



Technical Standards and Safety Authority  
 345 Carlingview Drive  
 Toronto, Ontario M9W 6N6  
 Tel: 416.734.3300  
 Fax: 416.231.4078  
 Customer Service: 1.877.682.8772  
 propane@tssa.org  
 www.tssa.org

**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.

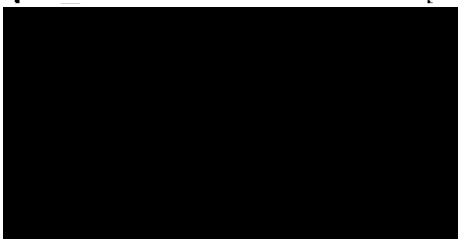
Failure to fully complete this form may result in rejection.  
 Making a false statement may result in a fine or prosecution  
 under the *Technical Standards and Safety Act*

Licence Number

Check applicable type of propane operations:

Cylinders     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: MORGANS CONVENIENCE Corporation No.: 2599305 ONTARIO INC

Operator Name (if different from above): MANI MURUGAN GANESAN

Telephone No.: 519.513.0339 Fax No.: E-mail: gmmorgan17@gmail.com

**B** Street No.: 279 Street Name / 911 Number / Address, if applicable: GRAND RIVER ST NORTH

Town / City or Township / County: PARIS Province: ONTARIO Postal Code: N3L 2N9

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.: 279 Street Name / 911 Number / Address, if applicable: GRAND RIVER STREET NORTH

Town / City or Township / County: PARIS Province: ONTARIO Postal Code: N3L 2N9

Name of Licence Holder: MANI MURUGAN GANESAN

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

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

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: MANI MURUGAN GANESAN		12-03-2018
Name of Senior Management person as defined in the Regulation holding the Record of Training: MANI MURUGAN GANESAN		12-03-2018



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**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. \_\_\_\_\_

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

	PSIG	Serial Number
Tank 1:	250 psig	5.563824
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      Portable: 232 USWG      Mobile: N/A

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Name of person completing this form (please print) MANI MURUGAN GANESAN	Official Title PRESIDENT
Signature 	Telephone No. 519.513.0339
	Date (dd-mm-yyyy) 12-03-2018



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**SECTION A: GENERAL INFORMATION (cont'd)**

Activity Information

<b>Name of Propane Supplier(s)</b>		For Office Use - Party No.	
SUPERIOR GENERAL PARTNER INC. O/A SUPERIOR PROPANE			
Street No.	Street Name / 911 Number / Address, if applicable		
251	Woodlawn Road West, Unit 217		
Town / City or Township / Country		Province	Postal Code
Guelph		ONTARIO	N1H 8J1
Telephone No.	Fax No.	Contact Name	
416-527-3551	N/A	Tom Duncan	
E-mail			
Tom_Duncan@SuperiorPropane.com			

<b>Name of Propane Transporter.</b> If same as above, please check box. <input type="checkbox"/>		For Office Use - Party No.	
SUPERIOR GENERAL PARTNER INC. O/A SUPERIOR PROPANE			
Street No.	Street Name / 911 Number / Address, if applicable		
3089	Niagra RR12		
Town / City or Township / Country		Province	Postal Code
Smithville		Ontario	L0R 2A0
Telephone No.	Fax No.	Contact Name	
(905) 979-1129	N/A	Mac Sultherland, Market Manager	
E-mail			
msultherm@SuperiorPropane.com			

<b>Off-site Cylinder and/or Mobile Storage</b>		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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MANI MURUGAN GANESAN		PRESIDENT	
Signature	Telephone No.	Date (dd-mm-yyyy)	
	519.513.0339	12.03.2018	



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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.

Site has w/g fuel tanks with gasoline, diesel, premium and a separate Ultra Low Sulphur Diesel tank plus dispensers. The shop attached has small amounts of cleaning products but nothing of significance. C-Store may have windshield Washer fluid and other incidentals.

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

The facility has fire extinguishers on site with the one at the dispenser islands and some in the C-Store. The propane island will have an extinguisher as well and the tank will have a fusible link that will melt at 100C and close the Internal Self Closing Valve (ISC) to shut off propane flow. The auto dispenser will have a solenoid in the piping that will activate only when the auto dispenser is running and close once the activity is stopped.

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.

The tank has a fusible link on a chain in case of fire. There is a remote Emergency shut down button to be installed that will kill power to the propane pump. There is a fire hydrant at the corner for the fire fighter access and the tank is visible from the C-Store in the new location.

Maintenance and testing schedule for fire protection controls and devices.

Fire extinguisher to be checked and tagged annually by a qualified Fire Services contractor and the Superior Propane annual inspection tests all of the facility's Emergency systems. This is coupled with the annual TSSA inspection.

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

1. Contacts for Emergency Response

<b>1. Facility Contact Personnel - Key Contact</b>		<b>5. Facility 24-Hour Contact Person</b>	
Name MANI MURUGAN GANESAN	For Office Use - Party No.	Name MANI MURUGAN GANESAN	For Office Use - Party No.
Official Title PRESIDENT / OWNER		Official Title PRESIDENT / OWNER	
Telephone No. 647-502-8277	Fax No.	Cell No. 647-502-8277	Fax No.
E-mail gmmorgan17@gmail.com		E-mail gmmorgan17@gmail.com	
Role and responsibilities in emergency Operates the store during regular business hours and also assigns work to other employees and will contact 9-1-1 in case of emergency		Role and responsibilities in emergency Will assign work schedules and insure all employees are trained in the Emergency Plan and have all the required ROT's in place	
<b>2. Facility Contact Personnel - Alternate Contact</b>		<b>6. Name of Facility Manager</b>	
Name IQBAL SINGH	For Office Use - Party No.	Name IQBAL SINGH	For Office Use - Party No.
Official Title EMPLOYEE		Official Title EMPLOYEE	
Telephone No. 519-513-0339	Fax No.	Telephone No. 519-513-0339	Fax No.
E-mail		E-mail	
Role and responsibilities in emergency Will insure evacuation of customers in store and at dispenser to Master point and kill power to tank area.		Role and responsibilities in emergency Same as item 2 and also makes sure Fire extinguishers are maintained.	
<b>3. Local Fire Services - Key Contact</b>		<b>7. Propane Supplier Key Contact Person</b>	
Name Michael Seth	For Office Use - Party No.	Name Superior Propane Hotline	For Office Use - Party No.
Official Title Fire Chief	E-mail	Official Title Operator	E-mail
Telephone No. 519-442-4500	Fax No. 519-442-4590	Telephone No. 1-877-873-7467	Fax No.
Role and responsibilities in emergency Coordinates the Fire Resources for Brant County and represents the Fire Department at City Council and other Department Functions		Role and responsibilities in emergency Assist the Fire Department as required.	
Fire Services Address County of Brant Fire Department, 61 Dundas St. E Paris, ON, N3L 3H1		Propane Supplier Address Superior Propane, 3089 Regional Rd. 12, Smithville, ON, L0R 2A0	
<b>4. Local Fire Services - Alternate Contact</b>		<b>8. Municipal Contact</b>	
Name Geoff Hayman	For Office Use - Party No.	Name Jayne Carmen	For Office Use - Party No.
Official Title Deputy Fire Chief	E-mail geoff.hayman@brant.ca	Official Title Clerk & Co-ordinator Council Committee	
Telephone No. 519-442-4500	Fax No. 519-442-4590	Telephone No. 519-449-2451	Fax No. 519-449-2454
Role and responsibilities in emergency Assists the Fire Chief in Department duties and assignments and coordinates the Fire Prevention activities of the County.		E-mail jayne.carmen@brant.com	
Fire Services Address County of Brant Fire Department, 61 Dundas St. E, Paris, ON, N3L 3H1		Municipality Name and Address County of Brant, 26 Park Avenue, Burford, ON, N0E 1A0	

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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 facility will not have any additional features over and above the Code regarding the propane installation. The remote Emergency Shut Down (ESD) button will be mounted away from the tank and will allow people to shut power off from a remote location.

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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) 27-02-2018	Print Name of Training Provider: Dowler-Kam Ltd
	Print Name of Instructor: Tom Mitchell
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) 27-02-2018	Print Name of Training Provider: Dowler-Kam Ltd
	Print Name of Instructor: Tom Mitchell
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)	Print Name of Training Provider:
	Print Name of Instructor:
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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**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)	Print Name of Training Provider: MORGANS CONVENIENCE
	Print Name of Instructor: MANI MURUGAN GANESAN
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)	Print Name of Training Provider: MORGANS CONVENIENCE
	Print Name of Instructor: MANI MURUGAN GANESAN
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)	Print Name of Training Provider:
	Print Name of Instructor:
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).  
 The attendant on duty will assess the situation and determine if a leak has occurred or if a fire is present. If a major leak a call to the Propane supplier and the owner will be made and then they will ask all patrons to leave the C-Store and area and a call to 9-1-1 may be required if the leak is major. If a fire a call to 9-1-1 will be made immediately asking for Police and Fire.

Provide indication of accredited training and organization.

Describe what action is to be taken and by whom when a warning is issued (including details of a meeting place in a safe identified area and activating the evacuation plan, if necessary).

The attendant will ask all customers in the C-Store and the dispensing areas to leave the premises. The next door tenant will be warned and then told to meet at the Master Point and have all other employees go to the Emergency point as well and wait for the Emergency Responders to arrive.

Provide indication of accredited training and organization

**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).

The attendants are close to the phones in the C Store and carry cell phones as well. They will make the initial call to 9-1-1 and ask for Police and Fire services. A call to the owner will also be made and then the attendant will remain on site at the Emergency Master Point and wait for the Emergency Responders to arrive and inform them of the situation and the volume in the tank etc.,

Provide indication of accredited training and organization

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

The tank has a lockable equipment enclosure where the valves and pump equipment is located. This can be opened with a bolt cutter if needed. Otherwise the tank is not fenced and is accessible to the fire department 24/7. The property is not fenced and is always free of any obstructions.

Provide indication of accredited training and organization

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

The attendant will remain on site until the Emergency Responders arrive and will provide any information to the Incident Commander (IC) regarding the tank volume and any cylinder status that may be in the area whether full or empty. Once the owner is summoned and arrives then the owner will assume the responsibilities of the main liaison.

Provide indication of accredited training and organization

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

30 minutes

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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 type="checkbox"/>            | <input checked="" 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)           |                                     | 13m                      |
| 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) |                                     | N/A                      |

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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-mmm-yyyy)

**LOCAL FIRE SERVICES**

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

Print name	Signature	Date (dd-mmm-yyyy)
Local Fire Services Name <i>Michael Scott</i>	<i>[Signature]</i>	<i>28 May 2018</i>

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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) <u>25/06/2012</u>	Capacity of single largest propane storage vessel (USWG) <u>Fixed 2000 USWG</u>
Tank setback coordinates. Indicate placement on the map.	
Front: <u>11.55 meters</u>	Right side property line: <u>19.90 meters (Grand River St)</u>
Rear: <u>4 meter + 10mts Road</u>	Left side property line: <u>21.05 meters</u>
GPS coordinates of single largest vessel: _____	

**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) MANI MURUGAN GANESAN	Official Title PRESIDENT	
Signature 	Telephone No. 519 513 0339	Date (dd-mmm-yyyy) 12-03-2018



Technical Standards and Safety Authority  
 345 Carlingview Drive  
 Toronto, Ontario M9W 6N9  
 Tel: 416.734.3300  
 Fax: 416.231.4078  
 Customer Service: 1.877.682.8772  
 propane@tssa.org  
 www.tssa.org

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

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

**Fire services comments, if any:**

Please provide indication of accredited training and organization along with applicable frequency requirements. Please provide clarification towards daily inspection reports on Page 10 of 15

**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.

Print name	Signature	Date (dd-mmm-yyyy)
Local Fire Services Name: Michael Seth, Fire Chief & CEMC		

**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) MANI MURUGAN GANESAN	Official Title PRESIDENT
Signature 	Telephone No. 519.513.0339
	Date (dd-mmm-yyyy) 12.03.2018



Technical Standards and Safety Authority  
 345 Carlingview Drive  
 Toronto, Ontario M9W 6N9  
 Tel: 416.734.3300  
 Fax: 416.231.4078  
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 propaneLICensing@tssa.org  
 www.tssa.org

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**Technical Standards and Safety Act**  
**Propane Storage and Handling Regulation**

**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)	Capacity of single largest propane storage vessel (USWG)
Tank setback coordinates. Indicate placement on the map.	
Front: _____	Right side property line: _____
Rear: _____	Left side property line: _____
GPS coordinates of single largest vessel: _____	

**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) MANI MURUGAN GANESAN	Official Title PRESIDENT
Signature 	Telephone No. 519.513.0339
	Date (dd-mmm-yyyy) 12-03-2018



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 345 Carlingview Drive  
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**SECTION C: SUBMISSIONS (cont'd)**

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

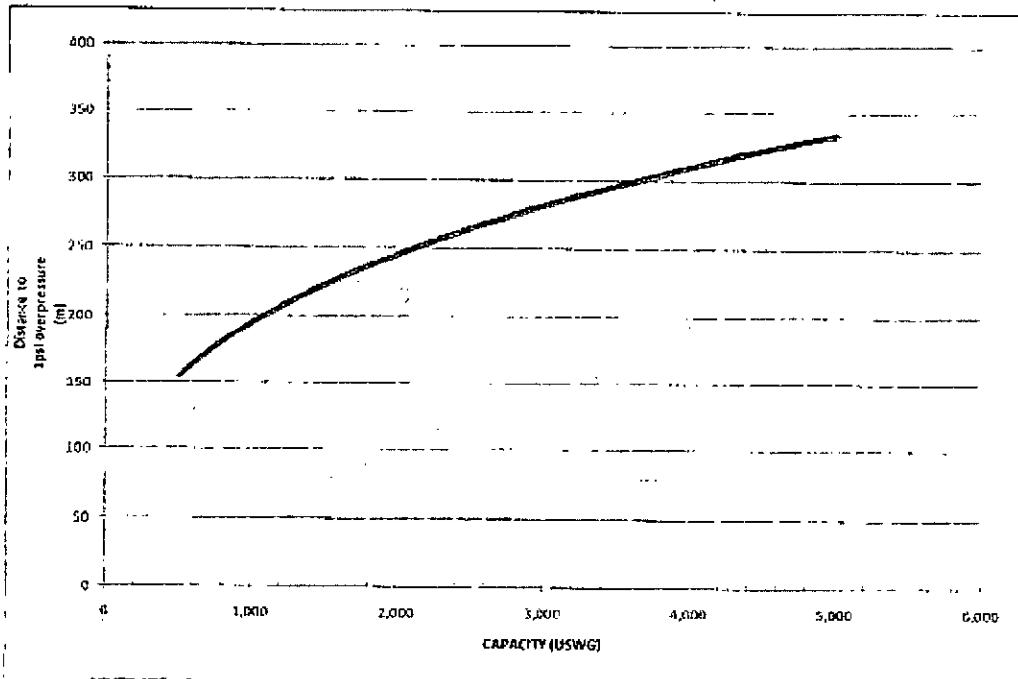
Table 1: Distance Table

Water Capacity (litres)	Nominal Water Capacity (USWG)	Distance to 1 psi overpressure (m)
1,890	500	155
3,780	1,000	195
4,920	1,300	213
6,620	1,750	235
7,130	1,885	241
7,560	2,000	246
18,900	5,000	333

**Formula:**  $D = 16.94 \times (1.524 \times C)^{1/3}$   
 D = Distance to overpressure of 1 psi (meters)  
 C = Tank Total Capacity in USWG

**Parameters:** Density of Propane is 0.5033 kg per litre @ 15 C  
 Assume all vessels are 80% full  
 1 gallon [US, liquid] = 0.003785411784 cubic meter  
 1 cubic metre = 264.17 USWG

Hazard Distance Chart (EPA-TNT model)





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**SECTION C: SUBMISSIONS (cont'd)**

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

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

**Table 2: Buildings and Features**

Buildings and Features Present within the Circle on the Map of the Surrounding Area AND Name and Address of Closest Building or Feature	* Number of Buildings and Features (mark with an "X")				Distance from Tank to Closest Building or Feature
	0	1	2-10	11+	
Industrial buildings or parks or golf courses Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Residential building units specifically permanent single family dwellings, condominiums, and apartments [Redacted]					25 m
Commercial building units specifically retail, restaurants, entertainment, theatres, and sporting complexes Name: Brownies Variety Address: 271 Grand River Street North City: Paris Province Ontario Postal Code N3L 2N9					84.5 m
Commercial building units – continuous occupancy specifically hotels, campgrounds, and resorts Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Sensitive institutions specifically hospitals, schools and day cares, nursing and retirement homes, mental health institutions, and prisons Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m
Emergency responders specifically fire stations, ambulance stations, and police stations Name: _____ Address: _____ City: _____ Province _____ Postal Code _____					_____ m

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

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Signature 	Telephone No. 519.513.0339
	Date (dd-mm-yyyy) 12-03-2018





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**WORKSHEET**

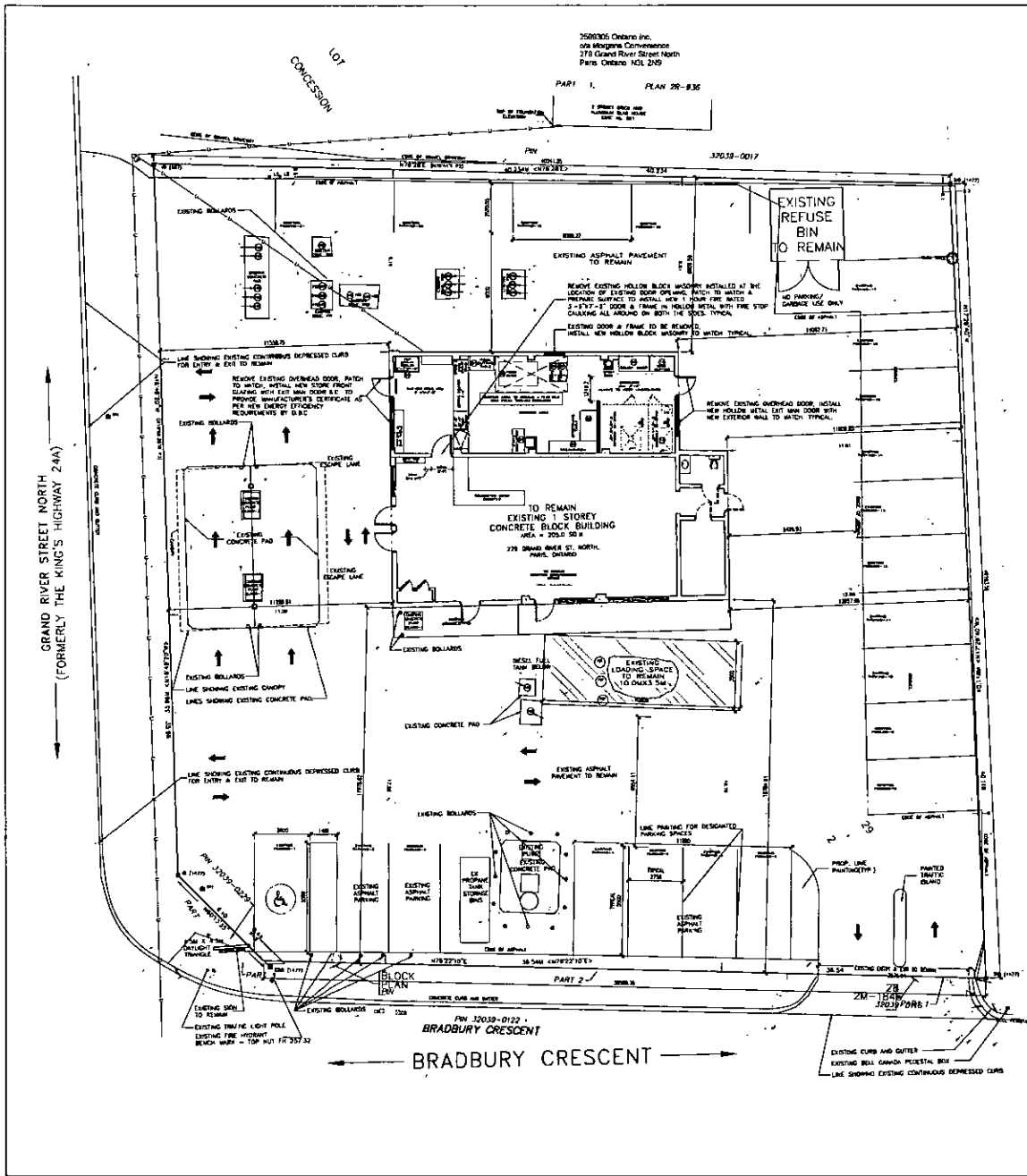
Portable Storage Additional Information Worksheet

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	40	232 USWG
# 10	2.9		
# 5	1.5		
<b>Total Cylinder Capacity</b>			

Tanks Stored On-site Not Connected for Use

Tank Size In USWG	Quantity	Total Volume in USWG
<b>Total Tank Capacity</b>		

<b>Total Cylinder Capacity</b>	232 USWG
<b>Total Tank Capacity</b>	2000 USWG
<b>Total Portable Capacity</b> (Total Cylinder Capacity + Total Tank Capacity)	2232 USWG



**LEGEND**

[Symbol]	EXISTING TO REMAIN
[Symbol]	EXISTING WALL
[Symbol]	PROPOSED WALL
[Symbol]	SIDE WALK
[Symbol]	PAINTED ROUNDLE STRIP
[Symbol]	ASPHALT PAVEMENT AREA
[Symbol]	CONCRETE PAVEMENT AREA
[Symbol]	GRAVEL AREA
[Symbol]	DEMOLITION WORK
[Symbol]	SOFT LANDSCAPE AREA
[Symbol]	FIRE ROUTE
CA	CONCRETE AREA (HARD LANDSCAPE)
[Symbol]	ENTRANCE & EXIT FOR SITE & BUILDING
[Symbol]	STOP SIGN

TOTAL CURB LENGTH = 0.0 LINEAR METER

**CHINTAN VRANI ARCHITECT INC.**  
 CHINTAN J. VRANI  
 5, AYOJ | 504, WILSON, VAN | CANADA  
 8886 HOLLY CREEK RD., WILSON, ONTARIO L9A 4H7  
 PHONE: (519) 774-9017  
 CELL: (519) 561-1800  
 FAX: (519) 878-1808  
 EMAIL: chintan@chintan.ca  
 WWW.CHINTAN.CA

**ZONING INFORMATION:**

(E) PARKING SPACE DIMENSIONS  
 A. PARKING SPACE REQUIRED HERETO SHALL HAVE MINIMUM RECTANGULAR DIMENSIONS OF 2.8 METRES BY 5.5 METRES (9.1 FT. X 18 FT.), EXCEPT THAT:  
 (1) THE MINIMUM WIDTH OF A PARKING SPACE ACCESSORY TO A SINGLE DWELLING SHALL BE 2.5 METRES (8.2 FT.), AND  
 (2) WHERE THE PRINCIPAL ACCESS TO A PARKING SPACE IS PROVIDED ON THE LONGEST DIMENSION OF SUCH PARKING SPACE, THE MINIMUM DIMENSIONS OF THE SAID PARKING SPACE SHALL BE 2.5 METRES BY 6.7 METRES (8.2 FT. X 21.98 FT.)  
 DRIVEWAYS AND PARKING AISLES SHALL HAVE A MINIMUM UNOBSTRUCTED WIDTH OF 6 METRES (19.68 FT.) WHERE TWO-WAY TRAFFIC IS PERMITTED AND 3 METRES (9.8 FT.) WHERE ONLY ONE-WAY DIRECTION OF TRAFFIC FLOW

(B) LOADING SPACE REQUIREMENTS (MINIMUM)  
 THE NUMBER OF LOADING SPACES REQUIRED ON A LOT SHALL BE BASED ON THE TOTAL NET FLOOR AREA OF ALL THE USES ON THE SAID LOT FOR WHICH LOADING SPACES ARE REQUIRED BY CLAUSE (A) OF THIS SUBSECTION, IN ACCORDANCE WITH THE FOLLOWING:  
 (1) LESS THAN 250 SQUARE METRES (2700 SQ FT.) OF TOTAL NET FLOOR AREA - 0 LOADING SPACES.  
 LOADING SPACE - 3.5 METRES BY 10 METRES (11.5 FT X 32.8 FT)

**ZONING:**

ZONE C2 HIGHWAY COMMERCIAL  
 EXISTING RETAIL & RESTAURANT-FAST FOOD USE TO REMAIN,  
 (USES PERMITTED)

**PROPOSED WORK INTERIOR ALTERATIONS**

TOTAL AREA = 205.00 S.M.  
 NO LOADING SPACE REQUIRED UP TO 250.0 S.M.

**PARKING STATISTICS:**

TOTAL EXISTING PARKING SPACE = 21 SPACE  
 REQUIRED PARKING  
 GAS BAR = 3 SPACES  
 RESTAURANT - TAKE-OUT = 1 PER 100 M<sup>2</sup> (107 SQ FT.)  
 RETAIL STORE = 1 PER 25 M<sup>2</sup> (269 SQ. FT.)  
 PARKING CALCULATION  
 EXISTING RETAIL STORE AREA = 127.32 S.M.  
 PARKING REQUIRED = 127.32 S.M. ÷ 25.0 S.M. = 5 SPACE  
 RESTAURANT- TAKE-OUT AREA = 77.68 S.M.  
 RESTAURANT- TAKE-OUT AREA = 77.68 S.M. ÷ 10.0 S.M. = 8 SPACE

**REQUIRED PARKING**

EXISTING GAS BAR = 3 SPACES  
 EXISTING RETAIL STORE = 5 SPACE  
 RESTAURANT- TAKE-OUT (NOW) = 8 SPACE  
 TOTAL PARKING SPACE REQUIRED = 18 SPACE  
 TOTAL EXISTING PARKING SPACE = 20 SPACE

**NOTE:**

- D.B.C. 3.7.4.8 (3)
- NOT MORE THAN ONE WATER CLOSET TO SERVE BOTH SEXES NEED TO BE PROVIDED IN A GROUP E OCCUPANCY WHERE:
- (1) THE OCCUPANT LOAD IS NOT MORE THAN NINE (9) PERSONS, OR
- (2) WHERE THE TOTAL AREA OF THE OCCUPANCY, EXCLUDING BASEMENT, IS NOT MORE THAN 300.0 S.M.

**EXISTING SITE PLAN WITH PROPOSED INTERIOR ALTERATION WORK**

NOTE:  
 THIS DRAWING IS BASED ON SURVEYOR DRAWING;  
 THE BUILDING DETAIL IS BASED ON DIMENSIONS AS PROVIDED BY THE OWNER.  
 THIS DRAWING IS FOR PRELIMINARY REVIEW AS PART OF THE CONSULTATION ONLY FOR SITE PLAN REVIEW.

14		
13		
12		
11		
10		
9		
08 PERM	SEP 14/2014	
07 FINAL REVIEW	SEP 10/2014	
06 REVISED-2 - REVIEW	SEP 08/2014	
05 REVISED REVIEW	SEP 05/2014	
04 FINAL REVIEW	SEP 04/2014	
03 EXISTING LOADING SPACE SHOWN AS TOWN CONSERVATOR	AUG 22/2014	
02 TOWN HALL'S COMMENT	AUG 22/2014	
01 OWNER'S REVIEW	JULY 27/2014	
NO	ISSUED FOR	NO

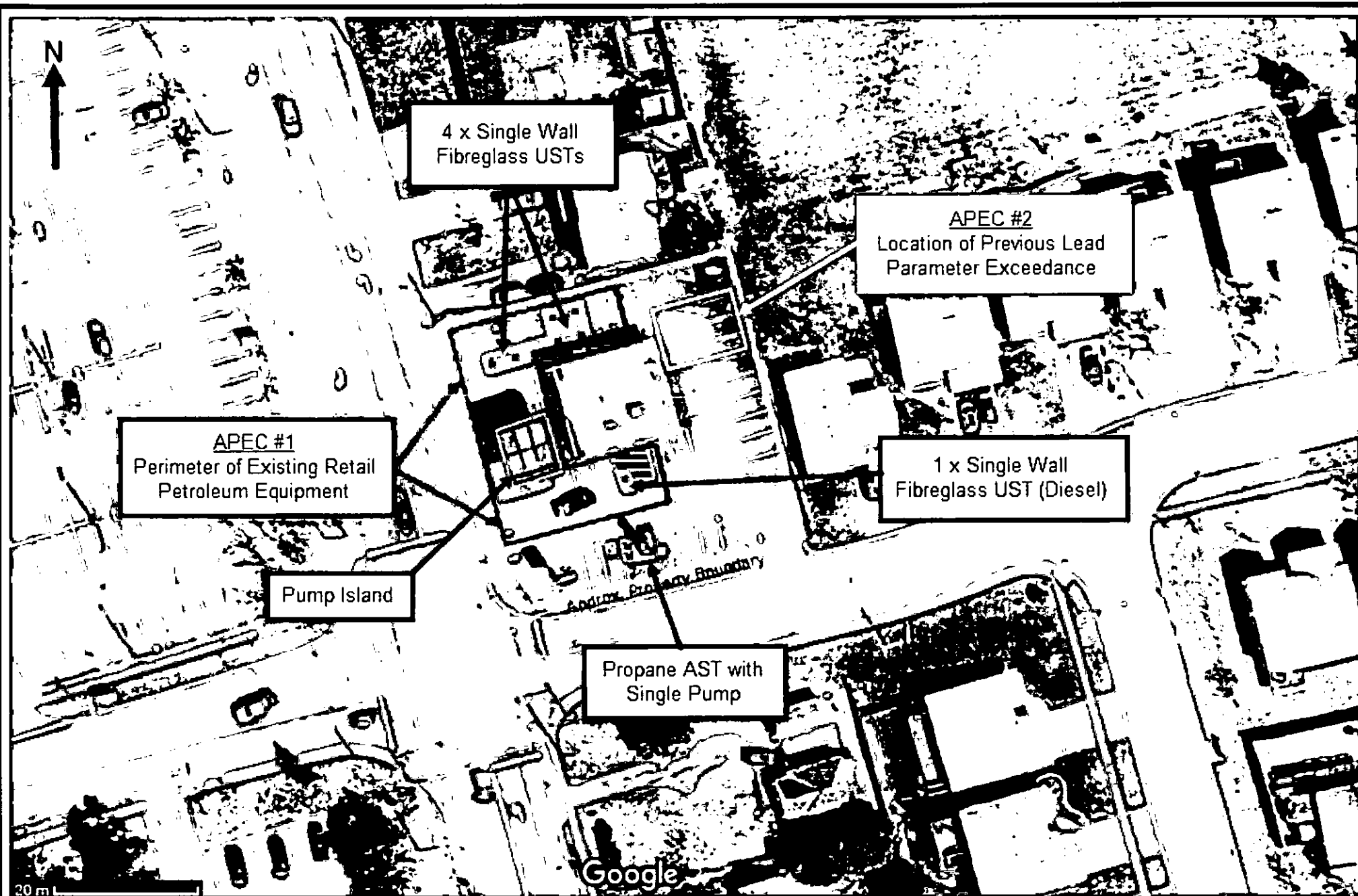
**PROJECT**  
 EXISTING BUILDING INTERIOR ALTERATION  
 270 GRAND RIVER STREET NORTH  
 PARIS, ONTARIO

**- EXISTING SITE PLAN WITH PROPOSED INTERIOR ALTERATION WORK**

NOTE:  
 - DO NOT SCALE DIMENSIONS  
 - ALL DIMENSIONS TO BE CHECKED AND VERIFIED ON THE JOB SITE  
 - ANY AND ALL DISCREPANCIES TO BE REPORTED TO THE ARCHITECT.  
 - ALL DRAWINGS REMAIN THE PROPERTY OF THE ARCHITECT

PROJECT NO: 1015 - 1011 DRAWN BY: AV  
 DATE: JULY 20/2014 CHECKED BY: CM  
 DRAWING NO.

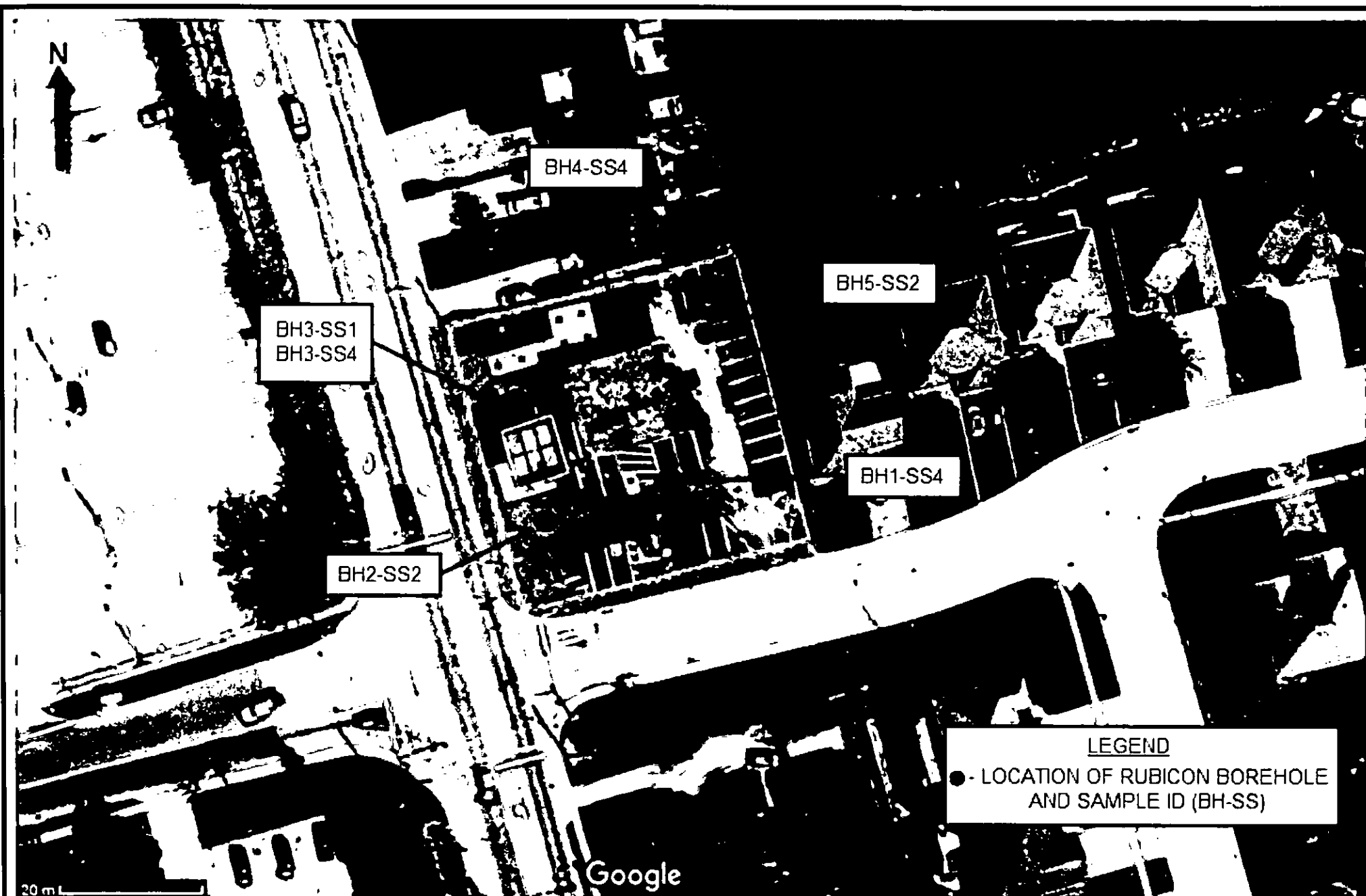
**SP-1.0**  
 25/13



PROJECT #:	NAME	DATE
R59225	NL	FEBRUARY 2018
DRAWN BY:	NL	FEBRUARY 2018
CHECKED BY:	PR	
REVISIONS:		



FIGURE 2  
SITE PLAN - LOCATION OF APECs



PROJECT #	B59225	NAME		DATE	
DRAWN BY:	NL			FEBRUARY 2018	
CHECKED BY:	PR			FEBRUARY 2018	
REVISIONS:					



FIGURE 3  
SITE INVESTIGATION

March 12, 2018

County of Brant Fire Department  
Fire Chief  
26 Park Avenue  
Burford, ON  
NoE 1A0

Dear Chief Michael Seth,

As you are aware, the new Provincial Regulation under Ontario Regulation 440/08 requires all propane handlers in Ontario to complete a Risk and Safety Management Plan (RSMP).

This RSMP is required by the Technical Standards and Safety Authority (TSSA) in order to provide a propane license.

Part of the process includes that the local Fire Department review the RSMP.

Therefore, we kindly ask you to review this RSMP for 2599305 Ontario Inc. o/a Morgans Convenience at 279 Grand River Street North, Paris Ontario.

Please complete page 11, with your comments and recommendations, sign, and return to: [gmmorgan17@gmail.com](mailto:gmmorgan17@gmail.com)

Your earliest respond would be greatly appreciated.

Sincerely,



Mani Murugan Ganisan  
President

Encls.

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