



Technical Standards and Safety Authority
www.tssa.org

14th Floor - Centre Tower
3300 Bloor Street West
Toronto Ontario M8X 2X4
Fax: 416 231 4078
Customer Service: 1.877.682.8772

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

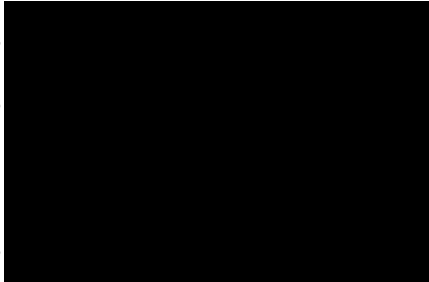
This Level 1 RSMP applies to: - a facility with a total propane storage capacity of 5,000 USWG or less; or
- a facility with a fixed propane storage capacity of exactly 5,000 USWG and no more than 500 USWG of portable propane storage capacity

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 000 267927

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 1937 068 Ontario Inc Corporation No. 1937 068

Operator Name (if different from above) Qingpeng Zhao

Telephone No. 5198357329 Fax No. 5192240634 E-mail qzhao529@hotmail.com

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

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

Mailing address if different from above.

Street No. 1498 Street Name / 911 Number / Address, if applicable Gordon Street

Town / City or Township / County Brantford Province Ontario Postal Code N1L1C8

Information on Container Refill Centre or Filling Plant

Location of facility

Street No. 236 Street Name / 911 Number / Address, if applicable KING GEORGE ROAD Nearest Major Intersection LYNDEN ROAD

Town / City or Township / County BRANTFORD Province ON Postal Code N3R 5L4

Name of Licence Holder 1937 068 Ontario Inc

Name of a Senior Management person as defined in the regulation holding the Record of Training (ROT) Qingpeng Zhao ROT type _____

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

Hours of operation.

This document is valid until the next licence renewal date. You are required by law to notify TSSA of any change of information.

Declaration: I am aware that it is an offence to give false information in this document and I hereby declare that the information I have given here is true and complete.

Print name	Signature	Date (dd-mmm-yyyy)
Name of Licence Holder <u>Qingpeng Zhao</u>		<u>July 11th, 2016</u>
Name of Senior Management person as defined in the Regulation holding the Record of Training <u>Qingpeng Zhao</u>		<u>July 11th, 2016</u>



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SECTION A: GENERAL INFORMATION (cont'd)

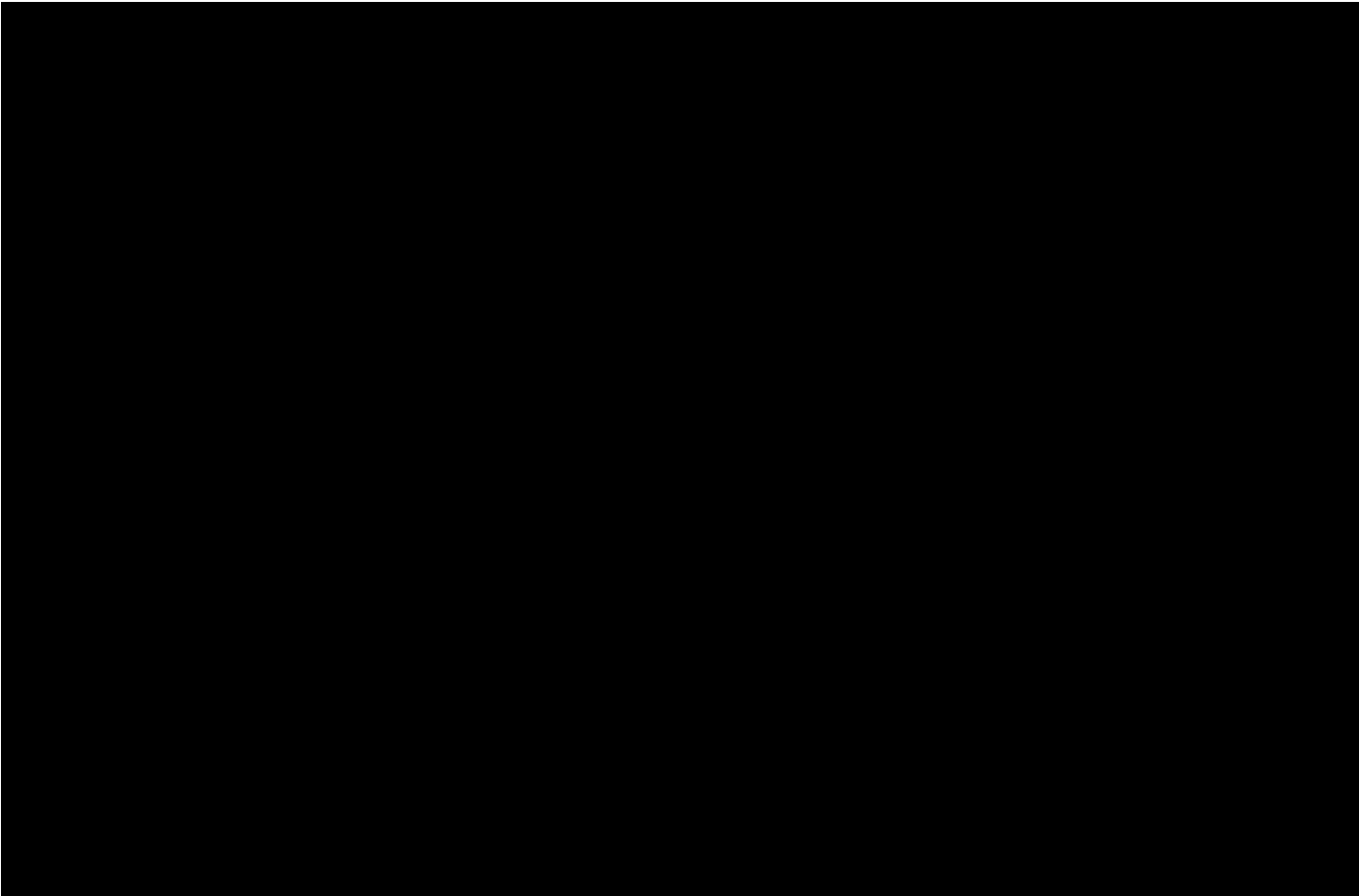
Indicate the year the facility was established. 1989 Indicate the year of any significant modifications, as defined in s.1, O.Reg 211/01, since establishment.

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

	PSIG	Serial Number
Tank 1:	<u>250 @ 125</u>	<u>S 814846</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: 1996 Portable: 139.2 Mobile: _____



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Name of person completing this form (please print) <u>Qingpeng Zhao</u>	Official Title <u>Mangager</u>	
Signature 	Telephone No. <u>5198357329</u>	Date (dd-mmm-yyyy) <u>June 11th, 2016</u>



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

Name of Propane Supplier(s) DAVIS FUELS		For Office Use - Party No.	
Street No. 22	Street Name / 911 Number / Address, if applicable KING STREET		
Town / City or Township / Country BURFORD		Province ON	Postal Code N0E 1A0
Telephone No. 519-449-2417	Fax No. 519-449-5942	Contact Name JAMIE DAVIS	
E-mail JAMIEDAVIS@DAVISFUELS.CA			

Name of Propane Transporter. If same as above, please check box. <input type="checkbox"/>		For Office Use - Party No.	
DOWLER KARN			
Street No. 43841	Street Name / 911 Number / Address, if applicable TALBOT LINE		
Town / City or Township / Country ST THOMAS		Province ON	Postal Code N5P 3S7
Telephone No. 1-800-265-4342	Fax No. 519-631-4755	Contact Name RALPH HARVEY	
E-mail RALPHHARVEY@DOWLERKARN.COM			

Off-site Cylinder and/or Mobile Storage		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) Qingpeng Zhao		Official Title manager	
Signature 	Telephone No. 5198357329	Date (dd-mmm-yyyy) July 11th, 2018	



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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.

UNDERGROUND GASOLINE 3 X 45000 LITRE 2 X 22500 LITRE

UNDERGROUND DIESEL 1 X 45000 LITRE

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

EMERGENCY SHUT OFF ON WALL BESIDE CARWASH ENTRANCE

6 EXTINGUISHERS ON SITE - IN CARWASH - BESIDE PROPANE DISPENSER - 2 BESIDE STORE ENTRANCE - INSIDE STORE

- AT BACK DOOR ENTRANCE

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, FUSIBLE LINK: SHUTS OFF TANK VALVE WHEN HEATED, SHUTS OFF PROPANE SUPPLY

RELIEF VALVE; RELIEVES PROPANE IN CASE OF OVERPRESSURE

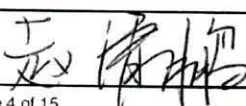
Maintenance and testing schedule for fire protection controls and devices.

INSPECTIONS COMPLETED BY ROT PERSONNEL

ANNUAL INSPECTIONS COMPLETED BY SUPPLY COMPANY

ANNUAL FIRE EXTINGUISHER INSPECTIONS COMPLETED BY DENNIS EVANS FIRE EQUIPMENT

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Name of person completing this form (please print) Qingpeng Zhao		Official Title Manager	
Signature 	Telephone No. 5198357329	Date (dd-mmm-yyyy) July 11th, 2016	



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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	Qingpeng Zhao	For Office Use - Party No.	
Official Title	Manager	Name	Qingpeng Zhao
Telephone No.	5198357329	Fax No.	5192240634
E-mail	qzhao529@hotmail.com	Cell No.	5198357329
Role and responsibilities in emergency		Fax No.	5192240634
2. Facility Contact Personnel - Alternate Contact		6. Name of Facility Manager	
Name	Xueyu Wang	For Office Use - Party No.	
Official Title	EMPLOYEE	Name	Qingpeng Zhao
Telephone No.	2269660487	Fax No.	
E-mail	wxyhappy9@hotmail.com	Telephone No.	5198357329
Role and responsibilities in emergency		Fax No.	5192240634
3. Local Fire Services - Key Contact		7. Propane Supplier Key Contact Person	
Name	JEFF MCCORMICK	For Office Use - Party No.	
Official Title	FIRE CHEIF	Name	JAMIE DAVIS
Telephone No.	519-752-4346	Official Title	PROPANE MANAGER
E-mail	JMCCORMICK@BRANTFORD.CA	E-mail	JAMIEDAVIS@DAVISFUELS.CA
Fax No.	519-752-7083	Telephone No.	519-449-2417
Role and responsibilities in emergency		Fax No.	519-449-5942
Fire Services Address	60 Clarence Street, Brantford	Role and responsibilities in emergency	
4. Local Fire Services - Alternate Contact		8. Municipal Contact	
Name	GRANT DIX Todd Binkley	For Office Use - Party No.	
Official Title	DEPUTY	Name	LORI WOLFE
Telephone No.	519-752-4346	Official Title	CLERK
E-mail	TBINKLEY@BRANTFORD.CA	Telephone No.	519-759-4150
Fax No.	519-752-7083	Fax No.	519-759-7840
Role and responsibilities in emergency		E-mail	LWOLFE@BRANTFORD.CA
Fire Services Address	60 Clarence Street, Brantford	Municipality Name and Address	BRANTFORD

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Name of person completing this form (please print)	Qingpeng Zhao	Official Title	Manager
Signature		Telephone No.	5198357329
		Date (dd-mmm-yyyy)	June 11th, 2016



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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.

THE INSTALL MEETS ALL REQUIRMENTS UNDR THE CODE AND ADHERES TO ALL PERTINENT REGULATIONS SPECIFIC TO DISPENSERS

STAFF RESPONSIBILITY - LIST ACTIVATION OF EMERGENCY SHUTDOWN. CONTACT 911, USE FIRE EXTINGUISHER AND TRAINING.

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Signature		Telephone No.	5198357329
		Date (dd-mmm-yyyy)	July 11th, 2016



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

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

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

Training Date (dd-mmm-yyyy) 14-04-2016	Print Name of Training Provider: 1937068 Ontario INC
	Print Name of Instructor: Qingpeng Zhao
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Training Date (dd-mmm-yyyy) 14-04-2016	Print Name of Training Provider: 1937068 Ontario INC
	Print Name of Instructor: Qingpeng Zhao
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Training Date (dd-mmm-yyyy) 12/04/2016	Print Name of Training Provider: CPA
	Print Name of Instructor: RALPH HARVEY
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Training Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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Name of person completing this form (please print) Qingpeng Zhao	Official Title Manager
Signature 	Telephone No. 519 835 7329 Date (dd-mmm-yyyy) July 11th, 2016



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

4. Emergency Training Plan for Coming Year

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

Target Date (dd-mmm-yyyy) 13-04-2017	Print Name of Training Provider: 1937068 Ontario INC
	Print Name of Instructor: Qingpeng Zhao
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Target Date (dd-mmm-yyyy) 13-04-2017	Print Name of Training Provider: 1937068 Ontario INC
	Print Name of Instructor: Qingpeng Zhao
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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

Target Date (dd-mmm-yyyy) 11-04-2018	Print Name of Training Provider: CPA
	Print Name of Instructor: Not Known
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:
Target Date (dd-mmm-yyyy)	Print Name of Training Provider:
	Print Name of Instructor:

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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).

EMERGENCY RESPONSE COORDINATOR IS POINT PERSON FOR EXECUTING THE ERP. IF EMERGENCY VERBAL WARNINGS AND EVACUATION WILL OCCUR ON SITE FOR ALL CUSTOMERS AND EMPLOYEES TO ASSEMBLE AT THE DESIGNATED EVACUATION SITE PER THE ERP. ALL OTHER COMMUNICATIONS WILL BE THROUGH THE EMERGENCY RESPONSE PERSONNEL ONCE ON SITE. IN ABSENCE OF THE EC, THE BACK UP WILL ASSUME THIS ROLE

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).

IN THE EVENT THAT A WARNING HAS BEEN ISSUED AN EVACUATION WILL BE UNDERTAKEN AND THE EMERGENCY COORDINATOR WILL ATTEMPT TO ACTIVATE EMERGENCY SHUTTOFF AND HYDRO SHUTOFFS IF FEASIBLE AND IMMEDIATELY CONTACT 911 WITH PERTINANT INFORMATION SPECIFIC TO THE LOCATION AND DETAILS OF THE EMERGENCY. ALL IS NOTED IN ERP

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 A SUSPECTED LEAK, SPILL, FIRE, OR EXPLOSION, THE EMERGENCY COORDINATOR (OR BACKUP) IS TO CALL 911 ONCE EMPLOYEES AND CUSTOMERS HAVE BEEN USHERED TO SAFETY EVACUATION POINT. ALL STPES AND DETAILS ARE IN THE ERP

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

ALL EQUIPMENT RELEVANT TO PROPANE IS ACCESSIBLE OUTSIDE THE BUILDING, INCLUDING EMERGENCY SHUTOFF. THE MAIN HYDRO AND FUEL SYSTEM SHUTOFF IS LOCATED INSIDE THE BUILDING (SEE SITE PLAN). SHOULD ACCESS BE REQUIRED AND PERSONNEL ARE NOT ON SIRE, THEN EMERGENCY SERVICE PERSONNEL WILL HAVE TO DETERMINE THE BEST COURSE OF ACTION

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

VIA PHONE OR CELL PHONE UNTIL SUCH TIME AS THEY ARRIVE. UPON ARRIVAL, THE EC WILL LIASIE WITH THE EMERGENCY SERVICES PERSONNEL TO PROVIDE UPDATE. AT THAT STAGE CONTROL WILL BE GIVEN TO THE FIRE SERVICE TO MANAGE THE EMERGENCY

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

TWENTY MINUTES

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Signature 	Telephone No. 5198357329
	Date (dd-mmm-yyyy) July 11, 2016



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

The licence holder will complete Section B in consultation with the local Fire Services.

6. Building and Site Security and Procedures

- | | Yes | No |
|---|-------------------------------------|--------------------------|
| 1. Does the propane location have controlled access to limit unnecessary risk and entry (lock out procedures)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Is there adequate night lighting at the site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Are procedures in place that ensure access routes, aisles, storage area, filling areas and the grounds are kept clear from unwanted materials? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Are there procedures that capture and record the daily inspection of hoses and inspection requirements for filling systems and mechanical devices used in the transfer of propane? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Does the facility have procedures that include a process to isolate and purge any overfilled propane cylinders? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. Are weighing systems validated for accuracy? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 7. Are storage areas clearly marked with the vessels' capacity status (i.e., filled, empty, purged and other hazardous materials)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 8. Are quality assurance procedures in place to ensure that all valves are closed after the propane cylinders are filled?(e.g., QCC valves) | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 9. Is the schedule of maintenance and testing activities retained on site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

7. Water Supply

The propane licence holder should work with the local fire department to determine water supply capabilities that are available based on the propane facility's location.

- | | Yes | No |
|---|-------------------------------------|--------------------------|
| 1. Is a pressurized water system available at the propane facility site? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Can the municipal fire department pump 375 GPM (1420 LPM) of water at this location? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. What is the unobstructed distance to the closest water supply that could be used for firefighting activities? (distance in metres only) | | <u>100m</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. 519 835 7329	Date (dd-mmm-yyyy) July 11th, 2016



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

The licence holder will complete Section B in consultation with the local Fire Services.

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:

What actions will the Emergency Response Coordinator or staff take to notify the adjacent residential occupancies of a possible emergency? Where is the designated evacuation site? Map required in Section C item 9. was not provided in the submitted

To be completed by the Licence Holder

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

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

(dd-mmm-yyyy)

LOCAL FIRE SERVICES

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

Local Fire Services Name *Dwayne S. Armstrong*
Brentford Fire Dept.

Print name

Signature

[Handwritten Signature]

Date (dd-mmm-yyyy)

17-06-2016

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SECTION C: SUBMISSIONS

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

Facility Site Plan.

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

1. The storage location of fixed, portable, and mobile vessels.
2. The maximum volume, types and storage location of hazardous materials.
3. Location of permanent structures on site.
4. Access and egress points and location of barriers.
5. Location of fire and emergency equipment (e.g., sprinkler systems, extinguishers, suppression systems) on site and location of fire hydrant or water supply where available.
6. Location of emergency shut off/shut down switches/valves.

Map of Surrounding Area.

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

7. The capacity and placement of the single largest propane storage vessel, including its setback from the front, rear and side property lines.
8. GPS co-ordinates of the single largest vessel.
9. Visual indication of the single largest fixed vessel and a circle made using the distance in Table 1 as the radius from the single largest fixed vessel.
10. Clear indication of the municipality or municipalities present within the circle.
11. Visual indication of property line information.
12. The location and name of roads within or abutting the site.
13. Key note to the drawing indicating the facility's municipal address, municipal lot number(s) and concession lines as applicable, and the date the map was prepared.
14. Address and contact information for each municipality (municipal clerk or secretary-treasurers of planning board). (Refer to page 5.)
15. Complete "Required Mapping Information from Updated Site Plan" in table below.

Required Mapping Information from Updated Site Plan

Date map prepared (dd-mmm-yyyy) 07-Sep-2016	Capacity of single largest propane storage vessel (USWG) 1996
Tank setback coordinates. Indicate placement on the map.	
Front: <u>34.5 m</u>	Right side property line: <u>25.85 m</u>
Rear: <u>28.75 m</u>	Left side property line: <u>12.25 m</u>
GPS coordinates of single largest vessel: <u>43 10'36.90N 80 16'43.44W</u>	

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Name of person completing this form (please print) Qingpeng Zhao	Official Title Manager
Signature 	Telephone No. 5198357329
	Date (dd-mmm-yyyy) Jan 11th 2016



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SECTION C: SUBMISSIONS (cont'd)

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

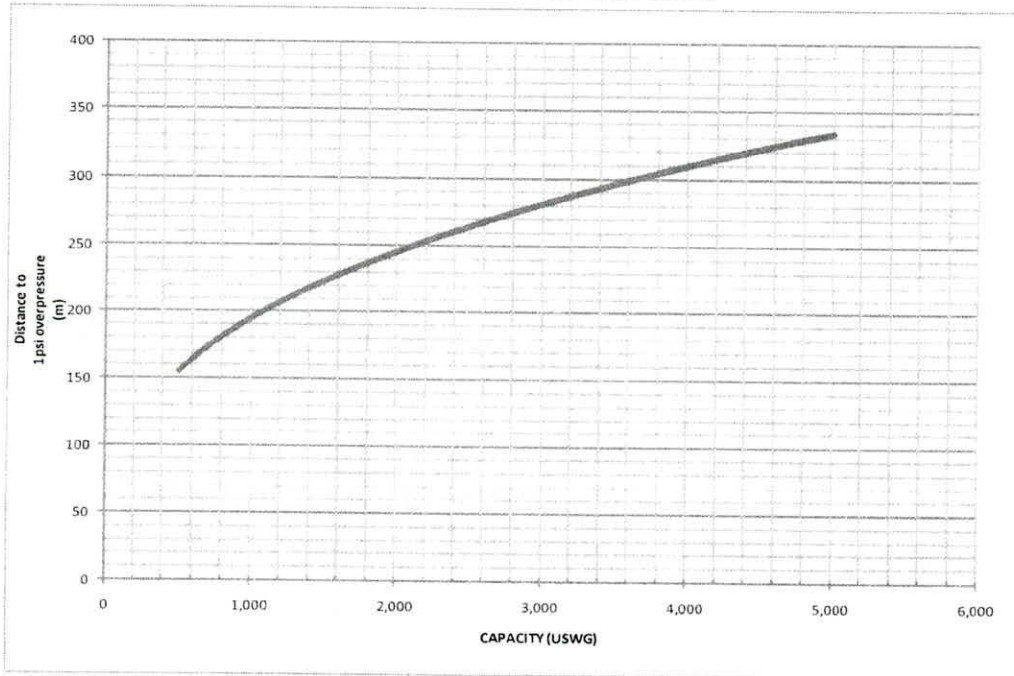
Table 1: Distance Table

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 4078
Customer Service: 1.877.682.8772

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

SECTION C: SUBMISSIONS (cont'd)

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

As an accompaniment to the Map of Surrounding Area, provide the following information about buildings and features present within the circle in Table 2.

Table 2: Buildings and Features

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____				X	25 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes. Name: <u>TIM HORTONS</u> Address: <u>236 KING GEORGE ROAD</u> City: <u>BRANTFORD</u> Province <u>ON</u> Postal Code <u>N3R 6Y1</u>			X		_____ m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations. Name: _____ Address: _____ City: _____ Province _____ Postal Code _____	X				_____ m

* For multi-unit buildings, count each unit as "1".

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) Qingpeng Zhao	Official Title <i>Manger</i>
Signature <i>Qingpeng Zhao</i>	Telephone No. <i>519 835 7329</i> Date (dd-mmm-yyyy) <i>July 16, 2011</i>



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WORKSHEET

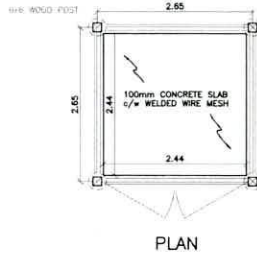
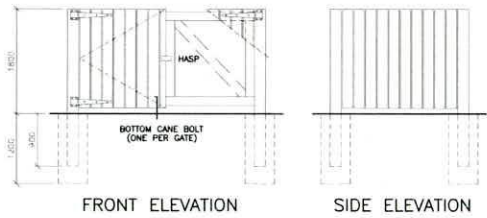
Portable Storage Additional Information Worksheet

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	24	139.2
# 10	2.9	-	-
# 5	1.5	-	-
Total Cylinder Capacity 24 139.2 USWG			

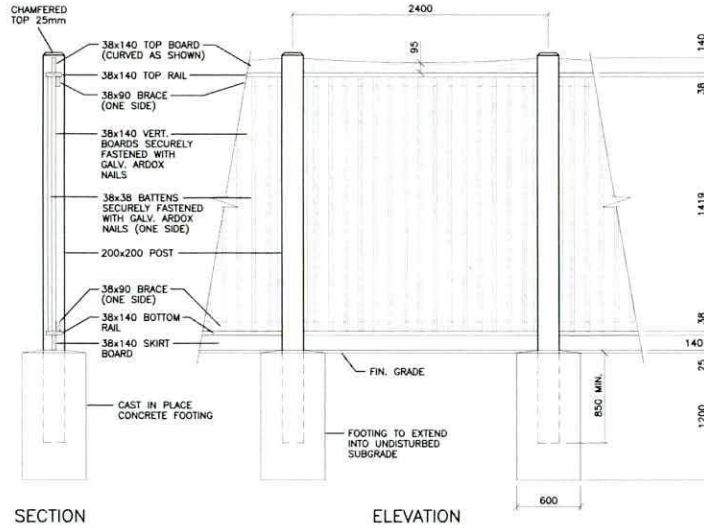
Tanks Stored On-site Not Connected for Use

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

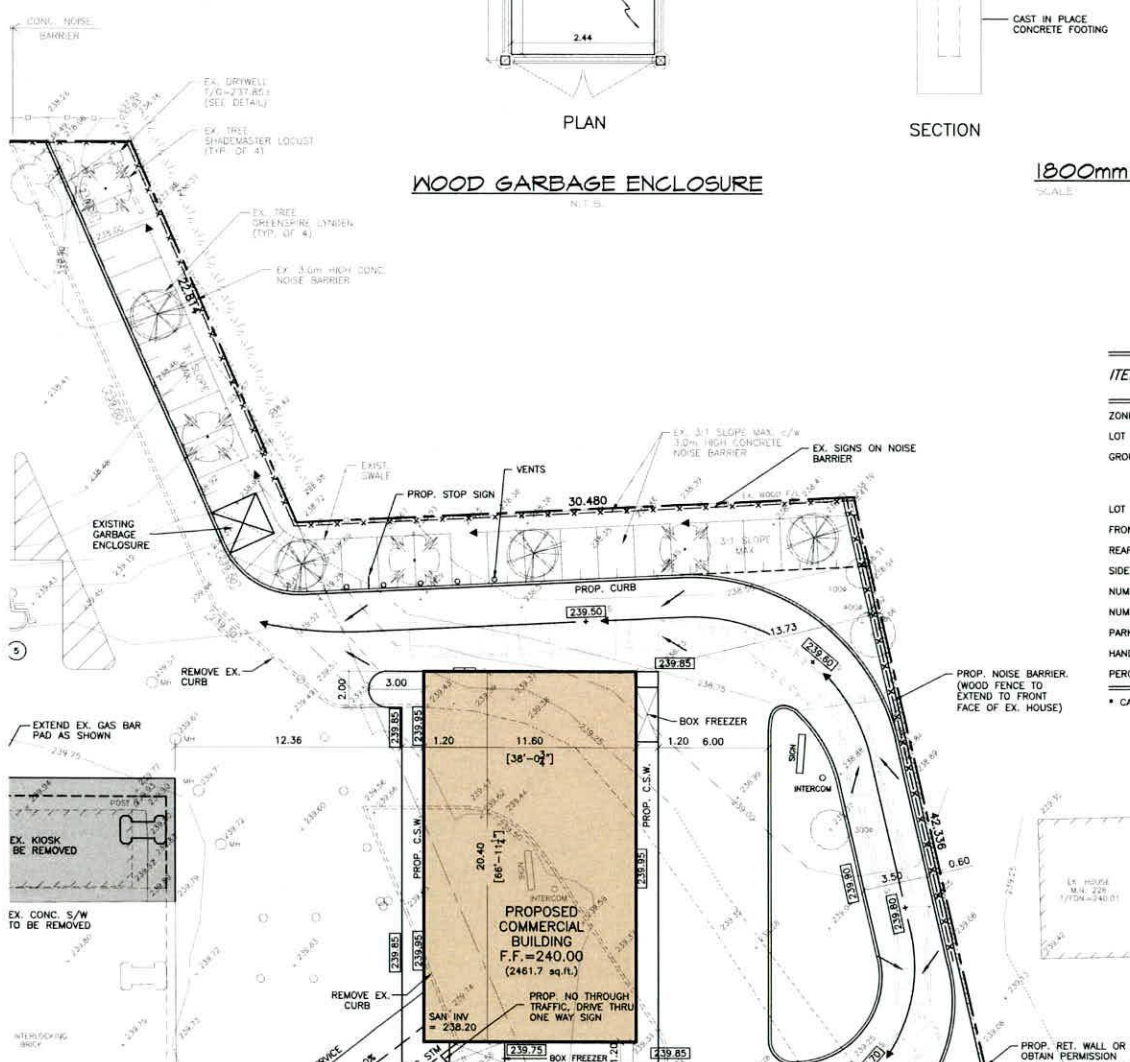
Total Cylinder Capacity	24 139.2 USWG
Total Tank Capacity	-
Total Portable Capacity (Total Cylinder Capacity + Total Tank Capacity)	24 139.2 USWG



WOOD GARBAGE ENCLOSURE
N.T.S.



1800mm WOOD PRIVACY/NOISE FENCE
SCALE N.T.S.



SITE STATISTICS (CAR WASH LOT)

ITEM	PROPOSAL	ZONING BYLAW REQUIREMENTS
ZONING CATEGORY	CB	C6 & CB
LOT AREA (sq. m.)	3841	900 MIN.
GROUND FLOOR AREA (sq. m.)	- EXIST. CAR WASH: 112.0 - PROP. COMM. BLDG.: 238.6 - TOTAL: 348.6	N/A
LOT COVERAGE	9.1%	40% MAX.
FRONT YARD (m)	9.00	9.00 MIN.
REAR YARD (m)	8.49	6.00 MIN.
SIDE YARD (m)	13.73	6.00 MIN.
NUMBER OF PARKING SPACES	16	12 *
NUMBER OF HANDICAPPED PARKING SPACES	1	1
PARKING STALL DIMENSIONS (m)	2.75 x 6.00	2.75 x 6.00
HANDICAP PARKING STALL DIMENSIONS (m)	4.60 x 6.00	4.60 x 6.00
PERCENTAGE OF LOT LANDSCAPED	21.8%	10% MIN.

* CALCULATION IS BASED ON:
PROP. BUILDINGS = 1 SPACE FOR EVERY 30 sq.m. = 340.7 / 30 = 12 SPACES

- LEGEND:**
- 240.00 ORIGINAL ELEVATIONS
 - 240.00 PROPOSED ELEVATIONS
 - 240.00 PROPOSED ELEVATIONS (PREVIOUS CONTRACT)
 - 240.00 PROPOSED SWALE ELEVATIONS
 - 240.00 PROPOSED SWALE ELEVATIONS (PREVIOUS CONTRACT)
 - PROPOSED SWALE
 - GENERAL DRAINAGE

- NOTES**
1. ALL ELEVATIONS ARE METRIC.
 2. BUILDER TO VERIFY COMPLIANCE WITH ZONING BYLAWS (ie. SIDEYARDS, SETBACKS, REARYARDS ETC.)
 2. ALL LUMBER TO BE PRESSURE TREATED SPF No. 1 or 2.
 2. ALL FOUNDATIONS TO HAVE A MINIMUM COVER OF 1200mm.
 2. ALL FOOTINGS TO BEAR ON NATIVE UNDISTURBED SOIL HAVING A BEARING CAPACITY OF 140 kPa.
 2. CONCRETE TO HAVE A MIN. 28 DAY STRENGTH OF 25 MPa.
 2. CONTRACTOR TO NOTIFY ENGINEER PRIOR TO PLACEMENT OF CONCRETE FOR VERIFICATION OF SOIL BEARING CAPACITY.
 2. SECURE ALL LUMBER WITH 51mm (2") LONG GALV. ARDOX NAILS.
 2. ALL DIMENSIONS ARE IN MILLIMETERS.
 2. FENCE TO HAVE NO HOLES OR GAPS.

TBM ELEV. = 239.61m
TOP S.W. CORNER ON WEST CORNER TO SIGN IN THE N.W. CORNER OF SUBJECT PROPERTY AS SHOWN. (GEO)

NO.	REVISION	DATE	BY
7.	GENERAL REVISIONS	05/25/07	D.M.P
6.	TRAFFIC CONTROL SIGNS & NOISE BARRIER	09/28/06	I.A.C.
5.	AS PER CLIENT	09/15/06	I.A.C.
4.	ENTRANCE LOCATION & NOISE BARRIER	09/05/06	I.A.C.
3.	BUILDING DIMENSIONS	08/17/06	I.A.C.
2.	GENERAL REVISIONS	03/12/06	D.M.P
1.	GENERAL REVISION	01/25/06	D.M.P
NO.	REVISION	DATE	BY

J.H. COHOON

propane storage

Propane

1996 USWG PROPANE DISPENSER

- Olivetree RD
- Forsythe ave
- Brier CRESCENT
- REDWOOD ROAD
- EMIDIO CRESCENT
- GRACE AVE
- Console RD

236 King Geroge Rd

1937068 Ontario INC
Located: 236 King George Rd,
Brantford, ON N3R 5L4
Tank Capacity: 1996 USWG (7570 LITER)
GPS: 43.17693, -80.27866
City Clerk - Lori Wolfe
100 Wellington Square, Brantford, ON,
519 - 759 - 4150
Sept 7th, 2016

