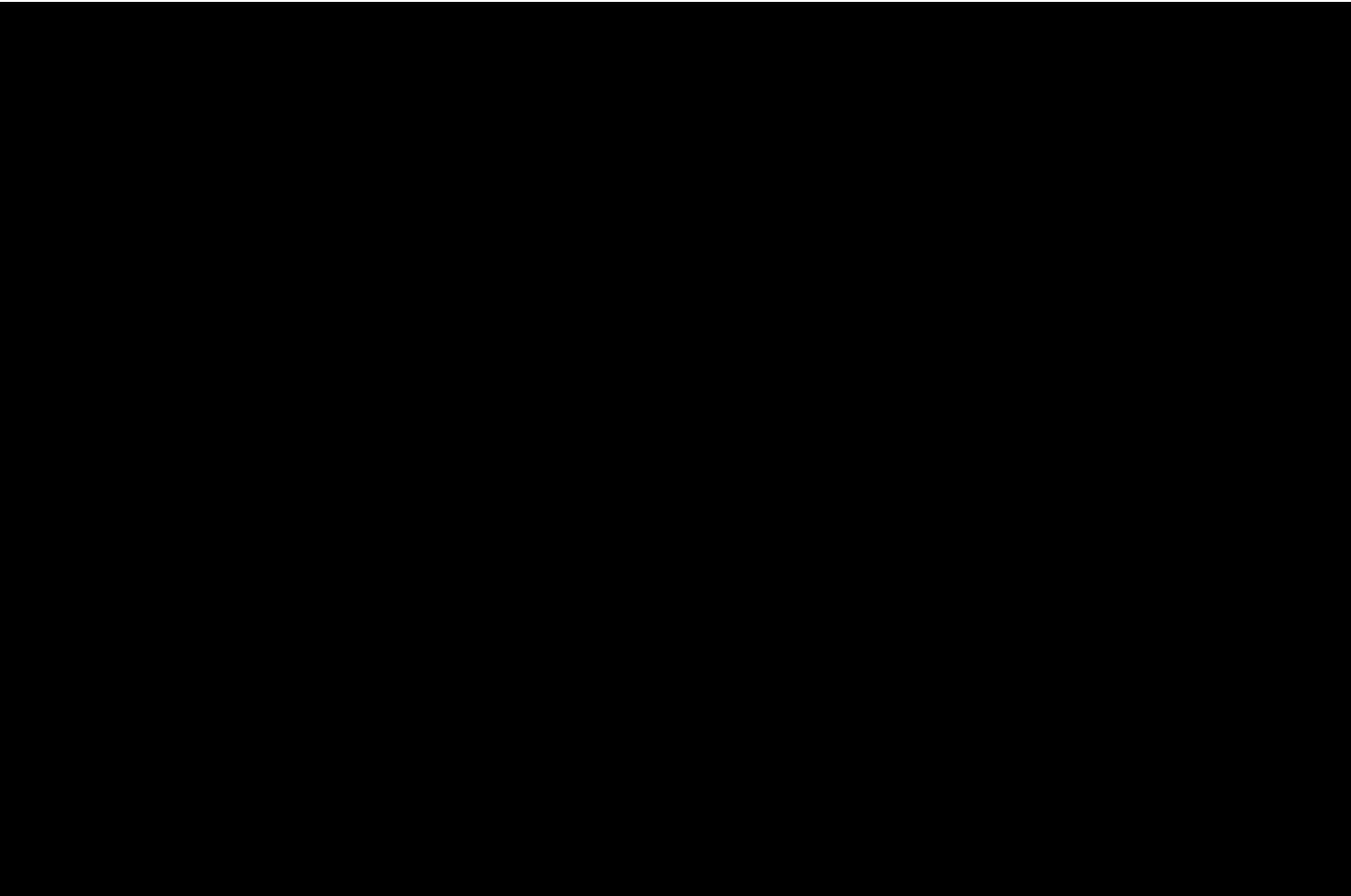
1959	1989
------	------

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

	PSIG	Serial Number
Tank 1:	250	5.888577
Tank 2:	250	5.888581
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: 4000 USWG Portable: _____ Mobile: _____



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Name of person completing this form (please print) ALEX L. GOERK		Official Title PRESIDENT
Signature 	Telephone No. 905-952-0146	Date (dd-mm-yyyy) 24-02-2012



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

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

Name of Propane Supplier(s)			
BRACEBRIDGE PROPANE DIVISION OF GEORGIAN BAY PROPANE INC.			
Street No.	Street Name / 911 Number / Address, if applicable		
228	TAYLOR ROAD		
Town / City or Township / Country		Province	Postal Code
BRACEBRIDGE		ONTARIO	P1L 1J9
Telephone No.	Fax No.	Contact Name	
705-645-4294	705-645-4186	MICHAEL GOERK	
E-mail			
michael@bracebridgepropane.ca			

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	Capacity stored off-site, in USWG	For Office Use - Party No.
N/A		
Street No.	Street Name / 911 Number / Address, if applicable	
Town / City or Township / Country		Postal Code
Telephone No.		Contact Name

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

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Name of person completing this form (please print)	Official Title	
ALEX L. GOERK	PRESIDENT	
Signature	Telephone No.	Date (dd-mm-yyyy)
	905-952-0146	24-02-2012



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

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.

NOT APPLICABLE

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

20 LB DRY CHEM FIRE EXTINGUISHER.
MUNICIPAL FIRE HYDRANT - WITHIN 50 METRES.

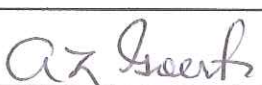
List of fire protection controls (e.g., fire detection systems, fire notification systems, alarm systems, automatic shut off devices, fusible links, etc.) and describe their function, use and operation.

FUSIBLE LINK ON INTERNAL SAFETY VALVE.

Maintenance and testing schedule for fire protection controls and devices.

DAILY INSPECTION OF DISPENSER FACILITIES (VISUAL).
BUILDING AND PREMISES SHALL BE MAINTAINED IN ACCORDANCE WITH THE ONTARIO FIRE CODE.

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Signature 		Telephone No. 905-952-0146	Date (dd-mm-yyyy) 24-02-2012



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

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

1. Contacts for Emergency Response

1. Facility Contact Personnel - Key Contact

Name
MICHAEL GOERK
Official Title
GENERAL MANAGER
Telephone No.
705-645-4294
Fax No.
705-645-4186
E-mail
michael@bracebridgepropane.ca
Role and responsibilities in emergency
CO-ORDINATE EMERGENCY PROCEDURES

5. Facility 24-Hour Contact Person

Name
MICHAEL GOERK
Official Title
GENERAL MANAGER
Cell No.
416-716-3632
Fax No.
705-645-4186
E-mail
michael@bracebridgepropane.ca
Role and responsibilities in emergency
CO-ORDINATE EMERGENCY PROCEDURES

2. Facility Contact Personnel - Alternate Contact

Name
ALEX L. GOERK
Official Title
PRESIDENT
Telephone No.
905-952-0146
Fax No.
905-952-0155
E-mail
carlingprpaneinc@bellnet.ca
Role and responsibilities in emergency
CO-ORDINATE EMERGENCY PROCEDURES

6. Name of Facility Manager

Name
ALEX L. GOERK
Official Title
PRESIDENT
Telephone No.
905-952-0146
Fax No.
905-952-0155
E-mail
carlingprpaneinc@bellnet.ca
Role and responsibilities in emergency
CO-ORDINATE EMERGENCY PROCEDURES

3. Local Fire Services - Key Contact

Name
MURRAY MEDLEY
Official Title
FIRE CHIEF
Telephone No.
705-645-8258
E-mail
firechief@bracebridgefire.com
Fax No.
705-645-8258
Role and responsibilities in emergency
CO-ORDINATE EMERGENCY PROCEDURES
Fire Services Address
16 DOMINION ST. BRACEBRIDGE, ON P1L 2A5

7. Propane Supplier Key Contact Person

Name
MICHAEL GOERK
Official Title
GENERAL MANAGER
Telephone No.
705-645-4294
E-mail
michael@bracebridgepropane.ca
Fax No.
705-645-4186
Role and responsibilities in emergency
CO-ORDINATE EMERGENCY PROCEDURES
Propane Supplier Address
228 TAYLOR ROAD, BRACEBRIDGE, ON P1L 1J9

4. Local Fire Services - Alternate Contact

Name
CHRIS GREENFIELD
Official Title
FIRE PREVENTION OFFICER
Telephone No.
705-645-8258
E-mail
fpo@bracebridgefire.com
Fax No.
705-645-8258
Role and responsibilities in emergency
CO-ORDINATE EMERGENCY PROCEDURES
Fire Services Address
16 DOMINION ST. BRACEBRIDGE, ON P1L 2A5

8. Municipal Contact

Name
LORI MCDONALD
Official Title
BRACEBRIDGE TOWN CLERK
Telephone No.
705-645-5264 ext 243
E-mail
lmcdonald@bracebridge.ca
Fax No.
Municipality Name and Address
1000 TAYLOR CRT, BRACEBRIDGE, ON P1L 1R6

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Name of person completing this form (please print) ALEX L. GOERK		Official Title PRESIDENT	
Signature 		Telephone No. 905-952-0146	Date (dd-mm-yyyy) 24-02-2012



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

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.

DAILY VISUAL INSPECTION OF FACILITIES AND SYSTEM

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) ALEX L. GOERK	Official Title PRESIDENT	
Signature <i>Alex L. Goerk</i>	Telephone No. 905-952-0146	Date (dd-mm-yyyy) 24-02-2012



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Technical Standards and Safety Act
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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) 15-09-2010	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
Training Date (dd-mm-yyyy) 15-04-2011	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
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) 15-09-2010	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
Training Date (dd-mm-yyyy) 15-04-2011	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
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) 15-09-2010	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
Training Date (dd-mm-yyyy) 15-04-2011	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
Training Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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Signature 	Telephone No. 905-952-0146
	Date (dd-mm-yyyy) 24-02-2012



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Technical Standards and Safety Act
Propane Storage and Handling Regulation

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) 15-04-2012	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
Target Date (dd-mm-yyyy) 15-09-2012	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
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) 15-04-2012	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
Target Date (dd-mm-yyyy) 15-09-2012	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
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) 15-04-2012	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
Target Date (dd-mm-yyyy) 15-09-2012	Print Name of Training Provider: BRACEBRIDGE PROPANE/GEORGIAN BAY PROPANE
	Print Name of Instructor: LORNE MCALEER
Target Date (dd-mm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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	Date (dd-mm-yyyy) 24-02-2012



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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.

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).

ON-SITE ATTENDANT WOULD CONTACT EMERGENCY SERVICES - 911.

LOCAL FIRE SERVICES WOULD ADVISE DIRECTION.

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).

LOCAL FIRE SERVICES WOULD CO-ORDINATE WITH LOCAL POLICE IF AN EVACUATION PLAN WERE NECESSARY.

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).

IN THE EVENT OF AN EMERGENCY A 911 CALL WOULD BE PLACED BY THE ATTENDANT ON DUTY, FOLLOWED BY A CALL TO THE LICENCE HOLDER FOR FURTHER ACTION AND CONTACT WITH EMERGENCY RESPONSE PERSONNEL.

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

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

A FIRE SAFETY PLAN LOCK BOX WILL BE INSTALLED CONTAINING THE COMPLETE RSMP AND ALL RELEVANT MSDSs.

CO-ORDINATION OF UPDATED INFORMATION TO AUTHORITIES WOULD BE ON A CONTINUAL BASIS AS WARRANTED BY THE CIRCUMSTANCES AND AT THE DIRECTION OF THE AUTHORITIES.

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

PHONE CONTACT - IMMEDIATE

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) ALEX L. GOERK	Official Title PRESIDENT	
Signature 	Telephone No. 905-952-0146	Date (dd-mm-yyyy) 24-02-2012



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

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 type="checkbox"/>	<input checked="" 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)	<u>50 METRES</u>	
4. What is the unobstructed distance to the closest approved water supply with year round access if there are no hydrants? (distance in metres only)	<u>N/A</u>	

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Signature 	Telephone No. 905-952-0146	Date (dd-mm-yyyy) 24-02-2012



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

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).

DELIVERED RSMP TO FIRE CHIEF, MURRAY MEDLEY'S OFFICE, 16 DOMINION ST. BRACEBRIDGE, ON, FOR REVIEW

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		

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.

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Signature 	Telephone No. 905-952-0146	Date (dd-mm-yyyy) 24-02-2012



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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>22-02-2012</u>	Capacity of single largest propane storage vessel (USWG) <u>2000 USWG</u>
Tank setback coordinates. Indicate placement on the map.	
Front: <u>41 METRES (WEST)</u>	Right side property line: <u>7.7 METRES (NORTH)</u>
Rear: <u>60 METRES (EAST)</u>	Left side property line: <u>25 METRES (SOUTH)</u>
GPS coordinates of single largest vessel: <u>45 02'46.66" N 79 17'59.69" W</u>	

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Name of person completing this form (please print) <u>ALEX L. GOERK</u>	Official Title <u>PRESIDENT</u>	
Signature 	Telephone No. <u>905-952-0146</u>	Date (dd-mm-yyyy) <u>24-02-2012</u>



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Level 1 Risk and Safety Management Plan (RSMP)
Technical Standards and Safety Act
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SECTION C: SUBMISSIONS (cont'd)

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

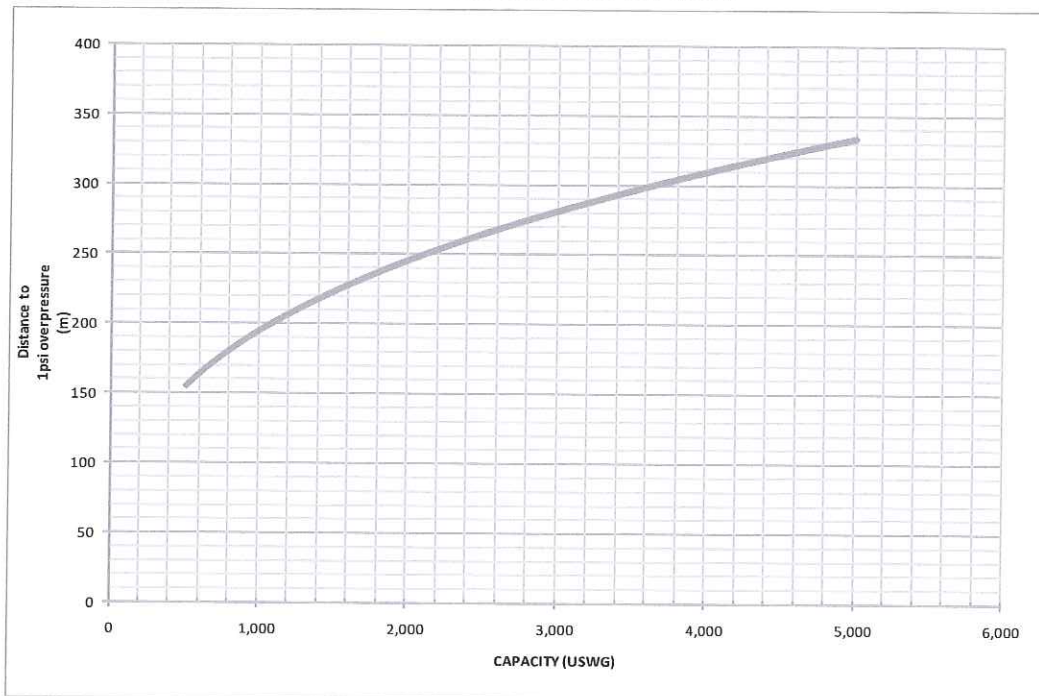
Table 1: Distance Table

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>N/A</u> Address: _____ City: _____ Province _____ Postal Code _____	X				<u>N/A</u> m
Residential building units specifically permanent single family dwellings, condominiums, and apartments [REDACTED]				X	<u>45+</u> m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>COMMERCIAL</u> Address: <u>215 - 229 TAYLOR ROAD</u> City: <u>BRACEBRIDGE</u> Province <u>ONTARIO</u> Postal Code _____					<u>45+</u> m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: <u>N/A</u> Address: _____ City: _____ Province _____ Postal Code _____	X				<u>N/A</u> m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: <u>N/A</u> Address: _____ City: _____ Province _____ Postal Code _____	X				<u>N/A</u> m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: <u>N/A</u> Address: _____ City: _____ Province _____ Postal Code _____	X				<u>N/A</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>ALEX L. GOERK</u>	Official Title <u>PRESIDENT</u>
Signature 	Telephone No. <u>905-952-0146</u>
	Date (dd-mm-yyyy) <u>24-02-2012</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		
# 10	2.9		
# 5	1.5		
Total Cylinder Capacity			

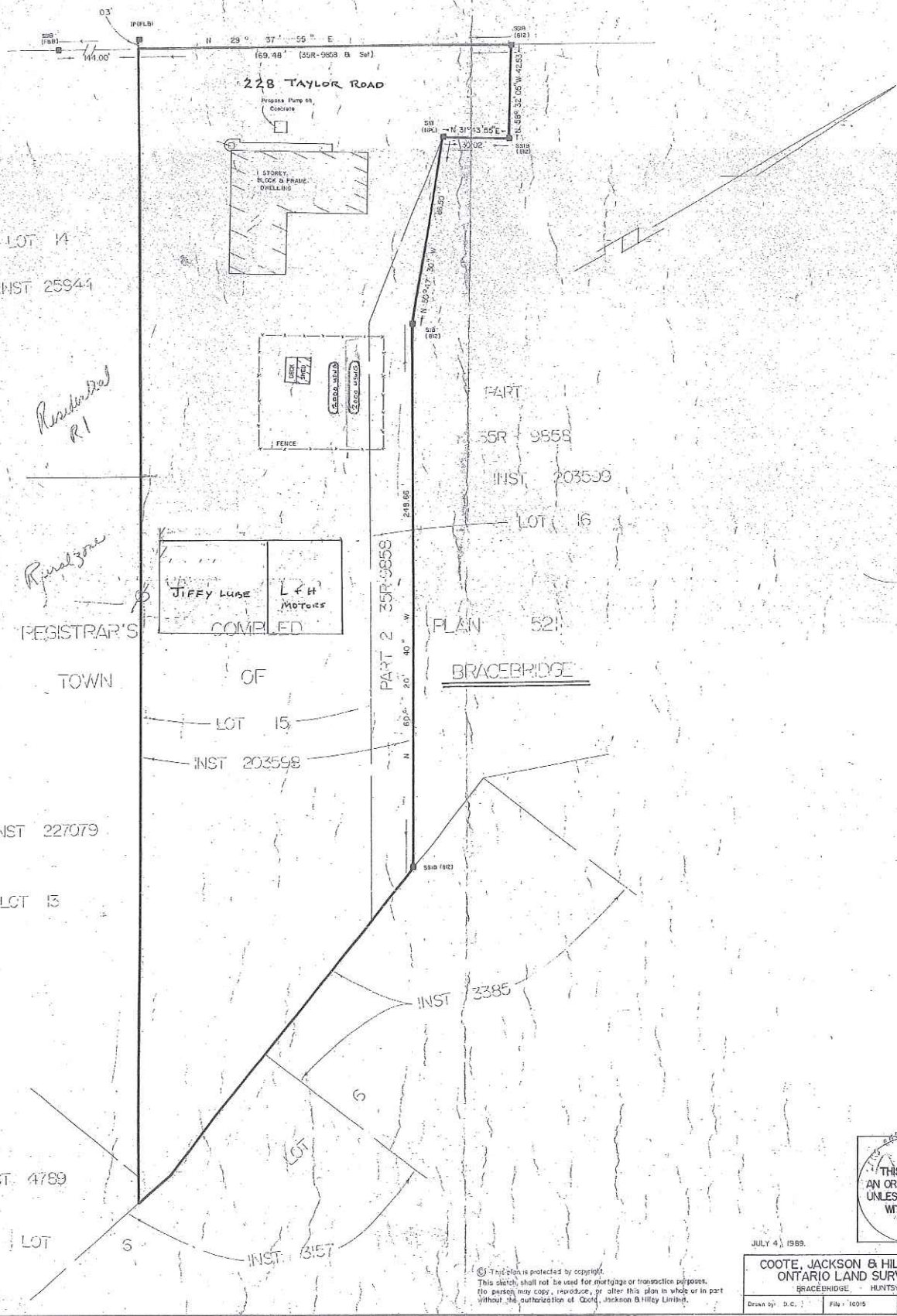
Tanks Stored On-site Not Connected for Use

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

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

DISTRICT ROAD No. 42 TAYLOR ROAD

(Named by by-law 87-66, Registered as inst 214032
(Transferred to District Municipality of Muskoka by OC-125-72, Inst 90171 P.O.)



LOT 14
INST 25944

Residential R1

Rural zone
REGISTRAR'S

TOWN OF

LOT 15
INST 203598

INST 227079

LOT 13

INST. 4789

LOT 5

INST. 3157

PART 2 35R-9858

PART 35R-9858
INST. 203599

LOT 16

PLAN 521
BRACEBRIDGE

INST 3385

7-MAC-II-6



JULY 4, 1989.

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COOTE, JACKSON & HILEY LIMITED
ONTARIO LAND SURVEYORS
BRACEBRIDGE - HUNTSVILLE

Drawn by: D.C. J.	File #: 16015	7-MAC-II-6
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BRACEBRIDGE PROPANE DIVISION OF GEORGIAN BAY PROPANE INC.

LOCATION: 228 Taylor Road, Bracebridge, ON
PREPARED: February 22, 2012
TANK CAPACITY: 2 x 2000 USWG Horizontal Tanks
TANK SETBACKS: 41 Metres West (front), 7.7 Metres North (right side)
 60 Metres East (rear), 25 Metres South (left side)
RADIUS: 250 Metres
GPS COORDINATES: 45°02'46.66"N / 79°17'59.69" W
MUNICIPALITY: Town of Bracebridge
MUNICIPAL CLERK: Lori McDonald
MUNICIPAL ADDRESS: 1000 Taylor Crt,
 Vaughan, ON L6A 1T1